

Northern Light Health **E-Consults Clinical Guidance**

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Do's and Don'ts

Do's:

- Choose the referral E-Consult appropriately BE SURE YOU HAVE DONE YOUR RESEARCH, APPROPRIATE INITIAL WORKUP.
- Add the /econsult* auto test this should be in the office note pertaining to why you are referring for an E-Consult. Fill out completely and thoroughly.
- Please take a moment to watch this video for more information:
 - http://ci.emhs.org/ClinicalInformaticsEducation/media/CI-Videos/Econsult-Into-Video-1.mp4

Don'ts:

- Don't send anything via E-Consult that is urgent (<3 days).</p>
- ➤ If the patient has new findings, symptomatic, medically complex. Not E-Consult appropriate.
- > Don't send a referral to a specialist for an E-Consult if you have not done background workup, research, and have a question that is pertinent for them to answer.
- Don't send a referral for an E-Consult if the patient is already established with a specialist, see below for examples:

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- They saw Gastroenterology 6 months ago and you want to know what to do with a mediation that needs to be a message not an E-Consult.
- If they saw Cardiology 3 months ago, you ordered a test with new findings, that needs to be a message (or call depending on the findings and symptoms) not an E-Consult.

E-Consults

Anemia Management E-Consult

NL EMMC

- As per Dr. Mikesell, content appropriate for E-Consults include:
 - Iron deficiency
 - B12 deficiency
 - Folate deficiency
 - Anemia of chronic kidney disease
 - Bloodless medicine (i.e., Jehovah's Witness) patients
 - Pregnant women
- Not appropriate for E-Consult:
 - Urgent consults
 - Question of bone marrow dysplasia
 - Platelet and/or White cell dyscrasias
 - Cancer/tumor
 - Coagulation questions

Cardiology E-Consult

NL EMMC and NL Mercy

- As per Dr. Jansujwicz and Dr. Brett, potential clinical situations include:
 - Resistant Hypertension (Advanced Medication management questions).
 - CAD with persistently elevated lipids despite Statin.
 - Heart Failure with LV systolic dysfunction = Med management with entresto or empagliflozin.
 - Abnormal test results but very low risk for disease and/or very mild to no symptoms (for example, abnormal stress test, history PVD but no symptoms...what is the next step).

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Endocrine (non-Diabetes) E-Consult

NL Mercy

- As per Dr. Fairfield, potential endocrinologic issues amenable to E-Consult include:
 - Review of abnormal blood testing or imaging (e.g., thyroid, calcium/bone, reproductive, adrenal, pituitary related) for advice regarding treatment, diagnosis, management, or referral.
 - Management of hypothyroidism.
 - Evaluation of thyroid incidentalomas detected on imaging studies with review of relevant lab testing and ultrasound images.
 - Review of DXA images and whether to treat low bone density or to determine if additional workup is recommended.
- Not appropriate for E-Consult with Dr. Fairfield
 - Diabetes related issues.

Gastroenterology E-Consult

NL EMMC

- As per Dr. Agrawal, some ideas of diagnoses that may be a good option for E-Consults include:
 - Heartburn/epigastric discomfort
 - Fatty liver
 - Rectal bleeding
 - Irritable bowel

GYN/ONC E-Consult

NL Inland and NL SVH

- As per Dr. Chobanian appropriate Gynecology/Oncology E-Consuls include:
 - Endometrial cancer
 - E N/complex atypical hyperplasia
 - Ovarian masses
 - Ovarian cancer
 - Vulvar cancer
 - Pre-invasive cervical/vulvar disease
 - Cervical cancer
 - Adenocarcinoma in situ cervix

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Hematology E-Consult

NL EMMC

As per Dr. Bhandari, content appropriate for E-Consults include:

- High ferritin: what work up is needed?
- Venous thromboembolism recommendation on duration of anticoagulation, type of anticoagulation, thrombophilia work if needed etc.
- Isolated mild chronic (present >1 year) leukocytosis or mild leukopenia, like WBC <15K or WBC 3-4K with normal differential.
- Isolated mild thrombocytopenia/thrombocytosis that is platelet 100-150K or platelet 400-500K.
- Mild Iron deficiency anemia not yet on oral iron –further work up, what formulation/how much oral iron?

NOT appropriate for E-Consults:

- Severe isolated cytopenia example Hemoglobin <9, ANC <500, Plt <50 Pancytopenia/Bicytopenia
 multiple cell lines involved.
- Iron deficiency anemia in need for IV iron not responding to oral iron after 3 months or not tolerating oral iron.
- Monoclonal gammopathy that is Serum electrophoresis positive with M-protein.

Infectious Disease E-Consult

NL EMMC

As per Dr. Gass, appropriate E-Consults include:

- Questions on interpretation and workup of serologic testing for:
 - Viral hepatitis
 - Syphilis
 - Lyme disease
 - Herpes viruses
- Assistance in the evaluation and management of positive TB tests including PPD and IGRAs.
- Questions concerning STI treatment and EPT (expedited partner therapy).
- Assistance in approaching indeterminate HIV tests.
- Assistance with the initial workup of FUO (prior to formal ID referral).
- Assistance with antibiotic choice for simple infections based on cultures i.e., UTI.

