

PATIENT CARE PROCEDURE #4 INTERFACILITY TRANSFER OF ADULT TRAUMA PATIENTS

I. STANDARD

1. All interfacility transfers via ground or air shall be provided by the appropriate licensed and/or verified services with personnel and equipment to meet patient needs.
2. Immediately upon determination that the patient's needs exceed the scope of practice and/or their MPD approved protocols, or physician director standing orders for air ambulance's non-EMS personnel, the licensed and/or verified service personnel shall advise the facility personnel that they do not have the resources to do the transfer.

II. PURPOSE

Provide a procedure that will facilitate the goal of transferring high-risk trauma and medical patients without adverse impact to clinical outcomes or resource availability.

III. PROCEDURES

1. Medical responsibility during transport should be arranged at the time of initial contact between receiving and referring physicians. The transferring physician should write the transfer orders after consultation with the receiving physician. Facilities having transfer agreements for trauma patients are attached as a reference.
2. Prehospital MPD protocols shall be followed prior to and during transport.
3. While en-route, the transporting agency should communicate patient status and their estimated time of arrival (ETA) to the receiving facility per Medical Program Director protocols or standing orders for air ambulance's non-EMS personnel.

IV. DEFINITIONS

- **Scope of Practice:** Patient care within the scope of approved level of certification and/or specialized training.
- **Facilities** are DOH designated trauma care services.

V. QUALITY ASSURANCE

The East Region Prehospital & Transportation Committee will review this PCP upon receipt of suggested modifications from a local provider, the East Region QI Committee, the Department of Health, or any other entity suggesting modifications to the document, at least biennially.

Approved DOH	7/16/96
Implemented	7/31/96
Reviewed ER Prehospital & Transportation Committee	11/11/98 1/13/99
Final Review ER Prehospital & Transportation Committee	3/10/99 5/12/99
Final Revision	9/8/99
Regional Council Adopts	10/99
Final Review PH	5/17/00
Approved DOH	3/17/00
Implementation	6/00
Reviewed, revised and accepted ER	4/10/02

Prehospital & Transportation Committee	5/8/02
Adopted by Regional Council	6/12/02
Submitted to DOH for Approval	6/02
Revised by Prehospital, Adopted RC	6/03
DOH Approved	2/2005
Reviewed by PH Committee – No Change	11.05

Approved