



# Emergency On-Call Service Manual for Residents

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## Emergency On-Call Service

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## 1) INTRODUCTION

Welcome and Congratulations on your selection to participate in the Residency Program here at The Eye Center at Southern College of Optometry.

This begins an exciting time in your training and career. The upcoming year will be full of new opportunities and challenges. A vital part of any residency program in optometry is exposure to patient care and clinical situations that you might not otherwise encounter for months or even years in practice. Participation in TEC's Emergency On-Call Service will help to provide just such experiences.

This manual has been designed to provide you with basic information regarding our Emergency On-Call Service and to serve as a reference during the provision of such care. Take time to thoroughly read the entire manual. Should you have questions, please feel free to contact me at your convenience.

Once again, welcome to The Eye Center at Southern College of Optometry and the start of an exciting year as an Optometric Resident.

Sincerely,

*Chris Lievens*

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## 2) GENERAL GUIDELINES

### A. Reporting / Supervision

For all aspects of reporting during your Residency Program, you are accountable to your Residency Supervisor. Your Supervisor will be a valuable contact during the provision of Emergency On-Call Care.

The Chief of Staff of The Eye Center at Southern College of Optometry is responsible for oversight of the Emergency On-Call Program. As an

extension of care through TEC he will monitor activities and collect Emergency Telephone Triage Forms. Any issues or problems you may encounter with your On-Call Duty should be brought to the attention of the Chief of Staff as soon as possible.

#### B. Responsibilities

As a doctor and Resident at TEC / SCO you are responsible for the timely acceptance of your On-Call duty and appropriate “passage” of duty to the next individual in order of duty.

“*Duty*” shall be defined as the period of time for which YOU are responsible for responding to urgent/emergent after-hours calls and those calls which may come during regular business hours of TEC when scheduled TEC/SCO breaks occur (when college is ‘closed’). Duty begins approximately on Thursdays of the date posted in the On-Call Schedule.

During your period of “duty” you must be accessible by mobile phone at all times and no further away from Campus than 40 minutes by car.

In the event that a personal emergency or illness renders you unable to be available as described above during your duty, you will be responsible for finding another Resident to cover you during this period. Any other changes to the enclosed schedule must be brought to the attention of the Chief of Staff prior to the date the change will take place.

#### C. Facilities

All after-hours (and scheduled TEC/SCO break) urgent care provided will take place in room 136 on the Main Level (1<sup>st</sup> floor) of the Tower. A room has been equipped for use. Due to security concerns and temperature variations in TEC, this room will be more convenient and safe for providing after-hours care. Please report any equipment failures and/or supply issues to Ms. Gail Killingsworth, during regular business hours, as soon as possible. It is our goal to provide you with basic supplies and equipment (including necessary forms and paperwork) for the provision of care.

#### E. Program Support

As a part of your Program Requirements, it is necessary for you to keep a log of the patients and types of Ocular and Visual Conditions you encounter. Please include all after-hours, emergent patient contacts in your log.

#### F. Evaluations

While no evaluation is included in your On-Call Duty, the Chief of Staff will be monitoring your activities via the Emergency Telephone Triage Forms and will provide feedback of your performance and/or any issues/concerns to your Residency Supervisor.

### 3) PROTOCOLS

#### A. Schedule Changes and Coverage

It is the responsibility of each Resident to arrange for appropriate coverage or changes to the On-Call Schedule provided in this Manual.

#### B. Reporting for “Duty” / Passing “Duty”

Duty officially begins on Thursday on the date listed in your On-Call Schedule. It will be the responsibility of the two Residents involved to arrange for “passage” of the mobile phone. Any delinquencies in reporting for OR passing duty will be brought to the attention of your Residency Supervisor.

#### C. Telephone Triage of Emergent Calls

For the purposes of providing after-hour and scheduled SCO / TEC Break coverage, an “Eye Emergency” shall be defined as *“an event where eyesight is at risk.”* It will be your job to provide reassurance and assistance to those patients under the impression that they have a true “eye emergency”. Triage shall be defined as *“the process of contacting, obtaining pertinent data from, and making appropriate decisions regarding the urgent / emergent nature of a patient’s visual and/or ocular condition.”*

The moment your interaction with a potential patient begins, the way you interact may set the tone for the entire conversation. Additionally, the first interaction initiates your responsibility and accountability for this patient’s care and eventual outcome.

