

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
EMT – Basic, EMT – Paramedic**

SMO: Transfer of Responsibility of Patient Care

Overview: Patients entrust the medical community to care for them to the highest level possible. To that end, this policy is to delineate proper transfer of responsibility of patient care from the prehospital providers to hospital personnel to avoid patient abandonment.

INFORMATION NEEDED

- Level of care patient is currently receiving (BLS/ ALS).
- Level of care to which patient is being transferred.

TRANSFER OF RESPONSIBILITY FOR PATIENT CARE

Emergency Department:

- When a patient is transported to an emergency department, the transporting crew shall not leave the patient unattended in the department.
- A verbal acceptance of responsibility for the patient is sufficient if documented on the MIC record. Care of a BLS patient may be turned over to Emergency Room Technician personnel.
- An ALS patient must be turned over to a registered nurse.

Other Hospital Departments or Medical Facilities (e.g., Nursing Homes):

- When a patient is transported to a location in a hospital other than the emergency department or to a nursing home or other health care facility, the ambulance crew shall remain with the patient until a registered nurse or physician accepts responsibility for the patient.
- If possible, written acceptance should be obtained by having the nurse or physician accepting the patient sign the MIC record. Otherwise, verbal acceptance of responsibility is sufficient if documented on the MIC record.
- Care of the BLS/ALS patient may not be transferred to a Patient Care Technician.

Patient care given to another prehospital care provider:

- When the care of a patient is going to be transferred to another prehospital care provider, the ambulance crew shall remain with the patient until the second care provider arrives and accepts responsibility for the care of the patient.
- Written acceptance of the patient must be obtained by having the provider receiving the patient sign the MIC record of the first provider and indicate in writing that the first provider has given the second provider a report on the condition of and treatment given to the patient.
- The second provider shall not accept responsibility for the patient until the report is given. When care of patient is transferred to another prehospital provider, that provider must be of at least an equal, if not higher, degree of training (e.g., BLS crew must transfer to at least another BLS ambulance; care of the ALS patient may not be transferred to a BLS crew).

TRANSFER OF RESPONSIBILITY FOR PATIENT CARE (cont)

INTER-HOSPITAL TRANSFERS:

If a patient is receiving medications or is connected to medical equipment, and these medications and/or equipment are not taught to this System's Emergency Medical Services personnel, a nurse or physician must be present on the transfer. A provider is prohibited from transferring such a patient without a nurse or physician present during transfer.

Documentation of adherence to protocol:

Fully document to whom patient is being transferred to include level of licensure.

Medical Control Contact Criteria

- Contact Medical Control if any questions arise regarding appropriateness of transfer of patient care.
- Contact Medical Control if any questions arise regarding the best treatment options for the patient.

PRECAUTIONS AND COMMENTS

- Abandonment is defined as terminating medical care without legal excuse or turning care over to personnel who do not have training and expertise appropriate for the medical needs of the patient.
- If any questions exist regarding the appropriateness of the transfer of patient care, contact Medical Control for guidance.