

## Therapy Referral Entry-Order Class Field

The referral entry screen has been revamped to stream line the workflow and assist with accuracy of the referrals. In this you will notice that order class has been removed, buttons for departments have been removed and replaced with a list to choose from, an updated report to display services and office addresses, and new required fields. *This tip sheet is to accompany the provider education CBL in HealthStream.*

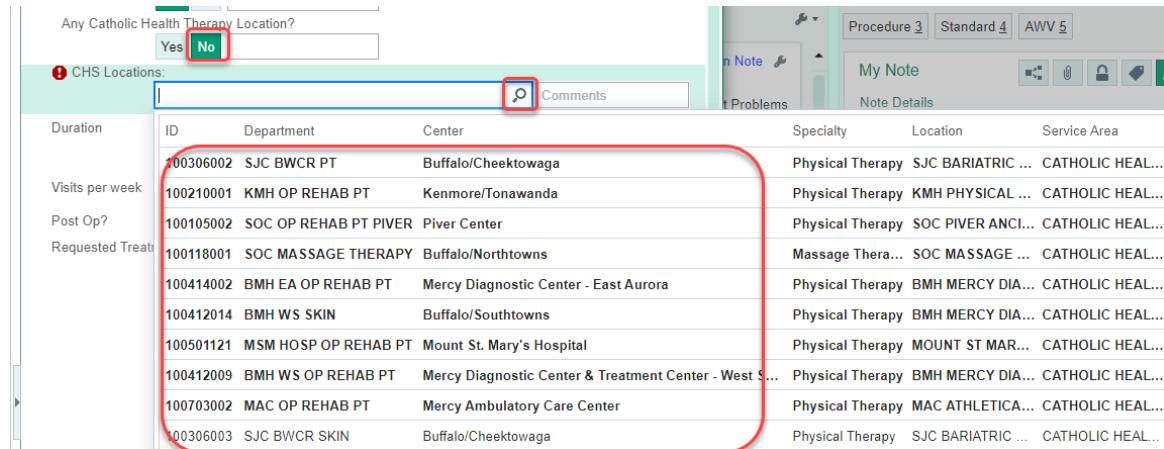
### Referrals-Internal

The **example** that we will go through is a **referral to Physical Therapy**. You will order the way you do today. When you bring up the referral you will notice a few things.

On the **left side there is now an updated Order Guide**. For our example, this lists out all of the possible internal clinics to refer to for the physical therapy services as well as the services offered at each site.

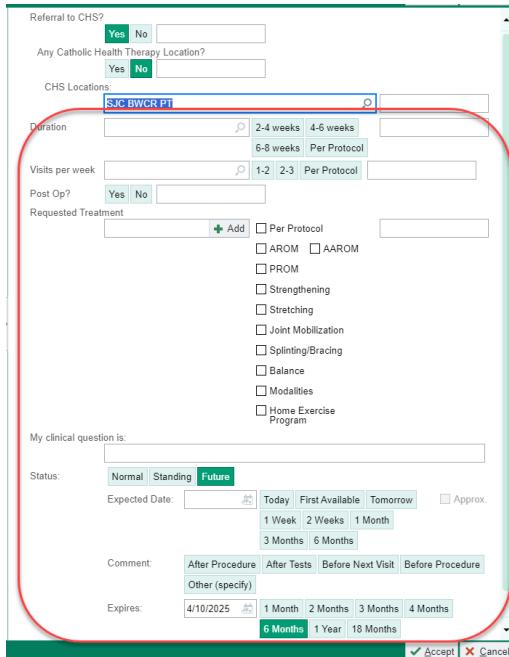
**Referral to CHS?** This defaults to yes. Leave as is.

**Any Catholic Health Therapy Location?** This defaults to yes. If you would like to specify a location, click no. Then when the CHS Locations comes up, click on the magnifying glass. You will then be presented with a list to choose from that corresponds with the order guide on the left side.