Here are a few tips to remember when you are answering On-Call pages:

- 1) You are representing the Staff Doctors, Faculty and staff of TEC and SCO in your capacity as a Resident Doctor;
- 2) Consider all calls as emergencies when the patient perceives them as such and treat them as you would a family member;
- 3) Be calm and empathetic – show you care, be professional and collect pertinent facts quickly and efficiently;
- 4) Use the Emergency On-Call Triage Form to collect data and to document the conversation;
- 5) Listen and document carefully. Avoid distractions and concentrate on the call.

If, during, the course of the phone triage, it is determined that a potentially Life Threatening situation has occurred with the patient; instruct the patient to *“hang up and dial 911 immediately”* or get the address of the patient’s current location and tell them *“I am going to hang up and dial 911 for you.”*

If, during, the course of the phone triage, it is determined that an “eye emergency” exists; then you will be required to follow the guidelines outlined below, utilize your best examination and clinical decision making skills. You will use the advice of your consulting doctor/s/ to provide care.

If no “eye emergency” exists, follow the guidelines and instruct the patient in establishing an appointment with you OR another of our Staff Doctors as appropriate.

**The On-Call Resident is expected to report to the SCO Campus to provide care in an urgent / emergency situation to all those seeking care, regardless of whether they are established patients of TEC or not.**

The On-Call Resident, in consultation with their Residency Supervisor and/or another SCO/TEC consult resource may deem it most appropriate to instruct the patient to go to the nearest Emergency Room (ER) for care. A list of local ERs with ophthalmology staff on-call is listed in this Manual.

The On-Call Resident, in consultation with their Residency Supervisor and/or another SCO/TEC consult resource may deem it most appropriate to refer the patient to a secondary / tertiary provider. A list of local ophthalmology providers is listed in this Manual.

The On-call Resident should not independently prescribe drug therapy during phone triage. Only prescribe for an ocular condition after the examination of the patient.

The On-Call Resident should not independently advise a patient (other than their own, established patient), over the phone, regarding the discontinuation or initiation of an established drug therapy without benefit of at least a record review.

The On-Call Resident is under no obligation to come to the SCO Campus for TEC patients who have lost or broken spectacles or contact lenses. Instruct the patient in establishing an appointment during regular business hours.

The following is a guideline for the response time regarding some possible Eye (Ocular and/or Visual) Emergencies. NOTE: This is not an all-inclusive list. Nothing supersedes the professional judgment of a doctor given specific circumstances in an urgent/emergent situation.

- 1) Respond by seeing the patient within the hour for Chemical Burns and Penetrating Injuries. In the case of chemical splashes, instruct the patient to “...*flush their eye/s/ with copious amounts of clean, tap water*”.
- 2) Respond by seeing the patient within hours for sudden loss of vision or visual field, flashes or floaters with vision or field loss, bulging eye, acute ocular trauma without penetration, foreign body, corneal abrasion, appearance of a “veil” or curtain across the field of vision, sudden changes in pupil size, recent onset pain without redness, eye pain with “steamy” vision and nausea / vomiting, any monocular patient, changes in Amsler Grid; flashing lights in post-op patients, diabetic patients who “see red”, corneal transplant patients with redness / photophobia / vision loss or pain, contact lens patients complaining of pain or redness;
- 3) Respond by seeing the patient within 12 hours for recent onset diplopia, new or increased spots or floaters, presence of pus or crusting, excessive tearing without foreign body sensation / photophobia;
- 4) Respond by seeing the patient (or having them schedule an appointment during TEC regular business hours) within a week for gradual loss of vision over three or more weeks, itching / tearing / white discharge over three weeks or more, mild

redness over three weeks or more, lid masses, bumps or gray areas on sclera, cloudy vision for uncertain length of time;

D. Non-Emergent Weekend Office Visits

There may be occasions when due to illness, emergency or travel a Staff Doctor will ask the On-Call Resident to see a patient. When this is necessary, it will be the responsibility of the Staff Doctor to identify the Resident On-Call and arrange for you to become familiar with and possibly even see the patient with him/her prior to the weekend visit.

E. Post-Operative Patients and their Emergent Care

TEC has an existing relationship with doctors at The Eye Specialty Group to provide secondary and tertiary eye health care in our facility. Many of our operative referrals are cared for by these doctors. It will be your responsibility to become familiar with the routine Post-Operative Protocols for the various surgical options available through our surgical colleagues.

