Specialist Support for Community Primary Care Physicians in the Calgary Zone

Quick Facts

Support	Response time	Eligible patients	Billing Code	Hours of operation	Method of access
9 - 1 - 1	Immediate	Any unstable patient		24/7	Phone
RAAPID	Immediate to 1 hour	Any patient		24/7	Phone
Community Paramedic Program	Same day	Adult patients		8 - 5 PM weekdays	Fax
Specialist Link	Return call in < one hour	Participating specialties:		8 - 5 PM weekdays	Phone
E - consult	4 to 5 days	Participating specialties:		24/7	Email
Regular referrals	Weeks to months	All specialties		24/7	Fax/Mail

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9 - 1 - 1	Emergent and unstable patients	Call 911 for patients who need emergency room evaluation for suspected or diagnosed urgent conditions where transport to hospital by patient or family is unsafe due to clinical instability or the risk of deterioration.
RAAPID	Patients with urgent medical conditions who need specialist assessment in 24 hours	For clinically stable patients where 'same day' specialist action is needed - review or intervention. Patient will most likely require management in a tertiary care facility.
Community	Patients requiring	Patients who are best assessed or managed in their home for medical issues. Community
Paramedic Program	assessment or support for urgent medical issues	paramedics can provide clinical assessment, blood draws, ECG's, fluid support and urgent parentral therapy for patients with defined or suspected urgent medical conditions.
Specialist Link	When same day specialist advice is needed	When there is a requirement for 'same day' clinical advice by a specialist. Generally this is a patient being evaluated in routine office visit without the expectation that the patient will need to be seen that day.
E - consult	A patient focused question where advise is desired within 4 to 5 days	Assistance with a clinic question that is not time sensitive, where a provincial specialist can provide an electronic response within a week.
Regular referrals	Stable patients requiring out patient specialist assessment for a condition not deemed clinically urgent	Routine referrals should be acknowledged within x working days by the consultant to whom the referral is directed. Patients may be triaged based on urgency, specialist availability and access.