

PC.36 The hospital has an effective process for consultations between specialty services.

- PC.36.1 The consulting physician completes a consultation request that defines:
- PC.36.1.1 Date and time of consultation.
 - PC.36.1.2 Name and designation of consulting physician.
 - PC.36.1.3 Name and designation of consulted physician.
 - PC.36.1.4 Urgency of consultation (24 hours for routine inpatient consults and one hour or less for emergency cases).
 - PC.36.1.5 Case summary.
 - PC.36.1.6 Rationale for consultation.
- PC.36.2 The consulted physician indicates in writing:
- PC.36.2.1 Date and time of consultation visit.
 - PC.36.2.2 Name and designation.
 - PC.36.2.3 Opinion and recommendations, including the need to transfer the patient under his name.
- PC.36.3 The consulting physician approves and follows up the implementation of the plan of care as set by the consulted physician.

PC.37 Policy and procedure guides the transfer of patients between hospital units.

- PC.37.1 The most responsible physician assesses the need for transfer and matches the condition of the patient with admission criteria of the unit.
- PC.37.2 Verbal or written agreement as received from the receiving unit is documented in the patient's medical record, including the name of the receiving physician.
- PC.37.3 The most responsible physician assesses the transfer requirements, both staff and equipment.
- PC.37.4 Summary of the patient medical and nursing assessment findings including reason for transfer, diagnoses, clinical findings, and current medications is available in the patient's medical record before transfer.
- PC.37.5 The physician and the nurse at the receiving unit assess the patient at arrival to ensure safe and smooth handover.

PC.38 The hospital has an efficient discharge process.

- PC.38.1 The patient and the family are involved in the discharge process with clear follow up instructions.
- PC.38.2 Discharge is based on the patient's condition and relevant policies or criteria.
- PC.38.3 Patients' needs after discharge are assessed as early in the care process as possible.
- PC.38.4 The discharge process identifies the post-service needs and supports continuity of care after discharge.
- PC.38.5 The post-service needs are communicated to relevant staff members.
- PC.38.6 Staff members ensure coordination with various departments involved in the discharge process.
- PC.38.7 Whenever required, staff members ensure coordination with outside organizations and post-service providers as appropriate to the patient's needs.
- PC.38.8 Staff members ensure that all patients' needs are met prior to discharge.
- PC.38.9 Policies and procedures guide the transfer of patients to other organizations.