

## Emergency STAT Process:

**MRI** Rule out cord compression

(note: *if multiple spine studies ordered, all must be done stat the same day*)

Brain - if referrer indicated it is stat

**CT** PE - Pulmonary Embolism

Head – if referrer indicated it is stat

**US** DVT (unless chronic bilateral leg swelling where referrer states not urgent);

Ectopic pregnancy; Fetal Demise; Testicular torsion

- Referring physician initiates – one of the diagnoses above, or ***physician states they want the patient seen right away.***
- Call is placed to Scheduling directly or Script is received via Fax
- If Prescription is received, via fax, Scheduler should contact Patient immediately to schedule.
- Scheduler or Front Desk Receptionist **will immediately schedule exam in a STAT Spot on the Grid. If No Times are available, contact Office Administrator** during regular business hours, **or call Modality** (if OA is not immediately available) and advise of an incoming emergency stat.
- If No Times are available at preferred office, ask patient if they are willing to travel to another AMI location, and check availability.
- If Patient insists on waiting to the next day, when there is an available time, Contact the Referrer to confirm this is OK and patient refuses on going to the ER.
- Note conversation in Scheduling Notes

## (Typical) Stat Process:

- Referring physician initiates – physician advises it is a stat.
- Call is placed to Scheduling, individual office, or fax is received which states STAT

- Scheduler should schedule same day if available, or contact office.
- If Prescription is received, via fax, Scheduler should contact Patient immediately to schedule.
- If No Times are available at preferred office, ask patient if they are willing to travel to another AMI location, and check availability.
- If Patient insists on waiting to the next day, when there is an available time, Contact the Referrer to confirm this is OK and patient refuses on going to the ER.
- Note conversation in Scheduling Notes