

**Procedural Standard 99-11 Revised**  
January 11, 2005

TO: ALL DES Staff

FR: Kristin Johnson, Director

BY: Barbara White, RN., MSN, Manager Program Compliance Appeal Dept.

**RE: Unanticipated clinical finding during consultative examination**

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**Purpose:** The purpose of this memorandum is to state the procedures to follow when an unanticipated clinical finding is made during a consultative examination. The consultative examiner may determine that the finding should not be disclosed during the examination or a test result may not be available at the time of the encounter. DES must ensure that the applicant is made aware of the clinical findings and encouraged to seek medical attention.

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Guideline:

1. The Consultative Examiner, if appropriate, should discuss the clinical finding and need for follow up with the applicant at the time of the examination and include this information in the written report to DES.
2. The CE provider will notify DES when unanticipated health problems are found but not disclosed to the applicant during examination. If a DES reviewer notes an unreported unanticipated finding, the Reviewer will notify the Associate Director of Clinical Affairs. The Associate Director or Disability Reviewers will contact the CE provider to determine if the findings were disclosed at the time of the examination. If not, DES will proceed with number 3 and 4.
3. The DES Associate Director or designee will contact the applicant about the findings and advise the applicant to seek medical assistance for this health problem. Copies of related tests may be mailed to the applicant or the applicant's primary care provider/treating source at the applicant's request by sending a signed valid authorization to release protected health information to DES. ( DES will forward a blank form to client)
4. If the applicant is non-English speaking and gives signed permission, the Associate Director or designee will contact the applicant's primary care provider/treating source about the finding after DES receives a signed valid authorization.
5. Documentation of these activities will be made in the progress notes.

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