**Sample Policies & Procedures for Referral Content**

**Policy:**

Our practice reviews incoming referrals to ensure that the information received is complete and supports appropriate scheduling of requested consultations.

**Purpose:**

To ensure that our office efficiently and accurately schedules patients with the appropriate clinician and to make each encounter as productive as possible.

**Procedure:**

1. Our office [INSERT SPECIFIC JOB TITLE, IF APPROPRIATE] reviews all incoming referrals for the following key elements:

	1. Clinical question(s) to be addressed
	2. Type of referral (e.g., diagnostic/therapeutic, co-management, transfer of care)
	3. Urgency of referral including justification for level of urgency
	4. Patient demographics (including communication needs, primary language, relevant cultural/ethnic information)
	5. Clinical information
	6. Current referring practice’s care plan, treatment, test results, and procedures.
	7. Communication with patient/family/caregiver (i.e., who will be responsible for communicating with the patient/family/caregiver, and when.
2. If a referral does not include the key elements specified above, the referring office is contacted and asked to provide the missing information.
3. For patient self-referrals, our office asks that the patient provide as much information as possible and include permission for our office to contact clinicians who have treated the patient previously for additional information if necessary.