**Partnering with Primary Community Pediatricians following**

**Pediatric Emergency Department Visits**

Monroe Carell Jr. Children’s Hospital at Vanderbilt

Communication with primary care providers are an important part of ED care; both ensuring continuity of care from the pediatrician's office to the ED and after ED care.  As such, the following is an example of a medical home policy that contains items that should be considered for implementation in all EDs as a part of the care of pediatric patients.

* Dedicated staff members whose primary responsibility is facilitating follow-up phone calls, emails, or other indicated communication methods to our referring pediatricians. These staff members can be experienced RNs or providers who monitor arriving and discharging patients and facilitate follow-ups through the indicated communication method to primary care physician to maximize continuity of care.
* Expect Form/Access Center- Referrals are made through our Access Center; a computerized Expect Form is generated with the referring MD’s contact information. During the call, the referring MD is asked if they would like a follow-up and to indicate their primary preferred communication method. This triggers informatics flags on the Pediatric Emergency Department (PED) patient list that indicates the referring MD has requested a follow-up.
* Our goal is that all admitted patients and those who are referred through the access center and request a follow-up receive one 100% of the time. These follow ups will be made by the Pediatric Emergency Physician and/or dedicated communications staff member in the indicated communication method form.
* The Triage Note and Discharge Summary are faxed to all MD’s that are identified by the family following discharge.
* Any patient who leaves the department prior to or before treatment is completed receives a follow-up phone call explaining the risks and benefits of leaving prior to being seen. The MD of record is contacted for high acuity patients.
* Pertinent lab values are reported to primary care physician and appropriate specialty care providers by requested method of communication either phone or email.

Revised by Katherine Mandeville, MD MSc and Joyce Li, MD MPH, March 2020