Referring Physicians

Last Modified on 04/04/2025 6:02 pm EDT



Contact Center eRAD RIS Referring Physician

A referring physician can be easily added to an exam in eRAD.

1. Search for the patient using the search bar in the top right corner



2. Double-click on patient in Search Results to open Patient Folder

| First Name | Last Name | Middle Name | Birth Date | MRN | Issuer | Gender | Address | City | State | Zip Code |
|------------|-----------|-------------|------------|----------|--------|--------|----------------------|---------|-------|----------|
| HOLLY | TEST | | 04-29-1960 | T3000057 | system | F | 15601 DALLAS PARKWAY | Addison | TX | 75001 |

3. Click on exam to add notes to (accession)

| | | | | | | | _ | | | | | | | _ | |
|-------|-------------------|-----------------|------------------|--------------------------|-----------|----------------|-------|-----------|------------|----------|-------------|----------------|------|------|-----------|
| CeeR | AD RIS (as Holly | Shirley[Hshirle | ey]) | | | | | | | | | | | | E 23 |
| File | Administration | Scheduling F | Front Desk Help | | | | | | | 1/1 | 2 | ▼ test,holly | | | XQ |
| Patie | ent Search | atient: TEST, | HOLLY #T3000057 | (8) × | | | | | | | | | | | 0 - 23 |
| 5 | 2/1 | 2 | 7 | Contact Center Ager | t | | | | | | | | | | |
| Flags | s Nuggets | Status | Procedures | | | Scheduled Dat | te | Referring | | MRN | Accession # | Confirmation # | Room | Site | Performed |
| | Υ | 7 7 | 7 | | Y | | Y | | Y | Y | - F | 7 | 7 | Y | |
| \$ | 1000 | Scheduled | Breast Ultrasour | nd - Booked Status [133] | | 03-30-2018 2:4 | 45 PM | SMITH, AD | AM B, DO | T3000057 | T6000049 | 6000040 | 193 | 105 | |
| \$ | 1000 | Cancelled | Breast Ultrasour | nd - Booked Status [133] | 43 | 03-28-2018 1: | 00 PM | SMITH, AD | AM B, DO | T3000057 | T6000048 | 6000040 | 193 | 105 | |
| \$ 💷 | 1000 | Cancelled | Mammogram S | creening Digital W/ CAD | [45] - 76 | 03-26-2018 2: | 30 PM | SMITH, AD | AM B, DO | T3000057 | T6000046 | 6000039 | 191 | 105 | |
| \$ 💿 | 1000 | Scheduled | Bone Density [4 | 9] | | 03-26-2018 2: | 00 PM | SMITH, AD | AM B, DO | T3000057 | T6000047 | 6000039 | 192 | 105 | |
| \$ @ | 1000 | Scheduled | Bone Density [4 | 9] | | 03-26-2018 1: | 30 PM | SMITH, AD | AM B, DO | T3000057 | T6000029 | 6000026 | 192 | 105 | |
| \$ 💷 | 1000 | Scheduled | Mammogram S | creening Digital W/ CAD | [45] - 76 | 03-26-2018 1: | 15 PM | SMITH, AD | AM B, DO | T3000057 | T6000028 | 6000025 | 190 | 105 | |
| \$ 🚥 | 1000 | Signed | Mammogram S | creening Digital W/ CAD | [45] | 03-23-2018 3: | 30 PM | SMITH, AD | AM B, DO | T3000057 | T6000011 | 6000010 | 190 | 105 | |
| \$ 🚥 | 1000 | Signed | Bone Density [4 | 9] | | 03-23-2018 3: | DO PM | SMITH, AD | AM B, DO | T3000057 | T6000010 | 6000009 | 192 | 105 | |
| • | | 111 | | | | | | | | | | 1 | | | Þ |
| 0 | Refreshed 15 s | econds ago | | | So | chedule | Reg | ister | Perform Ex | am | Reschedule | View/Edit | | View | Order |
| Conn | ected: RISTest eF | RAD RIS 2017. | 6.2 | Pending saves: 0 | | | | | | | | | | | orows |

4. Click on the "Order" tab

| Patient Search Patient: TEST, HOLLY #T3000057 (8) | | | | | Register | : TEST, H | OLLY #T3000057 × | L | |
|---|---------|-------|-------------------------|----------|----------|-----------|-------------------|--------|-------------|
| Patient | Patient | Votes | Contacts / Demographics | Clinical | Order | Exams | Image Request (0) | Review | Contact Log |

5. Referring Details:

| Referring Details | CC Physicians |
|----------------------|-------------------------|
| Referring * | |
| Visited at * | Visit location for CC * |
| Img notes | |
| | Copy to patient |
| Ref. date MM-dd-yyyy | , |

1. Patient's past referring physicians will be listed in drop down if available

| Referring Deta | ils | |
|----------------|-----------------|----|
| Referring * | | NP |
| Visited at * | SMITH ADAM B DO | |
| Img notes | 00000,000 | |

