
EMERGENCY DEPARTMENT POLICIES

SUBJECT: Inter-Institutional Transfer of Patients

NO. 4.3

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Patient Population

Neonate	√
Pediatric	√
Adolescent	√
Adult	√
Geriatric	√

POLICY:

The transfer of patients to and from health care institutions is regulated by the Emergency Medical Treatment and Labor Act (EMTALA). This regulation ensures that only patients requiring a higher level of care than can be provided by a health care facility or stable patients are transferred. In addition when a patient is transferred, institutions must communicate the to designated personnel the condition and reason for transport and the patient must be accompanied by proper medical monitoring and patient documents.

IMPLEMENTATION: A patient may not be transferred to another institution unless a medical screening exam has been provided and the patient is stable or the institution can not provide the necessary level of specialty care required by the patient (for example: burn, psychiatric, pediatric, ob/gyn, trauma, reimplantation, or neurosurgery). The patient may specifically request transfer or refuse transfer as long as they understand risks to patient for requesting, accepting, or refusing transfer.

Under these circumstances transfer may occur only after the designated health care agent at the transferring institution communicates with the designated personnel at the receiving institution. If a facility requests Mount Sinai to receive transfer of a patient for higher level of care and we have said services we will accept the patient. The designated person for transfers to and from the Emergency Department at Mount Siani Hospital is the Emergency Department attending physician.

The patient must be accompanied by the appropriate level of monitoring and staff to provide care for forcceable complications during transport. These provisions are the responsibility of the transferring facility. At Mount Sinai the Emergency Department Nursing Director or the Evening and Night Nursing Administrators are responsible for providing copies of patient records including medical chart, tranfer form, laboratory results and radiographic films.

The need for monitoring or treatment of a patient during transport by medical personnel will be determined by the Emergency Department attending. When it is determined there is such a need a licensed physician or nurse qualified to give emergency care will be provided.

Transport is arranged by calling a private ambulance service or through the Fire Department of the City of New York Emergency Medical Services if referring patient to Specialty Referral Centers
(See Policy 4.1 for Specialty Referral Centers and criteria)

1. Whenever an individual comes to the Emergency Department for medical care, an appropriate medical screening examination will be provided to determine whether or not an emergency medical condition exists.
2. An emergency medical condition means a condition manifesting itself by acute symptoms of sufficient severity (including severe pain, psychiatric disturbances and/or symptoms of substance abuse) such that the absence of immediate medical attention could reasonably be expected to result in:
 - a. placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy;
 - b. serious impairment to bodily function; or
 - c. serious dysfunction of any bodily organ or part.

In addition, with respect to a pregnant woman who is having contractions, an emergency medical condition exists if:

- d. there is inadequate time to transfer the woman safely to another hospital before delivery; or
 - e. the transfer might pose a threat to the health or safety of the woman or of the unborn child.
3. If the individual is determined to have an emergency medical condition, the individual will be provided either:
 - a. such treatment as may be required and that the hospital is capable of providing to stabilize the medical condition. An emergency medical

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condition is stabilized when no material deterioration of the condition is likely, within reasonable medical probability, to result from or occur during the transfer of the individual from a facility or, with respect to a pregnant woman experiencing contraction, the woman has delivered, including the placenta; or

b. an appropriate transfer to another medical facility in accordance with the policies and procedures described below.

4. An individual who has been determined to have an emergency medical condition that has not been stabilized shall be transferred from Mount Sinai only under one of the following two circumstances:

a. The transfer is requested in writing by the patient, or by a legally responsible person acting on the patient's behalf, and the written request states that the patient (or his/her representative) has been informed of the hospital's obligations to provide stabilizing treatment and of the risks and benefits of transfer and also states the reasons for the request; or

b. An attending physician has signed a Certification form which shall become part of the medical record (i) giving a complete picture of the benefits reasonably expected from appropriate care at the receiving facility and of the risks associated with the transfer, including the time away from the acute setting during the transfer; and (ii) stating that in the physician's best judgment the reasonably expected benefits outweigh the increased risks; and

5. Prior to any transfer, the hospital will provide medical treatment insofar as it has the capacity to minimize the risk to the patient and, in the case of a woman in labor, to the health of the unborn child. In addition, prior to transfer the hospital will determine that the receiving facility has available space and qualified personnel to treat the patient and will obtain the receiving facility's agreement to accept the transfer. Copies of the Inter-Hospital Transfer Form, the signed Patient's Consent to Transfer and the Physician's Certification for Transfer, as appropriate, and copies of all medical records related to the emergency condition that are available at the time of the transfer are sent to the receiving institution along with the patient.

