

INTERFACILITY GUIDELINE FOR PATIENT TRANSFER

ADMINISTRATIVE 1.18

*Interfacility ** patient transfers on an emergency basis are commonly initiated when definitive diagnosis or therapeutic needs of a patient are beyond the capacity of one facility.*

- I. Patients that are being transported for diagnostic test(s) or procedures **do not** require a receiving physician or telemetry call. **It is required that a confirmation call be placed to the receiving department immediately prior to departure from the sending facility.** Responsibility for patient care and initial transport orders rests with the patient's sending physician.
- II. Patients that are being transported for direct admission to an inpatient bed or to the Emergency Department **do** require a receiving physician. The receiving facility physician responsible for the patient's admission must be contacted by the transferring physician and agree to accept the patient transfer prior to EMS assuming care of the patient. The patient should be stabilized to the best ability of the sending facility prior to transport. Immediately prior to departure a confirmation call by the transporting unit or agency to the appropriate department confirming acceptance will be made.
- III. The skill level of the transporting unit personnel must be consistent with the level of care required by the patient needs during transport.
- IV. EMS personnel must receive an adequate summary of the patient's condition, current treatment, possible complications, and other pertinent medical information by the physician or nurse. Transfer documents (summary, lab work, x-rays, scans, advance directives, etc.) shall be given to the EMS personnel.
- V. Prior to departure, the sending facility shall provide the transport crew with information regarding the final disposition of the patient. This should include the facility name, room number and accepting physician's name.
- VI. If changes in patient condition deviate from initial transport orders while enroute, EMS is required to make contact with an appropriate facility (closest hospital or Medical Direction Authority). Medical Direction Authority of the transport agency will be the final authority for the transporting personnel should any conflict in patient management occur.

**Per R25-803

"Interfacility Transport" means a **prearranged** ambulance transport of an individual receiving medical care from one licensed accredited hospital or licensed accredited health care institution to another licensed accredited hospital or licensed accredited health care institution.

EFFECTIVE 2/95 REVISED 3/96; 4/2005