Rooming checklist

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| Prior to the visit | |
|  | **Review the last clinic note and completed pre-appointment questionnaire.**  This will help staff prepare the patient and physician for the visit. |
|  | **Gather test results obtained prior to the visit.**  If the patient had pre-visit laboratory tests completed, prepare the results for the visit. Some clinics print the results to share with the patient. |
|  | **Compile relevant data specific to the visit.**  Gather emergency room notes, hospital discharge summaries, consultations, etc. if relevant to the visit. Use a [visit prep checklist] to identify what care gaps can be closed during the upcoming appointment. |

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| During rooming | |
|  | **Greet the patient in the waiting room.**  Introduce yourself by providing your name and role (e.g., “Hello Mr. Smith, I’m Ron, the medical assistant working with Dr. Rodgers. I’ll be helping you during your appointment”). |
|  | **Establish the patient’s agenda and priorities.**  Ask the patient, “What is the main goal of your visit?” or “I see that you are here for a follow-up on your arthritis and diabetes. Is there anything else you would like to cover today?” If there are multiple issues, help the patient identify their top priorities. |
|  | **Reconcile medications.**  If a new patient is uncertain about their current medications or doses, contact the patient’s pharmacy. If the patient was recently discharged from the hospital, obtain the discharge medication list. |
|  | **Review any allergies.**  Document any new allergies and the nature of the patient’s reaction. |
|  | **Update health maintenance screenings and immunizations.**  Using standing orders, administer immunizations and schedule screenings, e.g., cancer and osteoporosis. |
|  | **Screen for conditions or evaluate status of chronic conditions.**  Use standardized questions as directed by clinic protocol to support the visit. This might include screening for depression, substance abuse and control of asthma and/or diabetes. For appropriate patients over 65, this might include uploading a patient’s responses to the annual wellness visit questionnaire, which can be distributed to the patient prior to the appointment. |
|  | **Provide information about advance directives.**  Provide information about advance directives to appropriate patients as directed by clinic protocol. Alert the physician if the patient has additional questions. |
|  | **Provide self-management support.**  Use an action plan or similar tool for patients who need self-management support, such as tobacco cessation, weight loss and/or diabetes care. |
|  | **Perform symptom-driven testing.**  Use standing orders and assess patient symptoms to determine whether you need to administer a pulmonary function test, exercise oximetry, electrocardiogram (ECG), strep screen, urine dip stick, pregnancy test, etc. to the patient. |
|  | **Prepare patients for the exam and medical procedures.**  Provide a gown and advise patients to undress as appropriate. Set up the exam room and prepare the patient for procedures such as skin biopsy, cryosurgery, etc. |
|  | **Introduce new patients to the practice.**  Some practices have created a “Welcome to Our Practice” pamphlet or folder to introduce new patients to physicians, staff and processes in the practice. |

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| Handoff | |
|  | **Prepare the physician.**  In a “mini-huddle” with the physician, share the information you’ve learned during rooming, such as the patient’s goals for the visit, response to treatment initiated during the last visit and social/emotional history. For example, “The patient felt dizzy on the atenolol we started at the last visit and decided to stop it. In addition, her husband was recently diagnosed with Alzheimer’s disease. She is stressed and doesn’t think she can handle another medication at this time.” This handoff, taking no more than a minute, will help the physician best meet the patient’s needs. |

*Source: AMA. Practice transformation series: implementing team-based care. 2015.*