

[Official Institution Logo]



Policy for Emergency Procedures, Protocols, and Staff Education in Place to Treat Critically Ill ACHD patients and/or Transfer to Adult Facility when Appropriate.

Date Effective: MM/DD/YYYY

Type of Policy: Please indicate if this document is hospital policy or ACHD program policy/clinical guideline.

Purpose

Indicate why this policy is in place and the population it benefits.

Policy Statement

State the actual policy specifically for the pediatric hospital for transfer of ACHD patients to an adult facility as well as the emergency procedures, protocols and staff education in place to treat critically ill ACHD patients and/or transfer to adult facility when appropriate. This statement can be a brief overview of the policy. Please reference:

- The facility to which the patient is transferred and where they are typically transferred from (i.e., pediatric facility)
- Emergency procedures
- Staff education
- ACHD team involvement

Procedures

Describe the specific procedures for every phase of the transfer process for ACHD patients. Please include:

- A detailed timeline of the transfer process
- Situations or types of conditions that require an ACHD patient to be transferred
- Names of the facilities to which the patient is being transferred
- Relationship between pediatric and adult hospitals (if applicable)
- Age requirement for patient to be sent to an adult facility
- Personnel and hospital teams involved in the transfer
- Description of ACHD team involvement

References

If applicable, please list any articles or other resources utilized to develop your institution's policy for transfer of ACHD patients to an adult facility.

[Official Institution Logo]

Required Signatures

N/A

Helpful Tips

Please upload any documentation or examples of the above policy to the “additional files” section of your application.

Section I: Inpatient Services. These documents should be labeled with “**I5**” only in the title so that each policy/plan can be easily identified.