Labor and Delivery and 4 East

Policy Title/Number: **Outpatient to Inpatient Transfers**


Categories:

Contributors:
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- Robin Mutz, Administrator, RNC, MPPM. Women’s Health
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Review Responsibility: Clinical Unit Policy Committee

Effective Date: March 2007

Last Revised Date: March 2007

Team Members Performing:
- RN
- LPN
- Care Partner/Patient Care Technician
- Other licensed staff (specify): MD and CNM
- Other non-licensed staff (specify):

Guidelines Applicable to:
- VUH
- VMG*
- VCH
- PHV
- Other (specify): All obstetric outpatient clinics

Exceptions (specify):

*includes satellite sites unless otherwise specified.

Guidelines Applicable to:
- All patient care areas
- All inpatient areas
- Adult areas only
- Pediatric areas only
- Critical Care/Stepdown areas only
- Selected areas (specify):
- Exceptions (Specify): 
Outpatient to Inpatient Transfer of Care

I. **Outcome Goal:** To ensure that appropriate communication takes place prior to the transfer of care of obstetric patients from the outpatient to inpatient areas.

II. **Policy:** Prior to transfer providers in the outpatient area will notify providers in the inpatient area of the need for transfer and the plan of care when known.

III. **Equipment/Supplies:** as needed

IV. **Protocol:**

1. Transfer of care from the OB Clinic, the Medical Arts Group, the CNM clinic, or any other Outpatient clinic (MFM clinic, OCCC, Diabetes clinic etc.) to Labor and Delivery and/or 4 East:
   a. The Attending, Midwife, or Resident providing care (outpatient provider) will notify the Labor and Delivery or 4 East Charge Nurse of the need to transfer a patient to Labor and Delivery or 4 East.
   b. If the outpatient provider is a resident, he/she will obtain approval from the attending to transfer care to Labor and Delivery or 4 East.
   c. The outpatient provider will notify the PGY3 and/or the Labor and Delivery attending of the need for transfer, patient status and plan of care when known.
   d. If the Labor and Delivery attending is not available when the clinic calls it will be the responsibility of the PGY3 to notify them as soon as they are available.
   e. **When there are concerns related to bed availability, patient acuity or staffing,** the clinic attending, the labor and delivery attending and the charge nurse will discuss the situation and collaboratively decide upon a plan of care with the Administrative Coordinator and Bed Management.
V. **Patient/Family Education:** The provider will discuss the plan of care with the patient and family prior to transfer

VII. **Documentation:** A transfer of care note will be done prior to transfer. To be included in this note will be a brief summary of the patient’s clinical status, reason for transfer, who has been notified and the anticipated plan of care.

VIII **Contributors:**

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XII. **Endorsement:**

Executive OB Committee – (March 2007)

OB PCC Committee – (March 2007)

XIII. **Approval:**

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