

Quick Check: APPOINTMENT MANAGEMENT



Completing this checklist can help improve your practice's appointment management process. For any "No" response, consider reviewing and updating your process.

	Yes	No	Notes
Practice Policies and Procedures			
1. The practice has formal policies and procedures for scheduling appointments and managing missed appointments (cancellations and no-shows).			
2. The practice outlines its last-minute cancellation and no-show policies in new patient paperwork.			
3. The practice has a recall system for patients who need to be seen on a regular basis, and all staff use the system process consistently.			
4. Staff has received training on the practice's appointment management policies and procedures, and training has been documented.			
Patient Scheduling			
5. The practice allocates time on the schedule each day for patients who need acute care appointments.			
6. Patients with acute care needs are seen within 24 hours of their appointment request unless an earlier visit is warranted. If no appointment time is available, patients are referred to an appropriate care setting as determined by the practitioner.			
7. Front desk staff always communicates with clinical staff when patients require triage or a challenging scheduling issue arises. (Medical assistants do not triage patients.)			
8. The practice provides patients with cards, calendar invitations, and/or electronic notification when an appointment is scheduled.			
9. All cards, invitations, and notifications include the appointment date, time, location, practitioner, and any instructions.			
10. The practice has an established system for reminding patients of upcoming visits, set at predetermined intervals, prior to the appointment.			
Missed Appointments and Patient Follow Up			
11. The practice has a procedure that is consistently followed for documenting missed appointments in the patient's record—including the reason for the missed appointment, if it is known.			
12. A licensed practitioner reviews missed appointments without immediate reappointment daily to determine which patients require follow-up and clinical management within a designated time frame.			
13. The front desk staff communicates with the practitioner immediately when a patient cancels or does not appear for a critical appointment (such as a procedure, post-op visit, hospital follow-up, or acute illness).			
14. A designated staff member attempts to reschedule every no-show patient and documents outreach efforts in the patient record.			
15. For patients who require follow-up but do not respond to telephone calls, the practice employs other communication methods, such as certified and regular mail, HIPAA-compliant texts and emails (with patient's prior written permission), and the patient portal.			

	Yes	No	Notes
Missed Appointments and Patient Follow Up <i>(continued)</i>			
16. All communications advising patients of missed appointments and/or of the need to reschedule are written in easy-to-understand language in the patient's primary language. The communication does not use medical terminology.			
17. When the practice sends a letter to a patient who requires prompt medical or dental intervention, the letter is sent by certified <i>and</i> regular mail.			
18. Emergency contacts are used for follow-up only when other options for contacting the patient are exhausted. Care is taken to avoid disclosing PHI to the contact; for example, "We need to have [Patient Name] contact our office."			
19. All follow-up efforts, including correspondence (letters, texts, and emails), are documented and filed in the patient record.			
20. Administrative staff conducts periodic quality checks to ensure that missed, no-show, or canceled appointments are properly documented in the patient record.			
21. To ensure patient follow up and safety (and as a courtesy), referring practitioners are always notified when their patient is a no-show or cancels an appointment without rescheduling.			
22. All patient nonadherence with examination, treatment, or follow-up appointments is documented in the patient's record, including the reason for nonadherence.			
23. The practice attempts to communicate with patients regarding the health consequences of continued nonadherence, and these discussions are documented in the patient record.			
24. The practice dismisses nonadherent patients from the practice only as a last resort after repeated and documented follow-up attempts.			

The Doctors Company Resources

- Quick Check: *Dissatisfied Patient Management* at thedoctors.com/quickcheckdissatisfiedpatients
- Quick Check: *Patient Dismissal Process* at thedoctors.com/quickcheckpatientdismissal
- Article: "Nonadherent and Noncompliant Patients: Overcoming Barriers" at thedoctors.com/overcomingpatientbarriers
- Article: "Telephone Triage and Medical Advice Protocols" at thedoctors.com/telephonetriage

For additional guidance, contact the Department of Patient Safety and Risk Management at **800.421.2368** or by email at patientsafety@thedoctors.com.