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| TRANSFERS TO HOSPITAL | | | | NO. 272 | |
| POLICIES:   1. If a resident's condition shall become so serious as to demand nursing skill, medical equipment, medical or psychological services not available in this facility, the resident will be transferred to a hospital or similar institution. The resident's attending physician shall issue the order for the transfer and indicate the hospital or institution to which the resident is to be transferred. 2. A signed transfer agreement between the facility and local hospital has been developed which defines the responsibilities of each facility regarding the transfer of residents.   PROCEDURE:   1. There must be an order from the doctor before the resident is transferred to the hospital. 2. Call ambulance service telling them the name of the facility, give resident's name being transferred; and where resident is transferring to. Dial 911 if an emergency. 3. The nurse completes the transfer form. The nurse also makes a copy of the resident's financial information including Public Aide and Medicare cards, (if applicable), a copy of the resident's MAR, and a copy of Advance Directive information to send along with the resident. 4. The Administrator and Director of Nursing will be notified of the transfer. The charge nurse will notify family or guardian of the transfer. 5. The hospital will be notified of resident's transfer. 6. Transfer:    1. resident    2. clothing and other belongings 7. Notify these areas of transfer time:    1. business office    2. dietary department | | | | | |
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| Charting:   1. Condition leading to transfer. 2. Time of transfer and ambulance service name. 3. Personal belongings witnessed and signed. 4. Signature of nurse.   Reasons a resident may be transferred to the hospital could include but are not limited to:   1. Respiratory distress. 2. Uncontrollable bleeding. 3. Bleeding of unknown origin. 4. Cardiac instability. 5. GI distress of unknown origin. 6. Acute abdominal pain. 7. Persistent vomiting. 8. Dehydration. 9. Injuries related to fall. 10. Fever of unknown origin. 11. Any previously scheduled procedure. 12. Diabetic complications. 13. Unresponsive.   Specific services that the facility is unable to provide may include but are not limited to:   1. A resident whose medical condition warrants intensive one on one nursing time such as frequent suctioning (at least every 10 minutes). 2. Administration of IV medication more often than every 12 hours. 3. Mechanical ventilation.   Each case will be studied on an individual basis by nursing administration to determine if we can meet an individual's needs. | | | | | |
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