

Title: **PATIENT REQUEST FOR
PHYSICIAN CHANGE**

Gerald L. Parton, President and CEO

Reviewed: 3/18, 10/19

Revised: 8/94, 7/02 (H), 2/03 (H), 11/03 (H),
5/05, 4/13, 11/19

I. POLICY:

East Jefferson General Hospital respects the right of patients to be involved in all aspects of their care, including choice of treating physicians. Patients who request assistance to change their attending or other treating physician will have their needs addressed in an appropriate, timely manner, with due regard for the physicians involved.

II. DEPARTMENTS AFFECTED:

Administration, Nursing Service, Medical Staff Office, Medical Staff.

III. PROCEDURES:

- A. Patients or the patients' representatives who express a desire to change treating physicians should be referred to the charge nurse. The charge nurse should discuss the patient's concerns with the patient and the attending physician.
- B. The attending physician will be asked to consult the physician of the patient's choice for possible transfer of care.
- C. If a qualified and willing physician has been identified, the current attending should transfer the case per an order in the medical record.
- D. If no appropriate and willing physician can be identified and the patient or his/her representative still desires to change, the Chief of the Clinical Division in which the physician sought to be changed is a member shall be called and advised of the situation. The attending physician on the case should be encouraged to initiate this contact but, should the attending physician decline to do so, Nursing Administration will place the call and describe the circumstances as then known. Once called, the Clinical Division Chief should review the case as promptly as possible to ascertain the reason for the patient's dissatisfaction and assist in resolving the patient's concerns to the extent possible.
- E. The initial request to change physicians, the expressed reasons, efforts made to identify an appropriate and willing physician and the reasons why a physician change is either not appropriate or available should be documented in the nursing and physician progress notes by all involved in these efforts.

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IV. RESPONSIBILITY:

Questions concerning this policy and recommended revisions shall be directed to the hospital's Medical Director or designee.

Reviewed and Approved by Medical Executive Committee on 11/11/03, 11/12/19