

Community

Anticoagulation

Therapy

Clinic

DOCUMENT TITLE	NUMBER	REV
Risk Assessment of CAT Clinic Patients	6003CATC	0

PURPOSE (outline the intent or objective of the document)

To assess risk of patients referred to the CAT Clinic.

DEFINITIONS AND ACRONYMS (provide clear understanding to words, abbreviations that may be ambiguous)

CAT Clinic – Community Anticoagulation Therapy

PROCEDURE/FLOWCHART (describe the steps in which work objectives are achieved; include statements, to the extent necessary, that explain the why, what, when, where, who and how)

1. The referring physician who completes the Referral Form (6002CATC) performs a risk assessment for each patient. The form has a section that assigns points to categories of risk.
2. If the risk assessment is 3 or greater the patient will generally not be referred to the CAT Clinic.
3. Patients at a risk of 3 or above may be referred if the physician and the CAT Clinic Nurse Coordinator discuss the case and both agree the patient would benefit from enrollment in the CAT Clinic.
4. If at any time during enrollment in the CAT Clinic, the Nurse Coordinator feels the patient is at a higher risk than appropriate for the clinic, the Nurse Coordinator will notify the referring physician.

RECORDS (results or evidence of work performed)

Referral Form 6002CATC

REVISION HISTORY			
Rev	Description of Change	Approval	Date
0	Initial document	J. Levett, MD	12/16/05