Checklist for Critical Care transfers

In transferring hospital:

1. Preparation

Patient fit for transfer
Transfer trained medical and qualified nursing or ODP staff available
Bed confirmed at destination
Named accepting specialty consultant and critical care consultant identified
Case notes and investigations photocopied or printed
Patient and/or relatives informed
Patient valuables secured
Ambulance service contacted, appropriate personnel and vehicle for transfer trolley en-route
Destination hospital and department location confirmed

2. Patient Checks

<table>
<thead>
<tr>
<th>Airway</th>
<th>Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and secure</td>
<td>Seizures controlled</td>
</tr>
<tr>
<td>ETT / Tracheostomy position confirmed</td>
<td>ICP managed</td>
</tr>
<tr>
<td>NGT in position</td>
<td>Sedation +/- Paralysis</td>
</tr>
<tr>
<td>Breathing</td>
<td></td>
</tr>
<tr>
<td>Ventilation established</td>
<td>Temperature maintained</td>
</tr>
<tr>
<td>Arterial blood gas checked</td>
<td>Urinary catheter checked</td>
</tr>
<tr>
<td>Capnography in use</td>
<td>Glucose &gt; 4 mmol/l</td>
</tr>
<tr>
<td>Bilateral breath sounds</td>
<td>Potassium &lt; 6, Ionised calcium &gt; 1mmol/l</td>
</tr>
<tr>
<td>Chest drains secure</td>
<td></td>
</tr>
<tr>
<td>HMEF</td>
<td></td>
</tr>
<tr>
<td>Monitoring</td>
<td></td>
</tr>
<tr>
<td>ECG, BP, SaO2, ETCO2</td>
<td></td>
</tr>
<tr>
<td>Circulation</td>
<td></td>
</tr>
<tr>
<td>CVS stable</td>
<td></td>
</tr>
<tr>
<td>Hb adequate</td>
<td>C-Spine stable/ protected</td>
</tr>
<tr>
<td>Minimum two routes of IV access</td>
<td>Pneumothoraces drained</td>
</tr>
<tr>
<td>A-Line + CVC working and zeroed</td>
<td>Thoracic / Abdominal bleeding controlled</td>
</tr>
<tr>
<td>Blood for transfer checked</td>
<td>Long bone/pelvic fractures stabilised</td>
</tr>
</tbody>
</table>

3. Immediate Pre-Departure Time Out

Read aloud with all transfer team members present, including paramedics

Introductions of staff completed
Patient stable on transfer trolley and monitoring in place
Emergency airway equipment available
Oxygen & batteries adequate (use ambulance oxygen and electrics)
Intra-venous access established and checked
Infusions running and secure
Spare sedatives / vasopressors / inotropes / fluids available as required
Blankets / heat-loss measures in place
Pressure points protected
Mobile telephone available
Transferring & receiving unit phone numbers available
Receiving unit informed of departure
Directions to destination department at receiving hospital known
## Transfer Checklist

**At Receiving Hospital: Transfer of Care/ Handover for patient coming from another hospital**

### Before moving patient and introductions:

**All staff to introduce themselves (accepting and transfer teams, Name and role)**

- Introductions complete?
- Who will control airway and supervise transfer?
- Any immediate concerns? What infusions are running? What are ventilator settings?
- Will Ventilator tubing and lines reach?

### Move the patient under direction of the airway supervisor. Then:

#### 2. Procedures

**Handover procedures**

- Patient established on ventilator with capnography in place?
- Infusions transferred to receiving unit’s pumps?
- Monitoring transferred?

#### 3. Handovers (All staff to listen to both handovers)

**Medical handover**

- History current problem and mechanism of injury
- Airway or ventilation problems
- Interventions during resuscitation and transfer and any problems
- Current medications
- Tubes and lines
- Wounds and drains
- Past medical history as known
- Allergies and previous medications as known
- Other problems/ issues for handover

**Nursing handover**

- Pressure areas/ tissue viability
- Property
- Religious/ spiritual needs
- Relative information handed over
- Documentation & case notes handed over

**Check After Handover Procedures Complete**

- Patient belongings off-loaded
- Transfer equipment re-loaded
- Is bed head airway sign completed and allergies recorded?

### Information about transfer: Transferring and receiving doctors:

Has an Email been is sent to: [CCN.transfer@cmft.nhs.uk](mailto:CCN.transfer@cmft.nhs.uk) to inform of date, transferring unit and receiving unit BEFORE transfer team leave unit.

Both check the transfer form for completeness- dates and times and other boxes before signing- send middle copy to network if text not copied to bottom form

Comments to [l.cooley@doctors.org.uk](mailto:l.cooley@doctors.org.uk) . June 2016 version 3.1 TT