

LEE HEALTH SYSTEM SPECIAL RADIOLOGY PROCEDURES

GUIDELINES FOR SCHEDULING PROCEDURES

The schedulers in your office are responsible to provide LHS scheduling with the following; complete and accurate information to ensure there are no delays in your patient's treatment

- Patient's name and Date of birth
- Allergies
- Blood thinners
- Diagnosis
- Procedure to be performed (previous films)
- Physician's order (timed, dated and signed)(needs to specify site and side)
- History and physical (within 30 days / timed, dated and signed)
- Any lab results from the last 30 days (not required, but appreciated)
- Name of person scheduling

Forms with unapproved abbreviations, cross-out and illegible handwriting cannot be accepted due to safety implications. The case is not considered scheduled until all the required information is received and confirmed.

IMPORTANT REMINDER; Patient information for scanning into the electronic medical record must be **100% correct** for patient safety and regulatory compliance. Examples of the most common incomplete/incorrect office documents are as follows: Missing date, Missing time, Abbreviations, Incomplete order sets, Missing signatures, missing two patient identifiers a (Name, Date of Birth, Incomplete or missing information on consent forms.

Scheduling

LMH, HP, CCH = PH 239-424-1499 Fax 239-424-1439

GCMC= PH 239-561-3200 and 239-424-1499.

ALL CAMPUS FAX = 239-561-3260

