



- a follow-up mechanism that provides the condition of the patient during transfer and upon arrival to the receiving organization; and
- What is done when transfer to another source of care is not possible?

The hospital evaluates the quality and safety of the transfer process to ensure that patients were transferred with qualified staff and the correct medical technology for the patient's condition.

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**PC.41 The receiving organization of a transferred patient receives the necessary information for continuity of care.**

PC.41.1 A summary of the patient's condition (e.g., a discharge summary) is sent with the patient to the receiving organization. The summary includes:

PC.41.1.1 Reason for the patient's admission.

PC.41.1.2 Patient diagnosis.

PC.41.1.3 Brief summary of hospitalization and services provided (therapies, consultations, procedures to date).

PC.41.1.4 Medication list and time of last dose(s) given.

PC.41.1.5 Patient condition and physical status at the time of transfer.

PC.41.1.6 Rationale for transfer.

PC.41.1.7 Results of the patient's diagnostic investigations (e.g., laboratory and radiology).

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**Standard Intent:**

To ensure continuity of care, patient information is transferred with the patient. A copy of the discharge summary or other written clinical summary is provided to the receiving organization with the patient. The summary includes the patient's clinical condition or status, the procedures and other interventions provided, and the patient's continuing needs.

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**PC.42 The hospital ensures the continuity of care after discharge or referral.**

PC.42.1 Whenever required, follow up appointments are arranged for the patient prior to discharge.

PC.42.2 The patient receives information on how and when to re-access health and supportive services when required.

PC.42.3 The hospital provides a discharge summary for all inpatients upon discharge.

PC.42.4 A copy of the discharge summary is kept in the patient's medical record.

PC.42.5 A copy of the discharge summary is given to the patient.

PC.42.6 As appropriate, a copy of the discharge summary is provided to the healthcare provider responsible for the patient's continuing or follow-up care.

PC.42.7 The discharge summary is complete and typewritten.

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**Standard Intent:**



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When referring a patient to another organization, the referring hospital must determine if the receiving organization provides services to meet the patient's needs and has the capacity to receive the patient. This determination is usually made well in advance, and the willingness to receive patients and the transfer conditions are described in formal or informal affiliations or agreements. This advance determination ensures continuity of care and that the patient's care needs will be met. Transfers may occur to other sources of specialized treatment or services without formal or informal transfer agreements.

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**PC.43 The hospital has a process for the donation, procurement, and transplantation of organs and tissues.**

PC.43.1 The hospital complies with existing laws and regulations on organ and tissue donation, procurement, and transplantation.

PC.43.2 If the hospital performs organ transplants, it collaborates and coordinates with the Saudi Center for Organ Transplantation (SCOT).

PC.43.3 The hospital ensures appropriate retrieval, processing, preservation, and storage of organs/tissues for transplants.

PC.43.4 The hospital establishes guidelines for the donation of organs from one living person to another in accordance with laws and regulations.

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**Standard Intent:**

The shortage of available organs for transplant has encouraged Saudi center for organ transplantation (SCOT) to increase that supply.

The hospital is responsible for defining the process of obtaining and recording consent for cell, tissue, and organ donation in relation to international ethical standards and the manner in which organ procurement is organized according to law and regulation.

The hospital has a responsibility to ensure that adequate controls are in place to prevent patients from feeling pressured to donate.

The hospital supports the choice of patients and families to donate organs and other tissues for research or transplantation. Information is provided to patients and families on the donation. Hospital staff are trained on the donation process that supports patient and family choices. Staff are also trained in the contemporary concerns and issues related to organ donation and availability of transplants.

The hospital cooperates with other hospitals and Saudi center for organ transplantation (SCOT) for all or a portion of the procurement, banking, transportation, or transplantation process.

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