

FNA SCHEDULING GUIDELINES

GENERAL INFORMATION FOR SCHEDULING STAFF

- 1. Radiologist Specific Locations Only (AN, PP)**
- 2. Monday – Friday 8:00 AM – 3:00 PM**
- 3. Schedule on a 30-minute intervals for each nodule**

SCHEDULING EXAMS

- **Answer the phone by 2nd ring (polite, professional, accommodating demeanor with a smile)**

“Thank you for calling Valley Radiology, [provide your name] speaking, how may I help you today?”

“Please give me a few seconds to find your records in our system”

- **Carefully review the order and any accompanying notes**

“I see that your doctor has ordered a Fine Needle Aspiration, does that sound correct?”

“Before I can make your appointment, I need to ask you a few exam related questions”

OPENING QUESTIONS:

1. What is the best phone number that you can be reached?
2. What is your email address?
3. Where did you have your last Ultrasound (Thyroid, Parotid) (if not at VRC)?

“Thank you for answering those questions, I now need to ask for your insurance information”

- **Carefully input insurance information**
- **Proceed to book the exam**

Scheduling tip 1: Be mindful of the patient’s insurance/authorization lead time and depending on whether we need to obtain outside images/reports, schedule the exam with enough days out to allow authorization staff to obtain the necessary authorization and to arrange to get the necessary images/reports.

Scheduling tip 2: Be aware where the open Biopsy slots are in the system. “Here is what I have available for you, [name the facility/city and appointment time], can I go ahead and book that appointment for you?”

- **Proceed to review procedure preparation with patient**

PROCEDURE PREPS

Patients MUST be off blood thinning medication for 5 days prior to biopsy.

Patient to consult the referring doctor that prescribed the blood thinner first. VRC staff to contact referring doctor that prescribed the blood thinners, and notate the approval in patient chart.

If patient is on blood thinners, labs are to be drawn 24 hours prior to biopsy (INR, PT, and PTT)

Warfarin, Coumadin, Zereleto, etc.

Heparin – Stop 4 hours prior to procedure

Levenox – Stop 24 hours prior to procedure

Plavix – stop 5 days prior

If medication cannot be stopped, please talk to radiologist

Aspirin, Ibuprofen, Motrin, Alevee – Stop 5 days prior to procedure

Tylenol is ok

Allergies to local anesthesia?

Patient needs to have a driver

Light meals are ok

Hydration

LAB PROCESSING

LABCORP – SCMG, Medial, Vantage

PALOMAR/POMERADO – Government funded Insurance (Medical, Council Community of Clinics), Arch Health Partners

QUEST DIAGNOSTICS – Care 1st, Molina, CHG

CHOICE – MEDICARE and PPO's – Check with referring provider for their preference of labs

AFFIRMA

- **Encourage patient to go to Radiologyinfo.org to learn more about their procedure. It is also available in Spanish.**

WRAP UP

“Please allow me to summarize your appointment”

“I have booked an appointment for you on [name the day] [month] at [time] at our [name of VRC facility] in [name City]”

Example: I have booked an appointment for on Wednesday September 15 at 9am at our Gateway facility in Poway”

“Please visit our website www.valleyrad.com for address and directions and phone number to the facility, otherwise, I can give you that information now”

“Finally please keep the following in mind

1. Arrive 15 minutes prior to your exam time to allow for registration. To save time, you can go on our website www.valleyrad.com to print out the necessary registration forms and fill them out ahead of time.
2. Don't forget to Bring photo identification and insurance card(s). Our staff will not be able to perform your procedure without these identification cards.
3. Depending on your insurance, you may have a copayment and/or co-insurance at the time of your service. Please be prepared to pay the necessary amount. We accept cash, checks and credit cards.
4. One or two days before your appointment another VRC staff member should be calling you to remind you of your appointment and he/she should also have information on the exact amount of payment that is due at the time of service.

“Are there are any questions or concerns I can answer for you?”

“Thank you so much for calling Valley Radiology”

REFERENCE DOCUMENTS

1. **INSURANCE/AUTHORIZATION MATRIX**
2. **VRC FACILITY ADDRESSES/MAIN PHONE NUMBERS**
3. **VRC CAPITATION CONTRACT SUMMARY SHEET FOR SCMG INLAND, GRAYBILL ESCONDIDO AND GRAYBILL COASTAL**