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6. If a patient is being transferred to a specialty treatment center as outlined in the Fire Department City of New York Emergency Department standards, every effort will be made to effect the transfer within 30 minutes of the time a decision to transfer is made.

IMPLEMENTATION:

Transfer of Patients to Acute Care Facilities

- A. All requirements for transfers established by the hospital's policy regarding inter-institutional transfer of patients will be fulfilled prior to any patient transfer.
- B. The Mount Sinai physician shall contact the physician at the receiving medical facility and provide pertinent data on the patient. For a transfer to take place, the receiving facility must confirm that it has available space and qualified personnel to provide treatment and agree to accept the transfer and to provide appropriate medical treatment.
- C. The Mount Sinai Emergency Department RN shall contact the RN at the receiving facility and give nursing report
- D. A "Physician's Certificate and Patient Consent for Transfer" Form and the "Inter-Hospital Transfer" Form must be completed for all patients transferred from the hospital. Copies of these forms must accompany the patient to the receiving institution and the original copies must be filed for the patient's medical record.
- E. If the patient, or a legally responsible person acting on behalf of the patient, requests a transfer, also complete the "Patient Initiated Transfer Statement." Included the original copy of the Statement in the medical record retained by the Hospital and in the copy of the medical record sent with the patient to the receiving facility.
- F. If the patient lacks capacity or is otherwise unable to act on his/her own behalf and no responsible person is available to act on behalf of the patient, document the reasons that the patient is unable to act on his/her own behalf or is deemed otherwise incompetent on the Inter-Hospital Transfer Form in the section labeled "General Comments/Mental Status Evaluation."

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- G. If the patient, or a person acting on the patient's behalf, refuses to consent to a proposed examination, treatment or transfer, complete the "Refusal to Consent" Permission Sheet #13. Take all reasonable steps to secure the patient's, or the responsible person's, refusal to consent to treatment or to transfer in writing.
- H. All Inter-Institutional Transfers must be in compliance with EMS transfer guidelines:
1. An Emergency Department physician must complete an "Inter-Institutional Transfer" Form and the "Physician's Certification for Transfer" Form.
 2. If the patient requests a transfer, the "Patient Initiated Transfer Form" must also be completed.
 3. The Mount Sinai Hospital Administrator on Duty or a designee must review, approve, and sign the Inter-Institutional Transfer Form.
 4. The ED Clinical Nurse Manager or Nursing Administrator on duty is responsible for ensuring that all forms are complete and for placing a copy of the completed form in the ED Transfer Log Book.
- I. Transportation is arranged via ambulance or ambulette: Monday - Friday, 9:00 a.m. - 5:00 p.m., by the Social Worker. Nights, Holidays, and Weekends by the charge nurse.

For psychiatric patients, transportation is arranged by a member of the Psychiatric ER team.

If a private ambulance is used and patient/facility cannot pay, green social service form must be completed and left for the adult or pediatric social worker. Social Services assumes this cost in cases where Mount Sinai is initiating the transfer.

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Patients are responsible for transportation costs if they request the transfer.

When the ambulance company is called, the patient's name, sending hospital and physician, receiving hospital and physician information is provided. This information including ambulance company name, must be noted on the "Inter-Institutional Transfer" form.

- J. A copy of the medical record with available data is sent with the patient. Other records that are unavailable at the time of the transfer, such as pending tests or historical records are communicated to the receiving facility as soon as possible.
- K. The level of transport personnel must be adequate for the safe transfer of the patient.
- L. The hospital is require to maintain a central log on each person who comes to the emergency department seeking assistance and deposition.
- M. The patient's personal effects are sent with the patient upon transfer.
- N. For psychiatric patients, voluntary or involuntary applications for admission (with status and rights), completed for the receiving hospital must accompany the patient's medical records. In the case of an involuntary patients, the Applicant will be considered the responsible other for consent purposes.