
 OSPITAL NG PARAÑAQUE 		Document Code: OSPAR-ADM-TRANS 008
		Issue Date:
ADMINISTRATIVE DIVISION APPROVAL MATRIX		Section / Department TRANSPORTATION SECTION
Policy Title: POLICY ON AMBULANCE REFERRAL		Page No.1 of 2
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Jefferson R. Pagsisihan, MD, MHM Hospital Director		

OBJECTIVES:

The aim of the policy is to established proper referral system and facilitates access to different levels of care and different health institutions to ensure comprehensive care covering the full range of health care services.

Coverage:



This policy covers all hospital personnel who uses the ambulance and utilize referral protocol to different facilities.

Responsibilities:

1. It is the responsibility of the consultant on duty/medical officer on duty to do the necessary referral procedure prior to transfer.
2. The NOD and ambulance personnel shall follow accurate and proper protocol with the sound judgment of the doctor in charge.

Procedure:

1. A Consultant, or Doctor In-Charge must first personally assess the nature of the condition and, when possible, stabilize (evaluate and initiate treatment to ensure, within reasonable medical probability, that transfer of a patient will not result in death, loss or serious impairment of body functions, parts, or organs) the patient prior to referral or transfer.
2. Patients should be transferred without delay when it is evident that transfer is medically indicated (the referring facility does not have the capacity to adequately manage a patient) and the receiving hospital has the competency and available bed space. In these cases, it is unethical to deny or delay a transfer to the more equipped hospital except where the discussion surrounds patient stabilization prior to transfer.
3. Prior to transfer, there must be communication between the healthcare provider who refers the patient and the consultant or senior resident at the receiving institution.

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4. A consultant physician or senior resident at the receiving institution must agree to accept the patient prior to the transfer.
5. The Doctors in-charge at the referring and receiving facilities should engage the Nursing Services at their respective institutions.
6. The referring physician should inform the patient or responsible party, as well as document in the patient's medical record the reasons for, risks and likely benefits of transfer.
7. Written consent for transfer should be obtained from the patient or person legally responsible.
8. In the case where the patient is unknown or unconscious and there is no next of kin, the consultant making the referral or Senior Medical Officer (SMO) should sign the consent form.
9. The doctor who refers the patient will ensure that all necessary and appropriate medical summaries with other pertinent records, including diagnostic results (laboratory, radiological studies, ECG, etc.) accompany the patient. All original documents shall stay in the possession of the referring hospital.
10. For each referral, the attending doctor will complete (legibly) the patient Referral Form. It is the responsibility of the attending doctor to ensure that all required information is filled on the form.

Implementation Date:

2022