

# **TRANSFER PROCEDURES**

**POLICY:** In the event that total patient evacuation (in one of our facility buildings) becomes necessary, physicians will be requested to discharge patients where medically appropriate. Patients can be transferred within our facility to appropriate patient-care areas. Ambulance and/or other suitable vehicles will take patients requiring hospital transfer. Patients must have authorization of acceptance from the receiving hospital **prior** to being transferred.

## **PROCEDURE:**

### **1. Transfer Coordinator (ICC should be opened):**

- a) Will be designated by the ICO or his designee, who will be familiar with current admitting, transfer, and discharge procedures.
- b) The Transfer Coordinator will have the authority, responsibility, and accountability of implementing these procedures.
- c) The Transfer Coordinator shall be responsible for the orderly transfer of patients and other personnel, proper identification procedures, transfer and maintenance.
- d) Additional personnel to assist in implementing these procedures will be assigned from the respective departments; i.e. Admitting, Hospital Records, etc.

### **2. Transfer/Receiving Area Responsibilities:**

- a) The transfer coordinator will be functioning under the CEO's ESF8 for patients' acceptance to other local hospitals. The ICC will assist with this process.
- b) Identification tags will be placed on patients being transferred. (To be done on nursing units). ID tags will include patient's name, diagnosis, age, and physician.
- c) The patient's physician will determine both the type of bed and mode of transportation required. The Transfer Coordinator will make arrangements for the transfer.
- d) All patients transferred will be discharged from our facility.
- e) A copy of the medical record will be sent with the patient. In the event that there is no time to copy the medical record, a brief discharge summary will accompany

the patient. A copy of the medical record will be sent to the receiving hospital within 48 hours.

- f) Logistical arrangements: The copy of the medical record or summary will accompany the patient to the new facility. A three-day supply of medications will also accompany the patient. Food, water and other necessities will be provided by the receiving facility. The above may vary depending on the type of disaster.
- g) The Transfer Coordinator shall enter the patient's information on the Patient Transfer Log. The log shall include the patient's name, destination, diagnosis, and accepting physician (If available).

### **3. Receiving Area:**

- a) Once the disaster is over and the facilities are cleared to accept patients, those who were previously transferred from Kings County hospital may be transferred back to Kings County hospital.
  - 1) All patients being returned must have an accepting physician.
  - 2) The number of patients being returned will be contingent upon bed availability.
  - 3) The Transfer Coordinator will follow routine transfer policies, however, these patients will be given priority.
  - 4) The transferring medical physician will assure that the patients are medically stable for transfer back to our hospital.