F. Seeing Patients After-Hours & on Scheduled College / TEC Closings

- 1) Complete Emergency Telephone Triage Form.
- 2) Advise the patient of “usual & customary” fees for visit.
- 3) Call Security
- 4) Arrive on time. Resident & Pt park in front of Tower.
- 5) Leave Examination Room door open at all times!
- 6) Provide Care / Document appropriately.
- 7) Complete: Billing Policies Information for Emergency After-Hours Patients
- 8) Complete: Authorization for Treatment & Financial Responsibility Form
- 9) Complete: Acknowledgement of Privacy Practices Hand patient: Notice of Privacy Practices
- 10) Escort patient out & notify Security of any additional After-hours follow-up
- 11) Place *completed forms* in COS box the same day or next business day
- 12) Park in front of the Tower in the visitor spaces when providing after-hours care. (Also instruct patients that they will need to come to the TOWER and park in these spaces also.)

- 13) Recommend family members wait in the student seating areas outside the examination room.
- 14) Call TEC Patient Representatives to arrange follow-up care on the next business day.

## G. On-Call Responsibilities

It is not permissible for you to be unavailable to TEC Emergency and/or After-Hours patients due to other responsibilities.

It is not permissible for a TEC patient to be seen by you at any facility other than TEC (or the Emergency / After-Hours Exam Room) located on the SCO Campus.

## H. Consultation Schedule with TEC Staff Doctors

A schedule for the on-call weeks has been drafted for your entire residency year. While you are awaiting Tennessee licensure, your supervising doctor will sign all charts and manage the care. During this time, the resident will still handle calls and hold the on-call mobile phone. It is the resident's responsibility to call the Staff Doctor on-call every time a patient phones in to consult and arrange for care. There exist some on-call dates that reflect days in which the college is closed. Residency Supervisors will manage those dates with the residents.

### 4) ESSENTIAL QUICK REFERENCES

#### A. Residency Supervisors

Your Residency Supervisor is always a source of contact for all consults while on-call. In the event your Supervisor is out of town or unavailable, he/she must arrange for and notify you of alternative coverage with one of the SCO / TEC Additional Consultation Resources (see below).

#### Primary Care

Dr. Beth Sparrow

Office:	(901) 722-3322
Mobile:	(901) 857-7404
Home:	(901) 685-7403
CHC:	(901) 272-0003



C. SCO Security

While efficient and effective patient care after-hours and during scheduled SCO / TEC breaks is our primary goal, we are very concerned about your safety as you fulfill the on-call requirements of your program. SCO Security is to assist in providing a safe environment while you provide care. You must always notify SCO Security that you will be coming to the campus to provide Emergency care. You should contact security immediately after you have spoken with the patient and/or consulting Staff Doctor and have determined that a visit is necessary. When calling Security, first identify yourself as the On-Call Resident and inform them the time you have arranged to see the patient. Make sure to supply them with the patient's name and your contact number.

The following numbers are the most effective means of contacting the SCO Security Officer on duty:

Phone: (901) 722-3306 OR (901) 722-3307  
Mobile: (901) 212-0772 (ONLY for After-hours Patient Care)

NOTE: You must notify SCO Security of your arrival time prior to the patient showing up on campus

D. Local Hospital & Referral Source Emergency Contacts

Facility	Emergency Room Number	After Hours Number
Baptist Hospital East 6019 Walnut Grove Road	(901) 226-3000	
Methodist Hospital 1265 Union Avenue	(901) 516-8193	
The MED 877 Jefferson Avenue	(901) 545-7826	
Charles Retina Institute 6401 Poplar Avenue		(901) 767-4499 (Answering Service)
Mid-South Retina 6005 Park Avenue		(901) 682-1100 (Answering Service)
Southern Eye Associates 5350 Poplar Avenue		(901) 683-4600 (Answering Service)
Eye Specialty Group 825 Ridge Lake Blvd.		(901) 763-2220 (Answering Service)

## 5) On-Call Consultation Schedule (separate attachment)

Please let Drs. Sanderson and Ervin know of any changes to the schedule via email (albeit staff doctors and/or residents).

The on-call phone will be handed to the next resident **no later** than COB each Thursday.

During days/weeks in which TEC is closed or operating with minimal interns, each on-call primary resident will be provided a secondary resident during the shortened clinic operating hours. The primary resident and his/her supervising doctor will maintain all on-call responsibilities during hours in which TEC is closed for business. Both residents will be available to TEC during these weeks and regular schedules may need to be altered.

During the following SCO events, in which the residents are required to participate, on-call responsibilities will default to the Director of Residency Programs for the duration of the event: Convocation, Graduation.