Family Medicine/Internal Medicine Service Transfer Agreement

Purpose:

This document describes expectations regarding the management of patients erroneously admitted or accepted for admission to internal Medicine or Family Medicine through the Emergency Department (ED) or via PALS direct admission.

PALS Direct Admissions:

Once the patient is accepted to either Internal Medicine or Family Medicine via PALS, the original accepting team will complete the admission upon patient arrival with the understanding that a transfer will subsequently occur as outlined below. This includes documentation (history and physical) as well as initial admission orders.

Who to Transfer:

If a patient is erroneously admitted to Internal Medicine or Family Medicine through the Emergency Department or via PALS direct admission based on current admitting guidelines, then the original admitting team should transfer the patient to the appropriate service. However, if it is reasonably expected that a patient will be discharged within 24 hours, then the patient should stay on the original admitting service to minimize handoffs and transfers of care.

When to Transfer:

Requests for transfer should be placed between 8am to 3pm daily. If the request for transfer is out of this time frame, the transfer request must wait until the following day.

How to Transfer:

Transfer discussions will be an attending-to-attending conversation. After identification of a potential transfer, the attending on the original admitting service should contact the respective transferring attending for evaluation.

How to Find the Appropriate Attending on Amion:

- -Internal Medicine attending:
 - -Click heading "Internal Medicine-Residents/PALS" to open sub-menu
 - -Scroll down to "Internal Medicine Transfer Requests"
 - -Attending listed under "Cards-HemeOnc-Family Medicine" (alternatively, this is also the "MOT attending")

-Family Medicine attending:

- -Scroll down to "FM Inpatient Service Attending"
- -Attending listed under "Weekday PALS"

Rounding/Documentation Expectations:

Patients admitted to the incorrect service will be staffed and billed by the original admitting team attending. A request for transfer can be made after staffing has occurred and the patient has been evaluated.

Both teams will see and document care on day of transfer. The original admitting team will see and document with a progress note if it is not the day of admission. If the patient has been hospitalized for more than 48 hours, then an interim summary should be created. The accepting team will see and document with transfer accept note.

The original admitting team will take floor calls and complete any patient care needs until the transfer has occurred. The transfer will be considered complete after transfer orders have been placed, and patient care will be the responsibility of the accepting team at that time.

Signatures:

Kendali Rogers, MD

Chief, Division of Hospital Medicine

Department of Internal Medicine

Alex Rankin, MD

Medical Director, Inpatient Service

Department of Family and Community

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