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Termination of the Patient Relationship

DEFINING THE ISSUE

The Board of Nursing has weekly inquiries from licensees and their patients regarding termination from care. Termination of the patient relationship may occur for many reasons including: closure of a practice, changing employment of the provider, illness of the provider, changes in insurance plans or financial status, or lack of agreement on appropriate treatment. Termination may be initiated by either party at any time during the patient relationship. Termination of the patient relationship is rarely brought to the Board's attention when it is voluntary or initiated by the patient.

LEGAL PARAMETERS

Oregon has no current case law on patient abandonment. It is therefore up to each profession to develop and implement regulations and policies which define appropriate processes for termination of the patient relationship. The Board of Nursing has an extensive policy on the definition of patient abandonment, which is found here: *http://cms.oregon.egov.com/OSBN/pdfs/policies/abandon.pdf*

The Board's policy recognizes that there are additional considerations for Advanced Practice Nurses who diagnose, prescribe, and/or serve as the patient's primary or specialty care provider. Further considerations regarding responsibility to direct the termination of the patient relationship include whether or not the provider is employed or owns his or her own practice, ownership and stewardship of medical records, obligations under HIPAA regarding medical information, notification processes and provision of referrals, and provision of medications or services for a specified time frame.

The following Frequently Asked Questions address current guidance for termination of the patient relationship.

1. I am retiring from my self-employed practice. What do I need to do and what are my specific obligations to the Board of Nursing?

The permanent closure of a practice involves several steps. The following processes need to be considered:

- Secure storage and release of records for up to seven years must be arranged. Records that include protected information regarding mental health have additional federal and state regulations regarding their release. Legal advice may be required.
- Notification must be sent to the Drug Enforcement Administration, Board of Nursing, and any insurance plans that includes the date of final closure.
- Although not mandatory, the Board of Nursing will retain a copy of the letter or notification you send to patients in your licensing file.
- Inactivate any currently active billing numbers such as the NPI to prevent fraudulent use.
- Send notification of the closure to patients and former/prospective patients that meets criteria in the OSBN policies regarding records, provision of current medications, and provision of ongoing care. Several

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modalities of notification are advised to obtain maximum public awareness.

2. I am ill and cannot see patients but expect to be back at my job within 3 months. What do I do?

A self-employed practitioner is obligated to provide continuity of care for his or her patient. Patients should be given information regarding the coverage of their care during the interim through either referral or co-management. Involving another practitioner in the patients care requires that both the patient and the practitioner consent to establishing the new relationship and document this with appropriate forms and releases.

A practitioner employed by an organization is responsible to the conditions specified in their employment contract or conditions of employment. Options for temporary disability may include FMLA, short or long-term disability, or resignation from a position. Medical records and other documents remain the legal possession and responsibility of the employer. As per OSBN policy, "Recruiting and maintaining appropriate licensed staff is the responsibility of the facility."

3. My patient misused his/her prescription medication and I have decided to terminate the patient relationship. Am I obligated to continue to prescribe for them anyway?

As per OSBN policy, the legitimate discharge of a patient from care does not constitute patient abandonment. There is no requirement for continuation of medication for a specified number of days. The Board does require that notification be given in writing which specifies a limited refill period of currently authorized medications. This refill can be limited according to the clinical judgment of the prescriber, including the clinical decision to not provide any refills of a current prescription due to misuse or abuse.