

Protocol for the transfer of a surgically expected Inpatient from another Hospital

- The need for the child to be seen at the RACH must be discussed and agreed by the Surgical registrar on call. The Child must be seen by a Paediatric Consultant or paediatric Registrar at the referring hospital prior to a referral being made.
- All surgically expected transfers must be discussed with the Paediatric Bleep holder and an appropriate bed allocated. Any patient who is not being accepted should be discussed with surgical consultant on call.
- The transferring hospital must inform the ward expecting the child when the Patient leaves their hospital. Then CED is informed of ETA and patient details.
- The CED consultant/ Registrar and Nurse in Charge must be informed of the expected patient by a senior member of the RACH surgical team.
- On patient's arrival to CED they are booked onto symphony and allocated a treatment room/trolley in CED. They are then triaged by a CED nurse. Clearly any patient who is critically unwell goes into resuscitation room.
- The expectation is that the patient will be seen by the surgical team within 60 minutes to assess/make a plan for the patient at which point the child goes straight to the allocated ward bed.
(If the surgical team is in theatres and no surgical doctor is available this must be clearly documented)
- Non-emergency procedures, scans and x-rays must not be undertaken in CED but arranged on the ward. (This does not include investigations that are required to make decisions on immediate management)
- If a patient does not require surgical input then they are to be transferred back to the referring hospital as soon as safe. If the patient is deemed unsafe or requires medical care, they will be referred to the senior ward medical team (Consultant or Registrar) and transferred to their allocated ward bed.
- They must not remain in CED beyond their allowed 4 hours. They must not be admitted to short stay. If well enough they must be transferred to their allocated ward bed. Correct handover of the patient is the responsibility of the senior surgical doctor.