Coverage Responsibilities

See below for a guideline outlining responsibilities when you are covering a colleague. As a general rule, if you are covering someone "off-suite" it's usually most helpful to use their "home team" in terms of nurses, CRS staff, etc. as they may have an existing relationship with the patient.

Task to be done	Vacation Coverage (1-14 days absence)	Prolonged Absence Coverage (> 14 days absence)
Labs: communicate routine/normal	No	Yes
Labs: communicate urgent/abnormal (team with RNs when appropriate)	Yes	Yes
Radiology: communicate routine/normal	No	Yes
Radiology: communicate urgent/abnormal	Yes	Yes
Miscellaneous tests: normal BMD, pap, audiology, pathology, etc.	No	Yes
Miscellaneous tests: abnormal pap, pathology, etc.	Case-by-case basis	Yes
Patient Calls: urgent/sick, request for test results (team with RNs when appropriate)	Yes	Yes
Rx Requests: ALL (routine and controlled)	Yes	Yes
Prior authorizations: ALL (please initiate with rx staff) **may defer if non-urgent and PCP returns within 3 days*	Yes	Yes
Mail: VNA HHC/orders to be signed (incl Dr's Alliance), disability forms, FMLA, etc.	No	Yes
Mail: time-sensitive forms (work with CRS)	Yes	Yes
Mail: Outside ER /Discharge summaries/urgent care (team with RNs when appropriate to ensure follow-up if needed)	Yes	Yes
CC'd charts/Pended Orders: consultant letters, misc	No	Yes
Mail: request scanning or enter info into OMR sheets	No	No
Preceptee: any issues/questions/controlled substance rx	Yes	Yes
Patient Advice Requests (see above for category-specific advice)	Case-by-case basis based on urgency	Yes