Mallow General Hospital Policy / Procedure

Title:

Operational Policy for the Medical Assessment Unit MGH

Appendix II Protocol 37



| Emergency Inter-Hospital Transfer (Protocol 37) request pro forma | | | |
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| | Task | Details (please prepare answers prior to ringing 112) | |
| 1 | Ring 112 (999) | | |
| 2 | Ask for HSE National Ambulance Service | | |
| The Emergency Call-Taker will now take you through a series of specific questions | | | |
| 3 | What is your phone No | Provide a contact number for call back | |
| 4 | What is your Location? | State the transferring hospital name and ward/unit | |
| 5 | What is the reason for the transfer? | State: "I require an emergency inter-hospital transfer, protocol 37 please" | |
| 6 | Patient's age? | State age of the patient | |
| 7 | Patient's gender? | State gender of the patient | |
| 8 | Is the patient awake? | Verify; Yes / No | |
| 9 | Will any special equipment be necessary? | Please specify any special equipment required during the transfer. | |
| 10 | When will the patient be ready to leave your hospital? | Give an estimated timeframe when all clinical procedures to stabilise the patient will be complete and the patient will be ready for transfer to the ambulance. The options are- Immediate (Delta), In 30 mins (Charlie), Between 30 mins and 1 hr (Bravo). | |
| 11 | What is the patient's name? | State name of the patient | |
| 12 | Who is the referring Doctor? | State name of the referring Consultant | |
| 13 | Who is the referring Nurse? | State name of the Nurse responsible for the patient | |
| 14 | Where is the receiving hospital? | State the name of the receiving hospital | |
| 15 | What is the receiving ward/unit | State the receiving ward/unit. | |
| 16 | Who is the accepting Consultant | State the name of accepting Consultant | |





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| 24 hours from 13:21:22, 04/02/2025 | | |