Providence HEALTH CARE	Department: Respiratory Services	Date Originated: September 1988 Date Reviewed/Revised: June 2013
CLINICAL PRACTICE GUIDELINE	Topic: Medical/Surgical — Transfer of Patients from Critical Care to General Wards (Respiratory Therapy) Number: B-00-12-12037	Related Links:

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APPLICABLE SITES:

St. Paul's Hospital Mount Saint Joseph Hospital

GENERAL INFORMATION:

For patients being transferred out of critical care areas to the general wards with oxygen requirements greater than or equal to FiO₂ 0.50, the Respiratory Therapist will assess the patient prior to transfer and provide the appropriate equipment.

The Wards therapist will be contacted by the Critical Care therapist of any pending transport of patients requiring high-flow oxygen, nocturnal CPAP, non-invasive ventilation, and those with an artificial airway in-situ (refer to Interdisciplinary Guideline <u>B-00-13-10194</u> for tracheostomy specific transfer guidelines). Notification will also be provided for any patients deemed to require additional follow-up.

A full patient history report, as well as the Kardex and completed Respiratory Therapy History notes will be provided to the Wards therapist.

The Wards therapist will assess and monitor the patient on a daily or as needed basis, as per <u>B-00-13-12014</u>.