Duration	ID	Department	Center	Specialty	Location	Service Area
Visits per week	100306002	SJC BWCR PT	Buffalo/Cheektowaga	Physical Therapy	SJC BARIATRIC ...	CATHOLIC HEAL...
Post Op?	100210001	KMH OP REHAB PT	Kenmore/Tonawanda	Physical Therapy	KMH PHYSICAL ...	CATHOLIC HEAL...
Requested Treat	100105002	SOC OP REHAB PT PIVER	Piver Center	Physical Therapy	SOC PIVER ANCI...	CATHOLIC HEAL...
	100118001	SOC MASSAGE THERAPY	Buffalo/Northtowns	Massage Thera...	SOC MASSAGE ...	CATHOLIC HEAL...
	100414002	BMH EA OP REHAB PT	Mercy Diagnostic Center - East Aurora	Physical Therapy	BMH MERCY DIA...	CATHOLIC HEAL...
	100412014	BMH WS SKIN	Buffalo/Southtowns	Physical Therapy	BMH MERCY DIA...	CATHOLIC HEAL...
	100501121	MSM HOSP OP REHAB PT	Mount St. Mary's Hospital	Physical Therapy	MOUNT ST MAR...	CATHOLIC HEAL...
	100412009	BMH WS OP REHAB PT	Mercy Diagnostic Center & Treatment Center - West S...	Physical Therapy	BMH MERCY DIA...	CATHOLIC HEAL...
	100703002	MAC OP REHAB PT	Mercy Ambulatory Care Center	Physical Therapy	MAC ATHLETICA...	CATHOLIC HEAL...
	100306003	SJC BWCR SKIN	Buffalo/Cheektowaga	Physical Therapy	SJC BARIATRIC ...	CATHOLIC HEAL...

Go through and fill out the additional details as applicable.



Referral to CHS?

Any Catholic Health Therapy Location?

CHS Locations: SJC BWCR PT

Duration: 2-4 weeks, 4-6 weeks, Per Protocol

Visits per week: 1-2, 2-3, Per Protocol

Post Op? Yes, No

Requested Treatment:

- Per Protocol
- AROM
- AAROM
- PROM
- Strengthening
- Stretching
- Joint Mobilization
- Splinting/Bracing
- Balance
- Mobilities
- Home Exercise Program

My clinical question is:

Status: Normal, Standing, **Future**

Expected Date: Today, First Available, Tomorrow, Approx

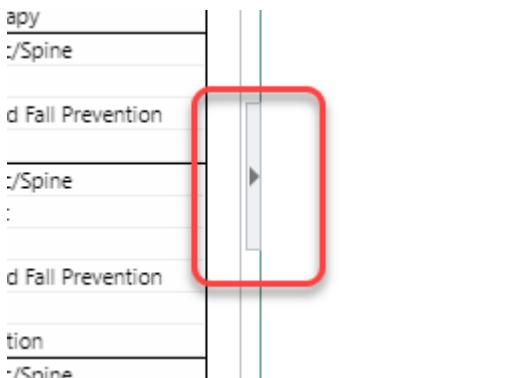
1 Week, 2 Weeks, 1 Month, 3 Months, 6 Months

Comment: After Procedure, After Tests, Before Next Visit, Before Procedure, Other (specify)

Expires: 4/10/2025, 1 Month, 2 Months, 3 Months, 4 Months, **6 Months**

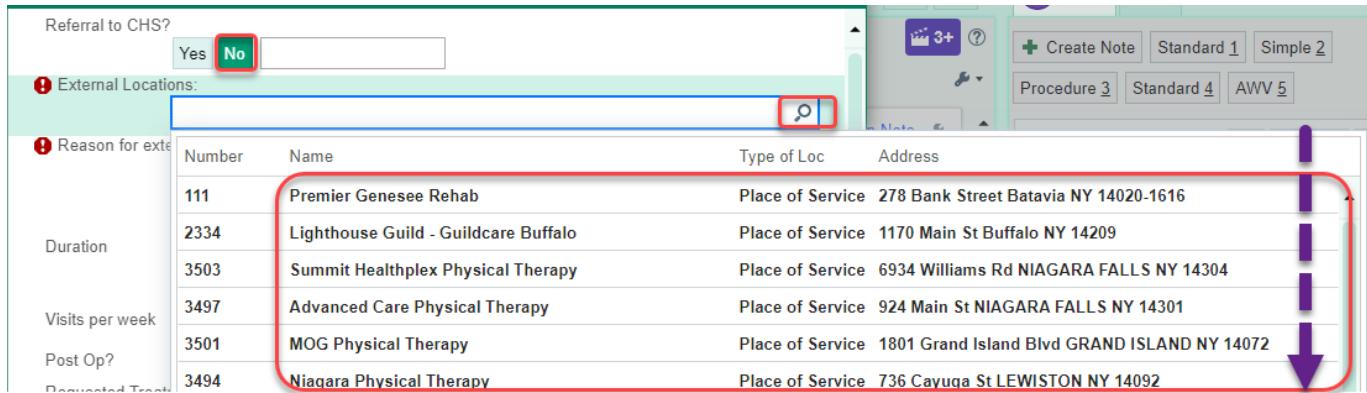
Accept,  Cancel

If the provider wishes, they can collapse the side bar report by clicking on the arrow to the far left. This acts the same as other arrows in Epic and will make it disappear.



