

LONG ISLAND COLLEGE HOSPITAL

**DEPARTMENT OF SURGERY
ESCALATION POLICY**

SUBJECT: ESCALATION POLICY	
EFFECTIVE: 2/10	

On every service to which general surgery house staff are assigned, one or more attending surgeon is/are always immediately available in-house or by telephone to provide supervision, guidance, and education. It is the responsibility of the resident physician to be familiar with how to reach the attending surgeon; it is the responsibility of the attending to ensure his or her availability at all times or to communicate to the residents when he has signed out his responsibilities to another faculty member. By far the most common cause of conflict between resident and attending is the failure to communicate in a timely and effective manner; if in doubt, it is always best to call the attending.

EXPECTED COMMUNICATION PRACTICES FOR PATIENTS ADMITTED TO SURGICAL SERVICES

1) For all critical changes in a patients condition, the attending will be notified promptly (generally within one hour following evaluation)

These include:

- Admission to the hospital
- Transfer to the ICU
- Unplanned intubations or ventilary support
- Cardiac arrest
- Hemodynamic instability (including arrhythmias)
- Code
- Development of significant neurological changes (suspected CVA/seizure/new onset paralysis)
- Development of major wound complications (dehiscence, evisceration)
- Medication or treatment errors requiring clinical intervention (invasive procedures), increased monitoring, new medications except Narcan
- First blood transfusion without prior attending knowledge or instruction (before or after operation)
- Development of any clinical problem requiring an invasive procedure or operation for treatment

2) The following will be discussed with and approved by the attending before they occur.

- Discharge from the hospital or from the ED
- Transfer out of ICU

3) The attending should also be contacted if:

- Any trainee feels that a situation is more complicated than he or she can manage
- Nursing or physician staff, or the patient request that the attending surgeon be contacted
- A significant change in the medical condition of an attending's patient

This policy has always been in place and in practice at the LICH Department of Surgery since 1988. If the attending surgeon assigned to the patient is not immediately available, the attending on-call is immediately notified. If the problem is not resolved or neither are available within a 15 minute period, the problem is escalated immediately to the Team Attending in Charge. *

Team A – Dr. Antonio Alfonso

Team B – Dr. Michael Bernstein

Team C – Dr. Sandeep Sirsi

If team leaders are not immediately available the Chairman of the Department, (Dr. Alfonso), is ultimately notified

This policy does not leave the surgical resident “holding the bag” with no supervisory back-up. The Chief Surgical Resident is responsible for the notification and communication process.

* Pager, cell phone and home numbers are available from the telephone operators and from the published daily schedules.