A physician-patient relationship is established when a physician accepts, has agreed to accept, or undertakes to render care to a patient. Once an appointment has been made for a patient to see a physician, a physician-patient relationship is established. It is almost impossible to avoid creating a patient-physician relationship when a patient goes for a follow-up visit by way of referral from a hospital emergency room.

A physician may withdraw from a physician-patient relationship provided that the relationship is terminated in the proper manner, unless circumstances do not permit termination of the relationship. Although the right to engage in a physician-patient relationship is not absolute but terminable at will, Olaf v. Christie Clinic Assn’n, 558 N.E.2d 610, 613-14 (1990). Abandonment is grounds for discipline under the Medical Practice Act of 1987 [225 ILCS 60/22 (A) (16)]. Once a relationship is created it may be ended in one of five ways without liability:

1) When medical care is no longer needed.

2) When the patient specifically withdraws from the relationship.

3) When the care of the patient is transferred to another physician. (It is recommended that the physician advise any successor physicians of the patient information necessary to continue treatment when this is known and upon request.)

4) When the physician who is withdrawing from treating the patient gives ample notice to the patient. (If the patient is without a current medical condition requiring care, the physician may simply notify the patient that he/she is withdrawing from the relationship and no longer wishes to provide care.)

5) When the physician is unable to provide care based upon the lack of training experience, illness or incapacity. Any such illness or incapacity must be of a significant nature to disable the physician from being able to provide care.

If the patient has a continuing medical problem, the physician must find a substitute physician/provider to provide care, or provide care until a substitute is found. There are additional restrictions when a patient presents himself/herself to an emergency room.

"Sufficient notification" depends on the circumstances. If a patient has a continuing medical problem it would not be unreasonable to expect the physician to continue treating the patient until substitute care is found, either by the patient or the physician. There is no definitive time period in which notification must be given.

The general guidelines for terminating a physician-patient relationship apply regardless of whether the physician will be paid for services. Thus, the same general guidelines pertaining to patient
abandonment as discussed above apply when a physician is terminated from any state or federal program such as Medicaid and/or Medicare, a managed care program, or when a physician voluntarily withdraws from such a program. The physician should document the steps taken to terminate a physician-patient relationship in the patient’s medical record.

(1/10)