

SCMC SURGICAL BOARDING CHECKLIST

THE FOLLOWING ITEMS MUST EITHER BE FILLED OUT OR ACCOMPANY YOUR SURGICAL BOARDING IN ORDER FOR THE PATIENT TO BE PLACED ON THE SURGERY SCHEDULE. BOARDINGS WILL BE RETURNED FOR COMPLETION IF ITEMS ARE INCOMPLETE. **INCLUDE A COPY OF THE PATIENTS ID AND INSURANCE CARDS**

- Patient Name
 - Patient Address
 - Patient phone and secondary number if available
 - Patient Date of Birth
 - Patient Social Security Number
 - Patient's Primary Care Physician
 - Patient Email if available, if not please state "None"
 - Patient type must be selected on boarding – Outpatient, Inpatient, Observation
 - Patient Height and Weight must be on boarding sheet
 - Anesthesia type needs to be selected (i.e. general, local, block, choice, etc.)
 - Copies of patient's insurance cards and driver's license
 - Workers' Compensation / Auto open claim letter
 - Letter of Dispute (if workers' compensation / auto is in dispute)
 - Date of Injury for workers' compensation and/or auto accident
 - Equipment required for surgery
 - List diagnosis codes and diagnosis
 - List procedure codes and procedure
 - Length of procedure
 - Requested date of surgery
 - Physician's name, office contact and phone number
 - Opioid "Start Talking" Form and Michigan Automated Prescription System (MAPS) query
- Other documents that may be included: Medical clearance, office notes, labs and other testing
 - If Rescheduling, cancelling and/or revising a surgery, an updated boarding sheet reflecting any changes **MUST** be sent to Surgical Boarding.
 - Attached are acceptable boarding forms
 - ***All surgical authorizations must be received by 3:00PM the day before surgery. If not received, patients will be rescheduled.***