

MSH Emergency Department

MSHS Load-Level Transfer Program

Transfer Provider Manual

Steps to Transfer a Patient

Step One:

Confirm no **exclusion criteria** and obtain verbal agreement from the patient to be transferred to the quickest in-patient bed

Step Two:

Place **“ED Transfer to Another Facility”** order in EPIC

- Receiving site – Expedited Inpatient Bed
- Transfer Level - Two
- **Start EPIC chat** with “MSH Transfer Center” and “CCC Throughput”
 - “I have listed this patient for transfer. The number for sign out is “XXX”. Tele/Iso Requirements”
 - If telemetry is required this **MUST** be indicated in the order
 - Use this chat to follow up and escalate any delays
 - If issues arise add Atara Nissel and AOC into the chat to help troubleshoot

ED Admit to IP - Medicine ☆ Remove Group

☒ ED Admit to IP

Order details

☐ Telemetry Monitoring - Inpatient
STAT for 1 occurrence

☒ ED Transfer to Another Facility ✓ Accept ✗ Cancel

Process Inst: Transfer levels & Definitions:

Life Rescue - Unstable patient who is in immediate danger of losing life, limb, organ or with respect to a pregnant woman, the woman or her unborn child. Immediate attending transfer acceptance and transfer to the most proximate receiving facility with available space and qualified personnel for the treatment of the individual. STAT transport with Lights and Sirens with a maximum transfer request to departure goal of 30 minutes.

Level I - Stable patient requiring time sensitive interventions and/or specialty management for which services are not on site in the sending facility.

Disposition:

☒ Receiving Site: MSBI MSH MSM MSW NYEE MSB MSQ MSSN Expedited Inpatient Bed Other Comments

Diagnosis: Hip pain

☒ Ordering provider pager number:

☒ Transfer Level: Life Rescue Level I Level II Level III

☒ Recommended Bed Type: General Med/Surg Telemetry Stepdown ICU/Critical Care

Emergency Department for specialty evaluation

✓ Accept ✗ Cancel

Routing Dx Association Edit Multiple

Order mode: Standard Providers

✓ Close ✓ Sign Orders ↑ Previous ↓ Next

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Step Three:

Complete **Patient Consent** to Transfer Form

- To find the consent form in EPIC, go to “Dispo”, “Transfer Form”
“Letters/Forms” “MSH ED Interhospital Transfer and Consent Form”

Transfer Tasks

1348

1320

1040

Pre-Transfer Timeout

Medical Screening Exam Performed and Documented

Yes

Accepting Physician

Dr Palazzo

Accepting Facility

MSSL

MD Handoff Complete

Yes

DC Reminder

Discharge Patient Immediately After EMS Takes Them

Transfer

Order

ED Transfer to Another Facility

Transfer Form

Communications

COMMUNICATION FLOWSHEETS

Shared Consults

Peds Consults

Request Call-Back

Call-In Document...

AMAC Info

Letters/Forms

VISITOR DOCUMENTATION

Patient Visitor

New Reading

No data found.

Call-In Documentation

New Reading

No data found.

AMAC Info

Letters/Forms

Templates

Letters: COVID Work Note PCP Notification Work/School Excuse AMA (English) AMA (Spanish) Diagnostic Consent Peds Concussion Mychart Activation Transfer Outside MSHS Interhospital Transfer

Sent (2)

To

Contents

Status

Send To Printer Mail - Primary Interhospital Transfer Printed by NISSEL, ATARA on 3/26/2024 1:21 PM

Send To Printer Mail - Primary Interhospital Transfer Printed by NISSEL, ATARA on 3/26/2024 1:25 PM

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Step Four:

Complete EPIC **transfer bundle**

To find in EPIC, go to “Dispo” and complete the “Physician Tasks”

The screenshot displays the EPIC Dispo (Disposition) screen. The top navigation bar includes icons for Chart Review, SnapShot, Orders, ED Notes, Triage, and Dispo. The Dispo section is active, showing a BestPractice alert about the CHF Pathway. Below this, the Disposition section has buttons for Admit, Discharge, Premature Departure, Transfer (highlighted), Send To, and RETU / Observation. The Comments section contains patient information: Receiving Site: Expedited Inpatient Bed, Diagnosis: Acute on chronic congestive heart failure, unspecified heart failure type [1695085], Ordering provider pager number: 9173640810, Transfer Level: Level II, Recommended Bed Type: Telemetry, Services: Cardiology, and Is this a round trip transfer?: No. The Impressions section shows a suggested chief complaint: Acute on chronic congestive heart failure, unspecified heart failure type. On the right, the Progress Summary section lists tasks: Physician Tasks (Transfer Acuity Documented, Physician Medical Screening Complete, Accepting Physician and Facility Documented, MD Handoff Complete) and Nurse Tasks (RN to RN Handoff Incomplete). A red arrow points to the Physician Tasks section.

Step Five:

Track patient's status & **escalate** any issues

- If anything changes with the status and patient transfer is delayed, update the team

Escalations:

If any issues arise **reach out to Atara Nissel or the ED Administrator on Call (AOC)**

- AOC information can be found at <https://mountsinaiem.qgenda.com/> under “MSH Adult ED”