How to discharge a patient from your medical practice

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**Patients can “fire” any physician they employ, and can do so for any reason and without advance notice.** As physicians do not employ patients, they cannot “fire” them. But physicians can discharge patients from their medical practice for any legitimate and non-discriminatory reason, and thus terminate the doctor-patient relationship. Whether the end of the doctor-patient relationship is initiated by a patient or the physician, some safeguards should be taken to ensure that the separation is legally proper and does not endanger the patient. Physicians or their staff who have general questions about discharging patients can contact the MIEC Loss Prevention Department for assistance.

**When patients discharge doctors**

Doctor-patient relationships can end for a number of reasons. Patients may initiate the end of the relationship because they are moving to another location; are dissatisfied with the care they are receiving; can’t afford the doctor’s fees; are dissatisfied with office practices and policies, such as being kept waiting too long for an appointment; require the ongoing attention of another specialist; are “doctor-shoppers;” or are disappointed when their expectations of the doctor are not met. A patient can end the relationship by giving the physician oral or written notification. Physicians should document this notification in the patient’s chart. It may be prudent to send the patient an acknowledgment that he or she has terminated the doctor-patient relationship, and then retain a copy of the letter.

If a patient’s request to change doctors comes as a surprise, the physician might consider phoning the patient to discuss the reasons. Sometimes, a misunderstanding or minor problem can be resolved with a personal call. Alternatively, send a letter to acknowledge the patient’s decision and inquire about the reasons. *(See sample letter “A” on page 3)* If the patient is changing doctors because of a complaint about his or her medical care and the doctor is concerned about the possibility of a malpractice claim, notify the MIEC Claims Office for advice on how, or whether, to respond to the complaint. Only a physician should respond to a patient’s complaint about medical care. If patients are leaving the practice because it is too difficult to get an appointment, or because they have to wait too long in the reception area, review your scheduling practices.
When doctors discharge patients

Physicians can end a doctor-patient relationship for many reasons, including a determination that the patient requires the services of a different specialist.

Doctors also may discharge patients who: are uncooperative; do not follow medical advice; do not keep appointments; do not pay their bill; or are disruptive or unpleasant to the staff. **Caveat:** Some managed care plan (MCP) contracts limit a physician’s ability to terminate doctor-patient relationships. Read managed care contracts carefully to determine if you are able to discharge assigned patients and, if so, what form of notice you must give to patients and to the MCP. If you leave an MCP that assigned patients to you, even if the plan sends its own letter advising patients, you should send a letter to each patient yourself and indicate what arrangements you have been told the MCP will make to assign the patient to a new doctor.

Physicians can terminate a doctor-patient relationship for virtually any non-discriminatory reason, provided they give the patient proper notice and do not withdraw from caring for a patient who is in the midst of a medical crisis. **The decision to end a doctor-patient relationship should be made by a physician and never by office staff.**

Avoid a claim of abandonment

Once a physician undertakes to treat a patient, he or she must continue to provide care unless:

a. the patient’s condition is such that care is no longer reasonably required;

b. the patient terminates the doctor-patient relationship;

c. the physician gives written notice of withdrawal of care and allows sufficient time (typically 15-30 days) for the patient to employ another doctor; when deciding the length of transition time, one should take into consideration the availability of other physicians in the area who are accepting new patients;

d. the physician agreed to treat only a specific ailment or injury, or agreed to treat at a certain time or place, such as when a doctor who is on an emergency department on-call panel agrees to see the patient on a limited basis for a specific problem. (Hospital medical staff bylaws usually determine whether on-call physicians summoned to the ED must also accept the patient for continuing follow-up care.)

At the physician’s discretion, the reason for the decision to withdraw from care may be included in the termination letter. Omitting a reason, however, may trigger a phone call or letter from the patient. As appropriate, advise patients with chronic conditions if they need ongoing medical attention, stressing any urgency; mention medication requirements; and reinforce earlier health care recommendations. Suggest the patient contact the local medical society for the names of physicians who accept new patients. Patients who were assigned by a managed care organization (MCO) should be referred back to the MCO for re-assignment to another physician. Objectively document in the patient’s chart the reasons for terminating the doctor-patient relationship and, as appropriate, include details of discussions with the patient.

