

Administrative Policy Manual
Code: AH Patient/Client Relations/Care

AH1030 – EMERGENCY DEPARTMENT PHYSICIAN TO PHYSICIAN TRANSFER OF PATIENT CARE

1.0 PURPOSE

To improve the quality and safety of patient care by ensuring a standard of practice for how Emergency Room Physicians (ERP) hand off patients at shift change in the emergency departments (ED).

2.0 DEFINITIONS

Disposition	Includes discharge, admission to an inpatient bed, or transfer to another facility from the ED and signing off the patient chart.
ERP	The emergency room physician on duty in the ED.
MRP	The physician who is the most responsible physician for the care of a patient in the ED or inpatient unit of the facility.
Physician Hand Off	The formal transfer of care of a patient to another physician. This occurs when the ERP or MRP is leaving the department and will no longer be the directly responsible physician.

3.0 POLICY

- 3.1 The ERP or MRP at shift change, when transferring care to another ERP or MRP, must clearly document on the physician order sheet/physician chart or physician's progress notes, the following information:
 - the physician to whom care is transferred; and
 - confirmation with documentation of the acceptance of the transfer of care.
- 3.2 The ERP or MRP accepting care is responsible for the patient until Disposition once Physician Hand Off has occurred.
- 3.3 Patients may be left at shift change with specific discharge criteria but must have an ERP or MRP that will be responsible to see the patient if discharge criteria are not met or if the patient deteriorates.
- 3.4 This ERP or MRP must accept the transfer of care.

4.0 PROCEDURES

As outlined in policy statement.

5.0 REFERENCES

1. Provincial Cochrane Report Task Group. (2005). Selected Provincial Level Recommendations: Final Report Implementation Plan. Provincial Emergency Services Project.

Policy Sponsor: VP Medicine & Quality			
Policy Steward: Network Director, Emergency & Trauma Services			
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