VA Renal Telephone clinics: Creating a phone visit, CPRS Note, & Encounter

1. If converting from F2F APPOINTMENT to telephone appointment:
   a. CHANGE THE VISIT LOCATION to (“DUR-TELE-RENAL-ClinicName) BEFORE YOU START THE CPRS NOTE OR PLACE ORDERS (SEE NEXT PAGES FOR INSTRUCTIONS ON HOW TO DO THAT). Do not use the F2F appointment to create the telephone note; instead you need to create a new appointment in your telephone clinic, complete the telephone note and encounter, then cc Tonya Hallager (our Nephrology MSA) in an addendum to your telephone note with instructions to cancel the F2F appointment.

2. Note about the using and coding for telephone clinics:
   a. The telephone clinic location & note title/encounter are NOT meant to be used in the following scenarios/examples:
      i. You call a patient to discuss lab results from an appointment that has already happened and for which you had already completed an encounter (e.g. to call a patient later in the week and discuss lab results from an appointment that happened earlier in the week on Tuesday morning). Documentation for such phone calls to be accomplished by an addendum to the Tuesday morning visit note and should not have a separate encounter.
      ii. To call a patient for something like “I refilled your medication”, “I scheduled your appointment –MRI, etc.”, or other instances where there is no assessment and plan being formulated.
   b. The telephone note title/encounter are to be used when calling the patient to discuss labs, assessment, and/or plan that are related to a new visits/encounter. Examples:
      i. Patient was seen in clinic on April 1. You ask patient to come back 2-3 weeks later to a lab-only visit to repeat labs (e.g. to follow up on renal function and BP after recent adjustment in BP medication, follow up CBC and other safety labs for patient on immunosuppressive medications, follow up on abnormal Cr or K, etc). You call patient and discuss these lab results and formulate an assessment and plan.
      ii. Patient was scheduled to come and see you in clinic but did not show up. You call the patient, discuss reasons the Veteran did not come, review patient’s recent events and or labs, and formulate an assessment and plan. In such incidence, for documentation and orders and encounter, you should NOT use the in-person appointment for which the person did not show up for (e.g. “DUR-8A-Renal-ClinicName”, but you need to CHANGE THE VISIT LOCATION to (“DUR-TELE-RENAL-ClinicName) BEFORE YOU START THE CPRS NOTE OR PLACE ORDERS (SEE NEXT PAGES FOR INSTRUCTIONS ON HOW TO DO THAT)
      iii. You were contacted by a patient, a family member, or another provider to discuss a clinical situation days or weeks from your last patient appointment. You call the patient and review events, labs, etc. and formulate an assessment and plan. In these instance and before you start your telephone note, remember to change the visit location to “DUR-TELE-RENAL-X” rather than tag your note to a previous note encounter or another provider note (e.g. Dermatology).
3. **To create a new telephone visit:**
   
   a. In CPRS, go to the “Notes” Tab (where you create new notes).
   b. Click on the clinic location box (CIRCLED RED IN IMAGE BELOW)
   c. In the window that pops up:
      i. For “Encounter Provider”: Make sure your name is selected
      ii. Click on Tab “New Visit”. In “Visit Location” text box, type name of your telephone clinic, e.g. “DUR-TELE-RENAL-[your panel]”
      iii. Update the time if needed by clicking the dotted box (circled below) and choosing “now” for the time
      iv. Clicking OK on the popped out boxes.

   ![Image of CPRS interface with selected options circled for demonstration]
4. CREATE A NEW TELEPHONE NOTE:
   a. Start a new CPRS note. In the text box that pops out, type the following note title “NEPHROLOGY-TELEPHONE CONTACT”.
   b. Complete and sign the CPRS note (you will be asked to fill an encounter before you could sign it – see next page).
5. Fill and complete Encounter Form:

For telephone-based encounter:

1) On first tab:
   a) Select “established patient”
      a) Visit level from “Section Name”: LEAVE BLANK if telephone appointment. If you are completing a telephone-based encounter, then you should NOT choose anything from the list of codes 99211-99215 on the first tab of the encounter. These codes are used for face-to-face and for video appointments (with modifier 95 for VVC visits), but not for telephone visits. Leave everything blank in the code section.
   b) Check appropriate boxes for Service connected and/or Military Sexual Trauma (MST).
   b) Choose provider: Attending should always be listed as the ‘primary provider’ and fellow as secondary provider.

   ![Encounter Form Image]

   c)
2) On second tab, select the appropriate diagnose(s).

3) On the third tab “Procedures”, select “MD/NP/PA” and choose the appropriate E/M code based on duration of the phone encounter (make sure to document the amount spent in the body of the note, using the something like: “AMOUNT OF TIME SPENT IN PREPARATION, PATIENT ENCOUNTER, AND DOCUMENTATION: XXX MINUTES.”)