



WARRIOR MEDIC NOTAM – 59MDW-18-20
PATIENT TRANSFERS
CAO 20 September 2018



PURPOSE: To implement 59th Medical Wing (MDW) Patient Transfer policy.

COMMANDER'S INTENT: The 59 MDW Commander's intent is to inform Warrior Medics at Wilford Hall Ambulatory Surgical Center (WHASC), 559th Medical Group (Reid Clinic), and 59th Dental Group (Dental Clinics) regarding the processes for transferring stable and unstable patients to the new Family Emergency Center (FEC) scheduled to open 01 October 2018.

BACKGROUND: Per Air Force Policy Directive 41-1, *Health Care Programs and Resources*, transfer of patients from WHASC clinics is based on the patient's need for services and our ability to provide those services. This NOTAM summarizes the rewrite of 59 MDWI 41-122 and includes instructions for requesting an ambulance for stable and non-stable patients, instructions for transfer of patients to San Antonio Military Medical Center (SAMMC) for direct admission to inpatient services, and instructions for clinic transfers to the FEC (see Attachment 1).

IMPLEMENTATION:

1. Effective 01 October 2018, when caring for unstable patients, all clinics will:
 - a. Determine when a patient is unstable and requires transfer to an ED in order to obtain appropriate medical care. The decision to transfer a patient is made by the attending medical provider and based on the patient's healthcare needs exceeding the clinic's Scope of Care.
 - b. Indicate the level of life support required for transfer.
 - c. Call 911 from a JBSA - Lackland telephone. The Medical Response Center (MRC) will dispatch an ambulance to transport the patient to the FEC, SAMMC Emergency Department (ED), or the nearest off-base ED, depending on the patient's clinical condition and the discretion of the paramedic.
 - d. Make every attempt to stabilize the patient prior to arrival of Emergency Medical Services (EMS).
 - e. Complete the 59 MDW Form 27, *Patient Transfer Record* (see Attachment 2) prior to EMS arrival. Have a copy ready for the EMS crew and maintain a copy to upload into the patient's medical record. Document the clinical condition and clearly state the reason for transfer. Include a summary of specific risks and benefits associated with transfer.
 - f. Provide documentation of treatment already provided and copies of all available records and diagnostic studies (lab work, electrocardiograms, x-rays, etc.) related to the patient's condition.
 - g. Ensure the patient and appropriate family members/legal guardians are involved in all decisions regarding transfers, and record their consent to be transferred. Document refusal by an unstable but competent patient as "Against Medical Advice" in the patient's medical record prior to the patient being released from treatment.
2. Effective 01 October 2018, when caring for stable patients with needs that exceed their Scope of Care, clinics will:
 - a. Determine when a patient is stable, but has a condition that requires immediate attention. The decision to transfer a patient is made by the attending medical provider and based on the patient's healthcare needs exceeding the clinic's Scope of Care or capabilities.

- b. Ensure the patient and appropriate family members/legal guardians are involved in all decisions regarding transfers, and record their consent to be transferred.
- c. Transfer to the Family Emergency Center. Call the FEC at (210) 292-7331 or (210) 292-8432 and request to speak to the Emergency Physician for case discussion and acceptance of patient. If both providers agree to the patient's transfer, the clinic nurse will provide a hand-off with the FEC charge nurse for continuity of care. Discussion between providers may lead to the conclusion the patient is better suited for direct admission or out-patient follow-up. Transport the patient to the FEC by ambulation or wheelchair. The patient will check-in at the front desk. The clinic personnel will notify the front desk of the patient's transfer to the FEC. The FEC front desk personnel will call the FEC charge nurse so they are aware the patient is present.
- d. Transfer to SAMMC for direct admission to inpatient services. The provider will page the on-call service at SAMMC (MOD – 210-513-9952, Pediatrics – 210-513-3842) to receive an accepting consultant; SAMMC's consultant will contact the SAMMC Bed Coordinator, then call the clinic back with the floor assignment. Call MRC at (210) 292-1800 or (210) 292-7654 to request a stable patient transfer for admission; MRC will dispatch an ambulance to the clinic location, and EMS will transport the patient to the pre-arranged floor at SAMMC. Complete the 59 MDW Form 27, *Patient Transfer Record* (see Attachment 2) prior to EMS arrival. Have a copy ready for the EMS crew and maintain a copy to upload into the patient's medical record. Document the clinical condition and clearly state the reason for transfer. Include a summary of specific risks and benefits associated with transfer.

3. Effective 01 October 2018, when transferring patients, WHASC Mental Health Clinic (MHC) will:

- a. Identify patients requiring in-patient level care. The attending medical provider will page SAMMC Mental Health (MH) consultation team pager: (210) 513- 2243 to request in-patient level care (pending medical clearance in the FEC). SAMMC's consultant will contact the SAMMC Bed Coordinator to arrange bed assignment on 6T. If SAMMC beds are full, the requesting provider will coordinate care at a network facility.
- b. Provide SAMMC MH consultation team with MHC provider's pager or contact information and request SAMMC consultation team re-engage referring provider to apprise of admission.
- c. Call the FEC at (210) 292-7331 or (210) 292-8432 and request to speak to the Emergency Physician for case discussion and acceptance of patient. The clinic nurse will provide a hand-off with the FEC charge nurse for continuity of care. The charge nurse will ensure a room/bed is available prior to transferring the patient to the FEC.
- d. Notify the Mental Health Consultant at SAMMC of medical clearance and coordinate transfer to SAMMC or network facility through MRC.
- e. Ensure the safety of patient while awaiting transport. A WHASC MHC technician will be assigned to ensure positive control of patient. MHC will engage the patient's command structure for further positive control support while in WHASC MHC and ensure command's awareness of their member.
- f. Transport the patient to the FEC by ambulation or wheelchair. The patient will check-in at the front desk. The clinic personnel will notify the front desk of the patient's transfer to the FEC. The FEC front desk personnel will call the FEC charge nurse so they are aware the patient is present.

- g. Determine if the patient is a flight risk, then contact MRC at (210) 292-1800 or (210) 292-7654 to request a stable patient transfer by EMS from the MHC to the FEC.
- h. Medically clear Active Duty members requiring involuntary Emergency Detention in the FEC, then transfer for direct admission at SAMMC or network facility.
- i. Medically clear Non-Active Duty members requiring involuntary Emergency Detention in the FEC, then contact SAPD or Bexar County Sheriff.

4. All patients found to have behavioral health issues requiring evaluation and/or admission that are originating outside the WHASC Mental Health Clinic will be sent to SAMMC ED for mental health consultation and medical clearance prior to admission.

5. Effective 01 October 2018, when transferring patients from the FEC to a higher level of care, FEC staff will:

- a. Call 911 for patients who meet Emergency Criteria per the FEC's Scope of Care.
- b. Coordinate direct admissions at SAMMC, as described in para 2d of this NOTAM.

NOTE: The revised MDWI 41-122, *Patient Transfers*, will supersede this NOTAM upon its publication.

POC: Contact the Acute Care Flight Commander at DSN 554-7753 with specific questions about this NOTAM.


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Attachments:

- 1. FEC Patient Transfer Algorithm
- 2. 59MDW Form 27, *Patient Transfer Record*