The sample withdrawal from care letter (See sample letter “B” on page 4) can be adapted by physicians to discharge a patient and permanently withdraw as the patient’s physician. Send the letter by certified mail and request a return receipt, which is evidence the addressee received the letter. File a copy of the letter and the signed returned receipt in the patient’s medical chart. Should the patient fail to accept the certified letter, file the returned, unopened letter in the patient’s chart, and send another copy of the letter by regular mail. If appropriate, extend the date by which the patient is expected to have located a new physician to ensure the patient has adequate time to do so. Write a note in the patient’s chart to indicate the date this letter was mailed and by whom.

Advise appointment scheduler

Tell appointment schedulers when a patient has been sent a withdrawal from care letter, so that an appointment is not offered to the patient after the transition period. Scheduling a discharged patient for
a new appointment may be construed by the courts as the re-establishment of the doctor-patient relationship.

**End the relationship cordially**

Whatever the reason a physician decides to withdraw from a patient’s care, he or she is advised to manage the process cordially. It is customary for the withdrawing physician to offer to provide a copy of the patient’s chart to another physician at no charge. Some physicians charge a modest fee if the copy is made only for the patient, rather than for another doctor, but most absorb this cost to avoid ending the doctor-patient relationship on a negative note. **Under no circumstances should a physician who is withdrawing from care refuse to provide a subsequent treating physician with a copy of the medical record because the patient has not paid for medical services.** Such withholding of the records and medical information exposes the physician to liability should the patient suffer an injury because another doctor did not have access to important information in the medical record. **Do not relinquish the original chart to the patient or to other doctors.** With the patient’s written authorization, a copy of the chart can be sent to another doctor or to the patient.

**On-call responsibility remains**

A physician who is on an emergency department’s on-call panel and who is summoned to the ED to see a patient who was discharged from the doctor’s practice cannot refuse to see the patient in the ED. The physician can, however, limit his or her responsibilities to treating the patient in the emergency department and, depending on the hospital’s medical staff by-laws, may not have to see the patient in follow-up, but can refer the patient to another physician. When the on-call physician makes a referral to another doctor for follow-up, or finds another physician to admit the patient to the hospital, the arrangements should be clearly documented in the ED medical record and made clear in writing to the patient.

**Get advice from MIEC**

**Loss Prevention Department**
Oakland, CA  
510/428-9411 (Bay Area)  
Outside 510:  800/227-4527.  
Fax: 510/420-7066  
E-mail: lossprevention@miec.com

**Home Office Claims (Oakland)**
510/428-9411 (Bay Area)  
Outside 510:  800/227-4527.  
Fax: 510/654-4634

**Hawaii Claims Office**
Honolulu  
Phone: 808/545-7231  
Fax: 808/531-5224

**Idaho Claims Office**
Boise, ID  
Phone: 208/344-6378  
Fax: 208/344-7192

Visit MIEC on the Internet:  
www.miec.com

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**Sample Letter A**

**Dear _____________________:**  
Date ________________

This letter acknowledges receipt of your request to transfer your medical records and care to [Dr. _________] another physician. Your signed authorization will permit us to send a copy of the chart to your new doctor. [or Please sign and return the enclosed authorization to permit us to send a copy of your chart to your new doctor.]

I would appreciate an opportunity to know your reasons for changing physicians. If you have not been pleased with my services or some aspect of my practice, I hope you will let me know so that my staff and I can improve our service to other patients. Please call or write to me at your convenience. I have valued our relationship and wish you well in the future.

Sincerely yours,

_________________________, MD
AUTHORIZATION TO RELEASE MEDICAL INFORMATION

Date: ________________  Patient’s Name: ________________________________

To: ____________________, MD

I hereby authorize you to transfer or make available all medical records or reports relating to my care to the following physician: ________________________________, MD, at ____________________________.

This authorization is valid for one year.

______________________________
Patient’s signature

Sample Letter B

Dear ____________:

I find it necessary to inform you that I will no longer be able to serve as your physician. The reason for this decision is [indicate a reason or omit this sentence.]

As you [may] require medical attention in the future, I recommend you promptly find another physician to care for you. [You require ongoing medical attention for the following:] Contact the [local or state] medical society for the names of physicians who are accepting new patients.

I will be available to treat you on an emergency basis only until [insert date, 15-30 days after this letter is mailed]. This will give you time to find a new physician. Enclosed is an authorization form that permits me to send your new physician a copy of your medical records. Please complete the form and return it to me.

Sincerely yours,

______________________________, M.D.

SENT BY CERTIFIED MAIL ON DATE WITH RETURN RECEIPT REQUESTED.