

LOS ANGELES GENERAL MEDICAL CENTER POLICY

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Subject: TRANSFER OF PATIENTS FROM THE MEDICAL CENTER TO ANOTHER FACILITY	Original Issue Date: 11/18/88	Policy # 705.1
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Policy Owner(s): Inpatient Medical Director & Nursing Director - Patient Flow Executive Sponsor(s): Chief Medical Officer		
Department(s) & Committee(s) Consulted: Office of Risk Management Emergency Department Dept. of Utilization Review Quality Improvement Committee	Reviewed & approved by: Attending Staff Association Executive Committee Senior Executive Officer	Approved by: Chief Medical Officer
		Chief Executive Officer

PURPOSE

To establish a mechanism for transferring patients from a Los Angeles General Medical Center facility to another County or private hospital facility in compliance with federal and State laws and regulations.

POLICY

Los Angeles General Medical Center facilities shall comply with all federal and State laws and regulations concerning transfers of patients from its facilities. If a patient is moved to another location within the medical center, the transfer requirements are not applicable because technically the patient has not been transferred. This policy shall govern the procedures developed and implemented by any Medical Center department/service that transfers patients to an outside hospital facility.

For all patient transfers from the Medical Center to another facility, the Medical Center staff is responsible for notifying the patient's family and/or significant other unless the patient requests the staff not to do so.

Transfer Of Patients With An Emergency Medical Condition

The Medical Center may not transfer any patient with an unstabilized emergency medical condition unless the patient requests the transfer or a physician certifies that the medical benefits reasonably expected from the provision of treatment at the receiving facility outweighs the risks to the patient from the transfer. The transfer must comply with all sections of Medical Center Policy 706 EMTALA Compliance. The Medical Center must provide additional examination and treatment as may be required to stabilize the emergency medical condition.

Requirements for Transfer

A patient with an unstabilized emergency medical condition may be transferred only if the Medical Center complies with **all** of the following standards:

- The Medical Center provides medical treatment within its capacity to minimize the risks to the individual's health and, in the case of a woman in labor, the health of the unborn child; the patient record shall reflect the vital signs and condition of the patient at the time of the transfer.

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- The receiving hospital has available space (a.k.a. capacity) and qualified personnel (a.k.a. capability) for treatment of the patient; and the receiving hospital and physician have agreed to accept the patient and provide appropriate medical treatment.
- The sending physician writes an order for transfer in the medical record that includes the name of the accepting physician, facility and specifies the required mode of transportation and any necessary equipment to affect a safe transfer.
- For the transfer of a patient from the hospital to another hospital for higher level of care, the sending physician first requests a Consult to Utilization Review via the EMR. The Utilization Review nurse will determine which higher level of care facilities are available to the patient based on the patient's funding. Once the available facilities are identified, the UR Nurse and Physician may initiate the transfer request by contacting the receiving hospital's transfer center or admission department.
- The Medical Center sends to the receiving facility all medical records (or copies thereof) available at the time of transfer related to the emergency condition of the patient, including:
 - Records related to the patient's emergency condition, observations of signs or symptoms, preliminary diagnosis, treatment provided, results of any tests, and vital signs at the time of transfer; other records (including pending test results or records not available at the time of transfer) must be forwarded to the receiving hospital as soon as practicable after the transfer;
 - The patient's informed written consent to transfer
 - The physician's certification (or copy thereof)
 - The name and address of any on-call physician who has refused or failed to appear within a reasonable time to provide necessary stabilizing treatment thus necessitating transfer.
- The transfer is executed using proper personnel and equipment, as well as necessary and medically appropriate life-support measures.

Transfers for Off-Site Tests

If a patient who has or may have any emergency medical condition is transferred to another facility for a test with the intention of the patient returning to the Medical Center after the test, the Medical Center shall execute an appropriate transfer in accordance with EMTALA standards.

Disputes

The treating physician is responsible to determine whether a patient is stabilized or stable for transfer, and the mode of transportation for the transfer.

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Patients Requesting Transfers

Competent patients or persons with appropriate authority, e.g., parents of minor children, can seek care in another hospital facility and shall be allowed to leave at will. When notified by the patient or patient's family of the proposed transfer, the patient care team will ensure that:

- There is transfer of care between the transferring and accepting physician;
- A bed is available at the receiving hospital; and
- The patient and patient's family are informed about the risks, benefits, and all transfer arrangements.

Patients Transferred Due To Lack Of Bed Availability Or Services

Patients may be transferred to another facility when the Executive Director, Chief Operations Officer, Chief Medical Officer, Hospital Administrator, or Administrative Officer of the Day (AOD), has made an informed decision that staffed bed availability is inadequate to safely meet the demands of the patient load. Unless the patient or responsible party objects, a transfer/diversion shall be arranged by the Medical Center to another facility. All such transfers/diversions shall be coordinated by the Medical Alert Center.

RESPONSIBILITY

Administration
Attending Staff
Residents
Nursing Staff
Utilization Review

PROCEDURE DOCUMENTATION

Administrator of the Day Manual
Attending Staff Manual
Nursing Services and Education Generic Structure Standards
Departmental Policy and Procedure Manuals

REFERENCES

42 United States Code (USC), Section 1395dd(c)(1)(A)(I); also known as Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), Section 9121; also known as Social Security Act, Section 1867(a); also known as Emergency Medical Treatment and Active Labor Act (EMTALA)
United States Department of Health and Human Services, Division of Health Care Financing Administration (HCFA) Regulations
California Code of Regulations, Title 22

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DHS Policy 373.3 (INTRA-COUNTY HEALTH FACILITY PATIENT TRANSFER)

REVISION DATES

December 24, 1990; January 20, 1999; April 16, 2002; January 11, 2011; February 7, 2017; March 27, 2020; December 7, 2023