

PROIMAGE REVIEW

Professional Imaging, LLC

Special Points of Interest:

- *The importance of adequate paperwork*
- *Your best contact for scheduling patients*
- *Features of our new electronic medical record*

523 N Sam Houston Pkwy E, Ste 125
Houston, Texas 77060-4011

Ph: (281)272-MBSS or (866)675-MBSS

Fax: (281)272-6281 or (877)676-MBSS

COMPLETE PAPERWORK IS A MUST!

Thank you all for your efforts in completing our new intake forms. Please remember that we are in the throes of healthcare reform. Due to changing compliance guidelines, please be aware that we may not be able to schedule your patient if your paperwork is incomplete. Just to be sure you have all completed paperwork, please see requirements below:



Experts In Dysphagia Consultation

Upcoming Holiday for PI

The Professional Imaging offices will be closed Monday, July 4th. Please remember to schedule your consultations around this date. Have a Happy and safe 4th of July!

SNF patients:

- 1.) **Face sheet**, which includes billing information
- 2.) **Fully completed intake form**, this includes a signature from you that there is a verbal order from the doctor. Be sure to check those boxes that apply to the specific level of service that is being requested

Home health patients:

- 1.) **Copy of face sheet** with billing information or copy of insurance cards
- 2.) **Fully completed home health intake form**, this includes signature from you ensuring the verbal order.
- 3.) **Directions sheet** if there is one
- 4.) **Current contact information** for the patient

If any of these pieces of information are not provided when your study is requested, Professional Imaging will make our best effort to track it down. However, with scheduling 1600 patients per month, this can be very difficult and time consuming.

Most importantly, your patients will receive faster, and better educated service when you provide us with all required paperwork. Thank you in advance for your continued cooperation.

If a delay in care occurs due to insufficient or missing paperwork the research and retrieval efforts involved are documented for quality assurance purposes. These cases are then reviewed by our medical director for future planning and process implementation.

If there is anything that Professional Imaging can do to be of further assistance to answering any of your scheduling questions please call our office at 281-272-6277 or 1-866-675-6277. **You can ask for the scheduler for your region:**

Inside this issue:

- Complete Paperwork guidelines 1
- Schedulers by name and 2
- Professional Imaging's Electronic Medical Re- 2

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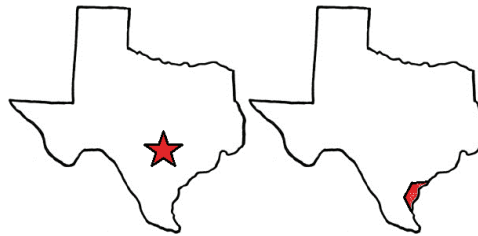
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Houston Area
Scheduler

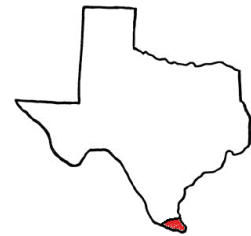
Suzette Flores

“You can always feel free to contact any member of our professional and courteous office staff via our main number. If they cannot address your questions personally, they will direct you to someone who can.”



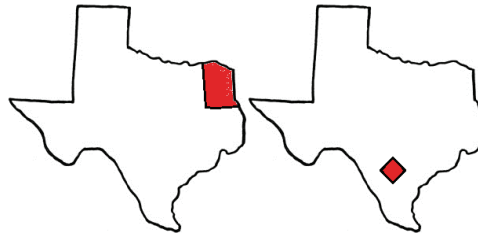
Austin and Southcoast (Corpus and surrounding) Areas Scheduler

Alan Adolph



South Texas Valley
Scheduler

Michael Queen



Northeast Texas and San Antonio Scheduler

Jason Coker

Michelle, Daniel, and Hunt are also available to help with billing questions. You can always feel free to contact any member of our professional and courteous office staff via our main number. If they cannot address your questions personally, they will direct you to someone who can.

PROFESSIONAL IMAGING'S ELECTRONIC MEDICAL RECORD

Professional Imaging has received some very positive feedback about the new electronic medical record that we have developed. We have also received some very good suggestions for improving it and for that we thank you and want to continue to encourage your feedback. I would like to highlight 2 very important features of our new record:

- 1.) MBSS Summary—this portion is helpful in reviewing the record at a glance, as it provides the current diet of the patient, the pathology of the swallowing dysfunction discovered during the x-ray, the treatment plan, and the recommended diet.
- 2.) Doctor Discussion—this portion is located in the physician evaluation and management section of the report. This “discussion” contains information about the patients overall risk for aspiration (risk stratification), a conclusion about the overall risk for aspiration vs. choking, whether that patient is a rehab candidate or not, whether the patient is a candidate for a PEG placement or not (due to behavior, end stage disease, etc.), and the ability of the patient to sustain nutrition/hydration by oral intake.

These features take the diagnosis and prognosis into account when making recommendations for patients, as well as assist doctors in making decisions about which patients could benefit from PEG placement and which patients will not. We are also recommending the next safest diet if alternate means are not found to be beneficial or elected to be part of the treatment plan. Our EMR is helping patients and providers make more clear and informed decisions about Peg tubes, their use and misuse, and what they actually can and cannot do. Please call if you have any questions.

For more PEG information, we recommend this article, published in *Practical Gastroenterology*, July 2005, By William M Plonk Jr, M.D. This can be found on the web at: <http://www.practicalgastro.com/pdf/July05/July05Plonk.pdf>