## Referrals-External

If the patient wishes to go to an **external location**, choose **no** for **Referral to CHS?**. Then click on the magnifying glass to the right of **External Locations** to open it up and see the list of locations.



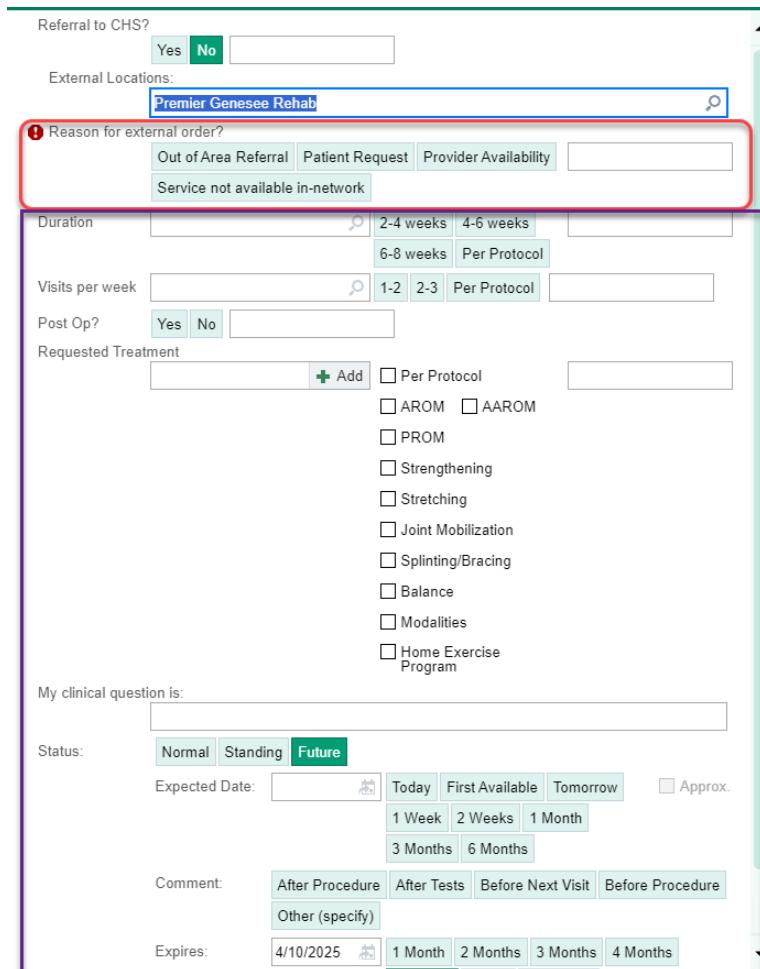
Referral to CHS?

External Locations:

Reason for external order:

Number	Name	Type of Loc	Address
111	Premier Genesee Rehab	Place of Service	278 Bank Street Batavia NY 14020-1616
2334	Lighthouse Guild - Guildcare Buffalo	Place of Service	1170 Main St Buffalo NY 14209
3503	Summit Healthplex Physical Therapy	Place of Service	6934 Williams Rd NIAGARA FALLS NY 14304
3497	Advanced Care Physical Therapy	Place of Service	924 Main St NIAGARA FALLS NY 14301
3501	MOG Physical Therapy	Place of Service	1801 Grand Island Blvd GRAND ISLAND NY 14072
3494	Niagara Physical Therapy	Place of Service	736 Cayuqa St LEWISTON NY 14092

**Reason for external order?** Fill out with the appropriate reason. Then fill out the rest of the applicable details.



Referral to CHS?

External Locations:

Reason for external order:

Duration:

Visits per week:

Post Op?

Requested Treatment:

My clinical question is:

Status:

Expected Date:

Comment:

Expires: