Leaving Practice

Preamble

This document is a guideline of the Board of the College of Physicians and Surgeons of British Columbia.

The guiding principle for physicians leaving practice is the assurance of the continuity of patient care and the preservation of patient records.

Physicians who are leaving their practice should review the following recommendations:

- Patients should be advised that their physician is leaving well before the expected departure date to allow ample time for them to make alternate care arrangements. Where possible, three months is considered appropriate. Patients may be informed in the following way:
  - A detailed letter may be mailed to all patients advising them of the physician's planned departure date. The letter should include a message of appreciation for the privilege of being involved in the patient's care. If appropriate, the letter should introduce a new physician who is taking over the practice, whether or not there are partners or associates in the practice who are accepting new patients, or whether there are other physicians in the community who are accepting new patients. The letter should also outline how patients can access copies of their medical records.
  - A handout or visible signage should be placed in the physician's waiting area.
  - Physicians should discuss their departure date with as many patients as possible in person; office staff should also be prepared to inform patients, discuss options for finding a new physician, and how to access copies of medical records.
  - If appropriate, a departure notice should be placed in a local community newspaper.

- Colleagues and referring physicians should be informed with as much advance warning as possible.
- It is unfair for specialists to accept patients in consultation if they do not expect to be able to complete their treatment.
• Arrangements must be made for the physician’s patient records to be stored and for patients to have access to copies. A colleague may undertake this responsibility, or other independent arrangements must be made. The College must be notified of the location of these records and how they can be accessed.

• Patients should be assisted in their search for a new physician. Family practitioners may provide a list of physicians in their geographic area who are accepting new patients. If a new physician is taking over the practice, the provision of some introductory information would reassure patients.

• Specialists should return their patient to the family physician. If a new specialist is taking over the practice, the family physician should be informed, but the patient referral should not be assumed to continue automatically.

• Care of any patient under acute, active treatment should be transferred to a colleague. All outstanding reports or test results must be reviewed and acted upon.

• Colleagues and the College must be informed of the forwarding address.

• Notification that the physician is leaving practice should be made to the Canadian Medical Protective Association, any private laboratories frequently used, the physician’s hospital, the BC Cancer Agency, the Medical Services Plan, and the College of Physicians and Surgeons of BC. This notification should include the date of departure, the forwarding address, and the person and his/her address to whom correspondence and reports may be sent. That person may be a colleague who agrees to act as a liaison person during the transition period.

The same principles apply in the event of the sudden death or disability of a practitioner. Hopefully, colleagues will be willing to assist the family and the executor of the estate with these tasks.

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