ABC Family Physicians* – XYZ Gastroenterology*
Care Collaborative Guidelines

Transition of Care

Mutual Agreement
Each Practice will maintain accurate and up-to-date clinical records

Expectations

<table>
<thead>
<tr>
<th>ABC Family Physicians (ABC)</th>
<th>XYZ Gastroenterology (XYZ)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creates referral and discusses need for referral with the patient and formulate clinical question to be addressed by consultant.</td>
<td>Provide contact person(s) to coordinate services with referring provider</td>
</tr>
<tr>
<td>Transfers information, demographics, and brief relevant clinical history</td>
<td>Assist ABC when uncertain of appropriate laboratory or imaging diagnostics needed prior to appointment</td>
</tr>
<tr>
<td>Provides patient with specialist contact information</td>
<td></td>
</tr>
<tr>
<td>Orders appropriate laboratory and diagnostic testing for condition(s) listed in appendix A, prior to appointment</td>
<td></td>
</tr>
</tbody>
</table>

Access

Mutual Agreement
Be available for urgent help to physician, or mid-level as directed by physician via phone.
Be prepared to respond to urgencies in a timely manner.

Expectations

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<tr>
<td>Determines reasonable time frame for specialist appointment.</td>
<td>Have timely consultation appointments available to meet patient and referral source requests. Non-urgent referrals to be seen within 4-6 weeks of request. Urgent referrals to be seen within 2-7 days as decided by mutual phone discussions between referring and consulting physicians. Discuss special arrangements, as needed Do not make specialty to specialty referral w/o discussion with PCP</td>
</tr>
<tr>
<td>Agree to accept 1-2 patients/month seen by consultant who do not have a PCP</td>
<td></td>
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*Real names changed to protect privacy.
Collaborative Care Management

**Mutual Agreement**

Define responsibilities between ABC, XYZ and patient.

Clarify who is responsible for specific elements of care. (Drug therapy, referral management, diagnostic testing, care teams, patient calls, patient education, monitoring, follow up).

Give and accept respectful feedback when expectations, guidelines or standard of care are not met.

### Expectations

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<tr>
<td>Suggest type of transition of care</td>
<td>Reviews information sent by FFP</td>
</tr>
<tr>
<td>Resumes care of patient when patient returns from XYZ care and acts on care plan developed by XYZ</td>
<td>Sends timely reports to ABC to include follow up and test results, within 3 business days of consultation</td>
</tr>
</tbody>
</table>

**Collaborative Care Management**

**Mutual Agreement**

Consider patient/family choices in care management, diagnostic testing and treatment plan. Provide to and obtain informed consent from patient according to community standards.

### Expectations

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<tr>
<td>Explains XYZ results and treatment plan to patient as necessary</td>
<td>Informs patient of diagnosis, prognosis and follow-up recommendations</td>
</tr>
<tr>
<td>Identifies whom the patient wishes to be included in their care team</td>
<td>Recommends appropriate follow up with XYZ and ABC</td>
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</table>

**ABC Family Physicians**

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**XYZ Gastroenterology**

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Appendix A

Referral conditions and appropriate laboratory and/or diagnostic testing required

Referral for upper or lower endoscopy

- Medical summary of patient’s chronic medical conditions and current medications will be provided. In addition, for non-screening exams, a brief clinical history will be provided along with a clinical question.

Referral for abnormal Liver Enzymes

*Please send if available:*
- Most recent CBC
- Most recent CMP
- The last normal CMP/liver enzymes
- INR
- AFP
- Iron Studies including ferritin
- Ceruloplasmin
- Alpha 1 Antitrypsin
- AMA (antimitochondrial antibody)
- ANA (antinuclear antibody)
- SMA (smooth muscle antibody) aka F Actin Ab
- Hepatitis profile (A, B, C)
- Celiac testing (tTG and IgA)
- Abdominal US or CT of abdomen
- Office notes that pertain to abnormal liver enzymes

After consultation completed, recommendations will be made to PCP regarding recommended follow-up, timing of any additional testing and the patient will be directed to follow-up with PCP within a recommended time frame.

Referral for Hepatitis C

Patients will be educated regarding the potential benefits of treatment of their hepatitis C by ABC providers. Shared decision-making discussion will be had regarding risks versus benefits and only those patients willing to accept the risks and comply with treatment will be referred. Patients actively using alcohol and unwilling to stop will not be referred for treatment. Patients with a limited life expectancy will not be referred for treatment.

- Hepatitis C genotype
• Hepatitis C viral load
• Drug and alcohol screening
• HIV status
• Hepatitis A and B vaccination status or
• Hepatitis A antibody total
• Hepatitis B core total antibody
• Hepatitis B surface antigen
• Hepatitis B surface antibody
• Fibrosure scoring

Patient’s completing hepatitis C treatment will be returned to ABC Family Physicians for follow-up and recommendations regarding future lab testing.

**Referral for chronic diarrhea after acute diarrhea has been ruled out**

• Stool studies including culture, O&P, Giardia, Cryptosporidium, C diff, fecal leukocytes
• ESR and CRP
• TSH
• Celiac testing (IgA, tTG)
• Most recent colonoscopy with findings, if completed

**Referral for IBD**

• Screen for depression and substance abuse
• Yearly flu shot
• Skin exams for patients on Azothioprine (Imuran)
• *Avoid live vaccines in immune suppressed patients
• Most recent upper endoscopy or colonoscopy with findings, if completed

Once consultation completed and any additional testing is completed, patient will be returned to ABC Family Physicians for ongoing management and to follow patient’s clinical course

**Liver Disease**

• Dates of Vaccinations for cirrhotic patients not immune to Hepatitis A and B
• Yearly flu shot
• Skin exams for patients on Azothioprine (Imuran)
• *Avoid live vaccines in immune suppressed patients

Because of frequent visits it is best to have the PCP be responsible for fluid management and periodic paracenteses. ABC Family Physicians manage regular surveillance exams and screening for hepatocellular carcinoma following recommendations of consultant.