General Policy and Procedure

Inter-Hospital Patient Transfers

The purpose of this protocol is to establish a uniform procedure for inter-hospital transfers. Patient transfer is a physician to physician referral. It is the responsibility of the transferring facility to perform a screening examination, determine if transfer to another facility is in the patient’s best interest and initiate appropriate stabilization measures prior to transfer.

Responsibility for the patient during transport lies with the transferring facility until the patient arrives at the receiving facility. Inter-hospital transfers must begin or end at a facility within the Washtenaw/Livingston County MCA for this policy and procedure to apply.

Procedure:

A. The transferring physician is responsible for securing the acceptance of the patient by an appropriate physician at the receiving facility.

B. Care initiated by the transferring facility may need to be continued during transport. The transferring physician will determine the treatment to be provided during the period of the patient transport, and what, if any, staff will be necessary to accompany the patient en route.

C. Additional health care personnel may accompany the patient under the direction of the transferring physician, who is responsible for ensuring their qualifications. This person(s) shall be responsible for the direct patient care during transport, and will render care to the patient under the orders of the transferring physician. All medications anticipated in these situations will be provided by the transferring facility and be under control of the accompanying hospital staff. It will be the responsibility of the transferring facility to provide arrangements for the return of staff, equipment, and medications.

D. If the transferring physician elects to transfer the patient in the care of paramedics, the physician must provide written orders to the paramedic prior to transfer. The orders must be consistent with the paramedics’s training and abilities. The paramedic has the right to decline transport if he/she is uncomfortable with the orders (see Protocol For Non-Standard Treatment 1-09), or, alternatively, to insist a hospital staff member accompany them on the transfer.

E. Lidocaine, aminophylline, heparin, antibiotics, Aggrastat (tiropiban), Integrilin (eptifibatide), Reopro (abciximab), and potassium may be continued during transport. Infusion of these medications must be maintained by a regulatory device. The regulatory device will be supplied by the sending facilities. Should complications arise, infusions must be discontinued and Medical Control contacted.

F. Nitroglycerin infusions may be continued during transport. This medication requires the use of a specialized programmable pump to be supplied by the transporting ambulance service. Paramedics must receive training in the use of this medication and of the pump. See "Nitroglycerin Drip" protocol.

G. Patients who are receiving vasoactive medications or are hemodynamically unstable will not be transported by ALS units without accompanying hospital staff. If the Paramedic considers a patient unstable he/she may request hospital staff to accompany the patient. Alternate transport may also be considered, i.e. MICU or air medical.

H. Patients with chest tubes maintained adequately with Heimlich valves alone may be transported by ALS. The Heimlich valve alone may be transported by ALS. The Heimlich valve should be supplied by the sending facility. Patients with chest tubes that require water seal drainage should be transported with responsible staff (RN) or by alternate transportation, i.e. MICU or air medical.

I. Patients beyond the scope of practice of the transfer capability of Paramedics as defined by this protocol must be transported with additional hospital staff or by alternate means, i.e. MICU or air medical (see MICU capabilities)

J. Should questions or problems arise during transfer the crew may contact the sending physicians. If this is not possible or in event of an emergency the appropriate protocol should be followed and Medical Control contacted for direction.

K. Any medications used from the ALS Drug Box will be recorded by the Paramedic on an ALS Log Sheet. Upon arrival at the receiving facility the Standard Drug Box will be exchanged per protocol. If the receiving facility is outside the Washtenaw Livingston MCA, replacement of the Drug Box is the responsibility of the sending facility.
Washtenaw/Livingston MCA

Interhospital Patient Transfers

L. The following information should accompany the patient (but not delay the transfer in acute situations):
   1. Copies of pertinent hospital records
   2. X-rays
   3. Copies of all test results and lab reports
   4. Written orders during transport
   5. Any other pertinent information

M. Documentation must include the interventions performed en route and by whom the intervention was performed.

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