

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-114 PATIENT TRANSFER	POLICY #: 1030
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DATE APPROVED: 09/06/2018	

PURPOSE: To ensure staff is informed of the steps required to facilitate continuity of care and the timely transfer of patients and records from the Ambulatory Surgical Center (ASC) and Antelope Valley Hospital (AVH).

POLICY: It is the policy of the ASC to transfer to AVH patients who:

1. Have received CPR
2. Have a presenting medical condition that the ASC is not equipped to handle
3. Require emergency treatment
4. Have a recovery that is going to be prolonged beyond the ASC hours of operation.

PROCEDURE:

1. When a patient's need for transfer from the ASC to AVH has been determined and substantiated by the patient's physician (attending physician and/or the anesthesiologist), the emergency transfer protocol will be initiated by the attending physician and/or the anesthesiologist and the Nursing Director, or designee, as follows:
 - A. The Nursing Director, or designee, will call and notify AVH of the need for emergency admission prior to the transfer.
 - B. The attending physician and/or the anesthesiologist must communicate with the receiving physician any significant procedural findings prior to the transfer.
 - C. The attending physician and/or the anesthesiologist must inform the patient, family or responsible adult when the physician deems a transfer to the hospital necessary in order to preserve the life and/or safety of the patient.
 - D. The attending physician and/or the anesthesiologist must document the patient's condition and the reason for transfer on the transfer forms.
 - E. Nursing staff will complete the patient transfer packet along with the Nursing Patient Transfer Action Checklist. (Attachment I).

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- F. The attending physician and/or the anesthesiologist will complete the Provider Patient Transfer Action Checklist. (Attachment II).
- G. Nursing staff will copy the following documents which must accompany the patient who is being transferred:
- Patient Information Sheet
 - Nursing Assessment sheet
 - Anesthesia pre-op evaluation
 - Surgeon's History and Physical
 - Intra-operative nursing notes
 - Report of Operation
 - Anesthesia record
 - Immediate Operative Report
 - PACU Record
 - Lab reports, x-ray reports, EKG (if applicable)
 - Patient Transfer Record (Attachment II)
- H. The nurse caring for the patient shall place copies of the transfer record, face sheet and the patient transfer reporting form in an envelope and provide it to the Nursing Director, or designee.
- I. The nurse caring for the patient shall complete a report on the Safety Intelligence (SI).
2. Post Transfer Debriefing will be conducted by the attending physician and/or anesthesiologist with the ASC team to discuss patient follow up plan and confirm completion of Nursing and Provider Patient Transfer Action Checklists (Attachment III).
3. The Nursing Director, or designee, will be responsible for making arrangements for safe and timely transportation of the patient by calling for 911 or contacting the appropriate Ambulance Service, in accordance with Federal and State Laws and regulations.
4. The Nursing Director, or designee, will be responsible for the transfer or appropriate disposition of personal effects, particularly money and valuables.
5. The Nursing Director, or designee, is responsible for the follow up of the transferred patient, by contacting the patient or calling AVH, and shall document such follow up in the medical record.

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6. Nursing Director, or designee, will complete sections 1- 4 of Part A and Part B of the Patient Transfer Reporting Form (Attachment III) and forward to the Medical Director.
7. Medical Director, or designee (Medical Staff Coordinator), will enter physician information (section 5 of Part B) onto the Patient Transfer Reporting Form and return the form to the Nursing Director.
8. Nursing Director, or designee, will make three copies of the form and
 - Send one copy of the full form to AVH.
 - Send one copy of Part B only (page 2), within 15 days of the transfer, to the Office of Statewide Health Planning and Development, at the address indicated on the form.
 - Send one copy of the full form to the Medical Director’s Office.
9. The Nursing Director, or designee, will place the original completed form in the patient’s medical record.
10. The Nursing Director, or designee, will contact Sheriff’s Department to meet the ambulance, escort the paramedics to the patient pick up point, and provide any necessary assistance. The Officer will remain with the paramedics until the pick-up is completed.
11. All adverse events including patient transfers will be monitored on an ongoing basis by the Quality Management RN and will be presented quarterly in the Medical Advisory Committee meeting.

ATTACHMENTS:

1. Patient Transfer Action Checklist
2. Provider Patient Transfer Action Checklist
3. Patient Transfer Record
4. Patient Transfer Reporting Form

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