



# Nurse Advice Line 2023 Enrollment Form

Phone: 214-456-8145

Call schedule fax: 214-867-5356

Call schedule email: callschedules@childrens.com

By signing below, you are acknowledging that you are an active member of the Children's Health Care Network (CHCN) and authorize our clinical nursing staff to follow the Nurse Advice Line Evidence Based Guidelines and those indicated on this form. You agree that your practice will not charge any patient for the use of this advice line. You also acknowledge that you: have read and understand the FAQs and Closure Policy; agree to use the NAL only as an after-hours and holiday service for your patients; and will not use the NAL as a replacement for an answering service for hospital, doctor, lab or pharmacy calls. Misuse of these policies and guidelines may lead to termination of your contract with the Children's Health Clinical Operations (CHCO).

Please be aware that HIPAA regulations prohibit us from sending your patient updates via text message.

Practice Name: \_\_\_\_\_ Average monthly call volume: \_\_\_\_\_

Address: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Backline: \_\_\_\_\_

Office Manager: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Carequality ID/Org Name: \_\_\_\_\_ Maximum age of patients seen by clinic: \_\_\_\_\_

Business Hours, including extended or weekend hours, and virtual visit hours covered by practice:

### Holidays and Floating Business Closures

Nurse Advice Line (NAL) covers the following observed holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas, and four floating business day closures of your choice.

These dates are not eligible for floating business day coverage: July 3, Nov. 22, Dec. 22, Dec. 26, Dec. 29, and Jan. 2 (2024)

Please indicate planned floating business day closures. Early and half-day closures count as one floating business day closure (Limit 4 total per calendar year)

\_\_\_\_\_  
\_\_\_\_\_

The NAL only provides coverage for lunch, office meetings, holiday parties or training when listed as a business day closure.

### Practice Physicians and Advanced Practitioners and Call Partners

Name	Title	email	Contact Number:	Text or call?

Use separate sheet for additional practice physicians, advanced practitioners, and call partners if needed.

### Preferred After-Hours Emergency Department

Pediatric emergency department: \_\_\_\_\_

**Preferred pediatric urgent care or virtual visit locations**

Children's Health Virtual Visit \_\_\_\_\_  
 All Children's Urgent Care \_\_\_\_\_  
 Bumps and Bruises \_\_\_\_\_  
 Cook Children's Urgent Care \_\_\_\_\_  
 Kidz Choice Pediatrics \_\_\_\_\_

Children's Health PM Pediatrics Urgent Care \_\_\_\_\_  
 Urgent Care for Kids \_\_\_\_\_  
 Other Urgent or Virtual Care locations: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Complete for patients 18 y.o. and older**

Preferred adult emergency department? \_\_\_\_\_

Preferred adult urgent care? \_\_\_\_\_

**The Nurse Advice Line follows Barton Schmitt After-Hours Pediatric Protocols.**

**Medication Handling**

**It is the responsibility of the on-call provider to manage new prescriptions not at the pharmacy and medication change requests.**

**Refill policy: The Nurse Advice Line will defer non-urgent refill requests to the office during business hours. Please indicate preference for asthma rescue or controller medications, and any other medication deemed urgent.**

**Medications Authorized for Refill**

Medication	Criteria and indications for refill

**Use separate sheet for additional standing orders if needed.**

**Standing Medication Orders (prescription format)**

Indication	Medication	Strength	Amount	Route	Frequency	Quantity	# Refills	Special Instructions

**Use separate sheet for additional standing orders if needed.**

**High-Risk Patients for NAL to Escalate to On-call Providers**

Name	Date of Birth	Home Address	Phone Number

**Use separate sheet for additional patients if needed.**

\_\_\_\_\_  
 Physician / Administrator Signature

\_\_\_\_\_  
 Date

You may return everything via email to [callschedules@childrens.com](mailto:callschedules@childrens.com) or fax to 214-867-5356.