



10000 West Colonial Drive
Ocoee, FL 34761

Policy & Procedure

DEPARTMENT: Medical Staff	ORIGINAL: 08/2014	PAGE: 1 of 3
POLICY: Emergency Department Call Coverage	REVIEWED:	
APPROVAL: Medical Staff 9/11/2014; 2/11/2016 Board 9/16/2014; 2/16/2016	DATE:	REVISED: 02/16/2016

POLICY: Emergency Department Call Coverage

PURPOSE: To establish clear guidelines by which the medical staff and the hospital staff can provide timely and appropriate care to patients presenting to the emergency department for care.

OBJECTIVE: To provide timely and appropriate patient care to all patients presenting to the emergency department of the hospital in accordance with EMTALA regulations, Medical Staff Bylaws, Rules and Regulations and hospital policies.

PROCEDURE:

Call Coverage Responsibility

1. Emergency Department call coverage duties come with the privilege of practicing in the hospital. Members of the medical staff shall not be permitted to relinquish specific clinical privileges or request a change in medical staff category for the express purpose of emergency on-call duties.

Call Schedule

The medical staff sections are responsible for preparing a call schedule for those specialties determined by the Medical Executive Committee to have a call schedule.

1. The call schedule begins at 7:00am each day unless otherwise indicated on the schedule.
2. Each specialty within a section is encouraged to designate a member to establish their call schedule and to provide it to Medical Staff Services two (2) weeks prior to the beginning of the month.
3. Any schedules not provided by the specialty will be established by Medical Staff Services as the designee of the Section Chief.
4. All specialty schedules will be combined into one (1) schedule by Medical Staff Services and will be distributed to all physicians taking call and all hospital departments by electronic mail and will be posted on the hospital intranet for viewing by hospital employees and on the hospital web site for viewing by physicians through the physician portal.



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Call Schedule Changes

1. After the schedule has been distributed, the physician on-call is responsible for finding alternate coverage if he/she is not available for coverage on any assigned date.
2. Call Schedule changes must be submitted in writing, signed by both physicians to the following:
 - a. Monday – Friday, 8:00am – 4:30pm: Fax signed form to Medical Staff Services 407-253-1686
 - b. All other times and days: Fax signed form to Administrative Supervisor 407-253-2519
 - i. The Administrative Supervisor will notify the Emergency Department, sign and date the form and will forward the form to Medical Staff Services.
3. Changes made to the schedule during the hours listed in section “a” above will be sent out to all departments by electronic mail and posted to the intranet and the web site.
4. Changes made after hours will be made when Medical Staff Services re-opens and copies of the changes will be maintained in Medical Staff Services.

On Call Physician Responsibilities

1. The expectation at Health Central Hospital is that, for patients identified by the Emergency Department physician as having an emergency medical condition, the on-call physician must physically appear in person at the Emergency Department within thirty (30) minutes of being contacted by the Emergency Department physician. The determination of the Emergency Department physician shall be controlling in this regard.
(Amended by MEC 12/16/14; Board 12/16/14)
2. If, after telephone consultation with the Emergency Department physician, it is agreed the patient can be discharged and seen in the office, the on call physician agrees to see the patient in his/her office one (1) time for the acute problem regardless of the patient’s ability to pay for the services.
3. If the on call physician delegates his call responsibility to a covering physician, it is the on call physician’s responsibility to ensure the covering physician is a member of the medical staff and has the appropriate privileges needed to cover the call.
4. Allied Health Professionals (AHPs) may not be assigned to take ER Call; however, the care of a patient seeking emergency medical treatment may be delegated to an appropriately credentialed/privileged AHP by the on call physician. It is expected that all



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such delegation to the AHP is under the supervision of the on call physician with the agreement of the ER physician.

No Response to Call

1. If the on call physician is unavailable or refuses to respond to the call; this shall be considered conduct likely to be detrimental to patient safety or the delivery of quality patient care and may lead to disciplinary action.
2. If the on call physician is unavailable or refuses to respond to the call the Emergency Department should contact the Administrative Supervisor who will then notify medical staff/hospital leadership to resolve the issue as follows:
 - a. The Administrative Supervisor will determine if the situation should be escalated to the Administrator on Call, AND
 - b. the appropriate Section Chief, if unavailable;
 - c. the Section Chief Elect, if unavailable;
 - d. the Chief of Staff, if unavailable;
 - e. the Vice Chief of Staff.
3. If the Section Chief/Section Chief Elect is unable to obtain coverage, the issue should be escalates to the Chief of Staff/Vice Chief of Staff for resolution, If the Chief of Staff/Vice Chief of Staff is unable to obtain coverage the Emergency Department shall initiate transfer of the patient to an appropriate facility.
4. The Emergency Department should document the incident on a Peer Review form and forward to Quality Management Department.