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Neurosurgery E-Consult (Spine Pain & SI Pain Only)

NL EMMC

- As per Dr. Waterman, appropriate E-Consults include:
 - Patient with LBP or leg pain or a combination and your exam makes you think it might be neurosurgical and you want suggestions on appropriate studies to evaluate.
 - Patient with buttock pain with sciatica and need help with management or workup suggestions for SI / piriformis pain and or sciatica.
 - Patient with MRI brain or spine with a finding and you're not sure it warrants a consult and want a "film evaluation," i.e., you want to send for conservative management for a pain issue and want an okay.
- NOT appropriate for Neurosurgery E-Consults:
 - Weakness on leg or foot (warrants an MRI study).
 - Patients that have weakness or myelopathy (warrants a formal Neurosurgery consult).
 - Spinal/Neuro Fractures and tumors.

Pediatric Behavioral Health E-Consult

NL Acadia

- Do not hesitate to ask any questions regarding a patient's mental health. Examples of types of questions, topics may include:
 - Screening, diagnosis, and treatment plans of common behavioral health disorders for patients birth through 25 years old.
 - Med management
 - Substance use
 - Assistance finding community resources for families including, but not limited to:
 - Community based behavioral health services
 - Childcare services
 - Food programs
 - Parenting support
 - Employment/ job-seeking training
 - School based services

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Pediatric Endocrinology E-Consult:

NL EMMC

- As per Ahmed and Dr. Ilaka-Chibuluzo, appropriate Pediatric E-consults include:
 - Borderline abnormal thyroid tests
 - Abnormal blood glucose (that is clearly not diabetes)
 - Any growth/bone ages that would previously be curbside
 - Borderline abnormal newborn screens (from the NICU)

Pediatric Hematology/Oncology E-Consult

NL EMMC

- As per Dr. SantaCruz, appropriate E-Consults include:
 - Recommendations for evaluation of a bleeding diathesis or interpretation of results.
 - Recommendations for evaluation and management of mild anemia/iron deficiency.
 - To help evaluate the need for further work up with mild abnormalities on CBC.
 - Hypercoagulable work -up in person with family history of thrombophilia.
 - Interpretation of abnormal Hgb electrophoresis on newborn screen.

Not appropriate for E-Consults

- Severe cytopenia (ANC less than 500, Hgb less than 8, platelets less than 50)
- Newly identified blasts
- Newly identified mass
- New clot
- Surgical clearance/procedural clearance
- Questions on patients with diagnosed bleeding disorders or undergoing active treatments (please call us).

Pediatric Infectious Disease E-Consult:

NL EMMC

- As per Dr. Zahlanie, appropriate E-Consults include:
 - Patient has reactive Lyme titers, but symptoms are nonspecific for Lyme disease. The Peds ID
 physician is contacted to figure out whether patient needs doxycycline.
 - Patient has fevers with unknown origin. The Peds ID physician is contacted for infectious disease workup.

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- Patient has non-specific symptoms which might be due to infectious disease. The Peds ID physician is contacted to give input about differential diagnosis.
- Patient has an uncommon infection. The Peds ID physician is contacted to figure out choice, route, and duration of antimicrobial.
- Patient has had immunoglobulin and/or blood transfusion. The Peds ID physician is contacted to figure out when live attenuated vaccine(s) can be given.

Rheumatology E-Consult: Service Temporarily Suspended (updated 11/07/2023)

NL EMMC

- As per Dr. Baliog, appropriate E-Consults include:
 - **Abnormal lab work** (ANA, CRP/ESR) with history suggestive of a rheumatic disease: Is this a false positive test or should more testing be done?
 - **Polymyalgia Rheumatica v. Giant Cell Arteritis** Advice on further workup, to expedite care (Rheum will provide guidance on what to do next immediately in terms of work up as well as treatment; treatment recommendations prevent unpredictable sequelae (sudden onset blindness) until we can accommodate the patient in Rheumatology clinic).
 - **R/o Vasculitis** Guidance on additional workup, and support for additional referrals (Dermatology, etc.).

Substance Use E-Consult

NL Acadia

- ➤ As per Jacquelyn Cyr RN, MS< NPc, an appropriate E-Consult must include:
 - History of Substance Use Disorder
 - Diagnosis of Opioid Use Disorder of Moderate/Severe
 - Clinical Opiate Withdrawal Scale (COWS)
- ➤ If available, please include additional information:
 - Urine Drug Screen
 - Hepatic Function
 - EKG
 - Any other interventions and effectiveness of those interventions

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Surgical Endocrinology E-Consult

NL EMMC

- ➤ As per Dr. Waddell, some ideas of diagnoses that may be a good option for E-Consults include:
 - Asymptomatic primary hyperparathyroidism with scan showing adenoma:
 - Should patient see Endocrinology or go straight to surgery?
 - Solitary thyroid nodule in euthyroid patient:
 - US guided biopsy vs Endocrinology referral vs Surgery referral vs Observation.

This list may grow as we gain more comfort with E-Consults.