- 2. To add a new referring physician to the exam
 - 1. Type in referring physician's name in the referring slot

| Referring Details | |
|-----------------------|---|
| Referring * JOHN,ALAN | - |

2. Click search button or hit Enter



3. Search matches will appear (scroll down to see additional matches)

| Ce Referring Se | earch | | | | | | | | • | 53 |
|--|--------------|-------------|---|-----------|---|--|-------------------|-----|-------|-------|
| Search Criteria | | | | | | | | | | |
| <u>F</u> irst name Last name <u>N</u> PI | ALAN JOHN | 2 | <u>C</u> ity Phone # L <u>i</u> cense # | Ac | d Unknown | | Search | Ret | et | |
| I ast Name | First Name | Middle Name | Summary | | Primary Office | | Additional Office | | Refer | rir A |
| JOHNS | ALAN | D | ALAN DĴ Celi: Internal IC | OHN S, MD | Report Deliver, 3700 Rufe Snov Fort Worth, TX Fax: (817) 570- Phone: (817) 26 Report Deliver, 1250 8th Avenu Suite 330 Fort Worth, TX Fax: (817) 570- Phone: (817) 92 Report Deliver, 3700 Rufe Snov North Richland Fax: (817) 570- Phone: (817) 26 Report Deliver, | y: Fax v Drive 76180 0175 14-1152 y: Fax 76104 0175 33-5559 y: Fax v Drive Hills,TX 76 0175 14-1152 y: Fax v Fax v Drive Hills,TX 76 0175 14-1152 y: Fax | | | | |
| • | | | | | | | | | | F |
| | | | | | | | Select | | Close | |

4. Verify address before selecting physician

| Last Name | First Name | Middle Name | Summary | Primary Office |
|-----------|------------|-------------|---|--|
| JOHNS | ALAN | D | ALAN D JOHNS, MD Cell: Internal ID: 964 | Report Delivery: Fax 3700 Rufe Snow Drive Fort Worth, TX 76180 Fax: (817) 570-0175 Phone: (817) 284-1152 |

- 5. Click on correct physician (line will turn blue)
- 6. Click "Select"



6. If referring physician has a single location, address will appear automatically in "Visited at"

| Referring * JOHNS | s, ALAN D, MD 👻 🔎 | |
|---------------------|---------------------------------------|---|
| Visited at * 3700 R | ufe Snow Drive, Fort Worth, TX, 76180 | - |
| Img notes | | ^ |
| | | ~ |

- 7. If referring physician has multiple locations:
 - 1. Red exclamation mark will appear next to "Visited At"
 - 2. Select drop down menu
 - 3. Click on correct location (Verify with patient/caller)

| Referring Deta | ils |
|----------------|--|
| Referring * | JOHNS, ALAN D, MD |
| Visited at * | T. |
| Img notes | 3700 Rufe Snow Drive, Fort Worth, TX, 76180 1250 8th Avenue, Suite 330, Fort Worth, TX, 76104 |
| Ref. date | 3700 Rufe Snow Drive, North Richland Hills, TX, 761808848 Baylor Research Institute 1250 8th Avenue, Suite 330, Fort 1250 8th Avenue Suite Suite 330, Et Worth TX, 76104 |
| Flags | 1200 dui Avende Suite, Suite 550, Ft. Wordt, TX, 70104 |

4. Location will appear in "Visited At"

| Referring * | JOHNS, ALAN D, MD | |
|--------------|---|---|
| Visited at * | 3700 Rufe Snow Drive, Fort Worth, TX, 76180 | - |
| Img notes | | ^ |
| | | ~ |
| Ref. date | MM-dd-yyyy | |

8. To add multiple physicians (CC Physicians):

| Referring Details | | CC Physicians | |
|--|---|-------------------------|---|
| Referring * JOHNS, ALAN D, MD | | | |
| Visited at * 3700 Rufe Snow Drive, Fort Worth, TX, 76180 | - | Visit location for CC * | |
| Img notes | ^ | | - |
| | ~ | Copy to patient | |
| Ref. date MM-dd-yyyy | | | |

- 1. Search for CC Physicians the same as adding original physician
 - 1. Click on Drop Down or
 - 2. Type in box and search

| | CC Physicians |
|---|--|
| | SMITH, ADAM B, DO x |
| - | 1 |
| ~ | Visit Location for CC * |
| | PARKVIEW DRIVE SUITE, Suite 560, FORT WORTH, TX, 76102 |
| ~ | Copy to patient |
| | |
| | • |

3. Address will appear in "Visit Location"

| Referring Details | | CC Physicians |
|--|---|--|
| Referring * JOHNS, ALAN D, MD | | SMITH, ADAM B, DO x |
| Visited at * 3700 Rufe Snow Drive, Fort Worth, TX, 76180 | - | |
| Img notes | | Visit Location for CC * |
| | | PARKVIEW DRIVE SUITE, Suite 560, FORT WORTH, TX, 76102 |
| | ~ | Copy to patient |
| Ref. date MM-dd-yyyy | | |

9. Click "Save" to save all updates made

| Save |
|------|
|------|

Edited: 7/18/2019