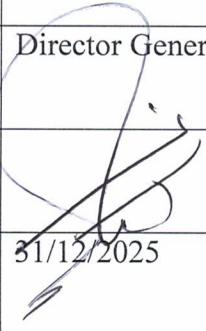


Directorate of Anesthesia and ICU

Document Title	Policy and Procedure for Transfer-out Intensive Care Unit patients	
Document Type	Policy And Procedure	
Directorate/Institution	Directorate General Khoula Hospital	
Targeted Group	All healthcare professional who are dealing with patients in Intensive Care Unit.	
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- Acronyms:

• DGKH	• Directorate General Khoula Hospital
• ICU	• Intensive Care Unit

Chapter one:**1. Introduction :**

Transfer out of a patient from ICU is a key decision made by intensivist to clearing the patient from ICU level of care and transfer to ordinary ward. A smooth transfer of the patient prevent any gaps in communication and continuity of patient care.

2. Purpose :

The purpose of this policy and procedure to:

- Provide efficient utilization of ICU resources for critically ill patients.
- Provide clear guidelines for healthcare professional about the criteria of transferring the patients out from ICU to wards.
- Ensure well-organized, safe and timely transfers of patients from ICU

3 Scope:

This policy and procedure applies to all healthcare professional who are dealing with patients in ICU at DGKH.

4 Definitions:

- **Intensive Care Unit (ICU):** ICU is an organized system for the provision of care to critically ill patients that provides intensive and specialized medical and nursing care, an enhanced capacity for monitoring, and multiple modalities of physiologic organ support to sustain life during a period of life-threatening organ system insufficiency
- **Critically ill:** life threatening condition that requires pharmacological and/or mechanical support of vitals organ functions without which death would be imminent
- **Transfer Patient:** defined as preparing patient, completing necessary records and shifting patient to another department within the hospital or to another hospital.

5 Structure :

(Policy)

5.1. All Patients who transferred out from the ICU should meet the transfer-out criteria as follows:



- Stable vital signs and other hemodynamic parameters with or without inotropic /vasopressor support.
- Stable respiratory status with acceptable ABG and normal work of breathing
- Stable tracheostomy patient on T-piece or stable ventilator parameters
- Patient obeys commands or back to pre-admission status
- Irreversible brain injury, no active intervention planned, or intervention not beneficial
- The admitting team should document orders into the Al Shifa System before transferring the patient.
- Patient should be transferred out of the ICU by a nurse and medical order or by two nurses.
- The Intensivist and the nurse in charge should review the status of patients who no longer need ICU care daily.
- The intensivist should decide to transfer out a patient
- In case a conflict arises regarding the transfer out of a patient from the ICU, the final decision of the intensivist should be accepted by the entire team.
- During the time of high ICU census, beds may not be available for all admissions. In such issue, the patient who requires the least ICU care can be shifted from the ICU to other wards after review and assess him/her by the intensivist.
- The transfer out process should be collaborative between the Intensivists, ICU in-charge staff nurse, bed manager and infection control team in case an isolation room is required **as per isolation policy and procedure.**

- Complete handover of care should be done while transferring the patient out from ICU to wards, including diagnosis and treatment, monitoring and investigation done, plan for ongoing treatment including drugs and therapies(e.g. hemodialysis) , nutrition plan, infection status, physical and rehabilitation needs.
- Expatriate patients who have been followed by the Discharge Planner in the ICU should be clearly handed over to the receiving ward regarding the patient's progress.
- The **Transfer out Checklist Form** should to be filled by the ICU staff nurse (see Appendix1)

6 Details: procedure:

When the patient meets the criteria for transferring out from the ICU, the following points should be carried out:

- Ensure that the Intensivist enters a complete set of transfer out orders into the Al Shifa System.
- Ensure that the ICU staff nurse informs the bed manager to arrange a bed and informs infection control staff in case of an infected patient to be transferred out.
- The ICU staff nurse should inform the patient's relatives about transferring her/him out of the ICU.
- The ICU staff nurse informs the patient's relatives to arrange attendant to stay with the patient if required.
- The ICU staff nurse notifies the receiving ward about the transfer out and gives a progress report to the receiving nurse. This report includes diagnosis, condition, treatment and any equipment required.
- The ICU staff nurse fills the Transfer out Form.
- The ICU staff nurse ensures that the receiving ward has been notified immediately prior to physical transfer.

- ICU nurse accompanies the patient during transfer and communicates clearly regarding patient care issues, patient's condition, and progress order since the initial report.
- If the patient is to be monitored on the receiving ward, a transport monitor will be used during the transfer.
- The Receiving nurse should assess the patient physically while shifting him/her in the presence of the accompanying ICU nurse. The assessment includes any surgical drains, catheters, tubes, or central lines, assess GCS level for neuro patient, assess skin integrity, pressure area, and patient medication to be handed over.
- The receiving nurse and the ICU nurse should document the transfer notes in the Kardex in the Al Shifa System.

Chapter Three

7 Responsibilities:

7.1 All Directors/HoDs shall:

- Ensure that all healthcare professionals adhere to this Policy and Procedure.

7.2 The Director of Nursing Affairs shall:

- Emphasize to all Head of Departments and Unit supervisors the importance of following this Policy and Procedure

7.3 Head of Departments/ Unit Supervisors/shift supervisors shall:

- Ensure to all the staff adhere to this Policy and Procedure
- Investigate all incidents related to this Policy and Procedure

7.4 The admitting team shall:

- Ensure that all patients admitted under their care are assessed daily for readiness of transfer out from ICU to ward or high dependency.

- Ensure that the immediate transfer out documentation is completed

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DOCUMENT

7.5 The ICU doctor shall:

- Ensure that all patients in the ICU are assessed daily for readiness of transfer out from ICU to ward or high dependency.
- Ensure that all orders of the transfer out have been documented and informed to ICU staff nurse, bed manager and infection control team in case an isolation room is required

7.6 Ward In charges/ ICU In-charge & Shift In charges shall:

- Ensure that all nurses are adhere to this Policy and Procedure

7.7 Staff Nurses Shall:

- Adhere to this Policy and Procedure
- Report any significant problems related to this Policy and Procedure

Chapter four

8 Document history and version control :

Version	Description	Author	Review Date
01	Initial release	DR. Adil al Kharousi Ms.athar Al-Jabri	2015
02	Version Two	DR. Adil al Kharousi Dr. Naresh Vandavasi	2022
03	Version Three	DR. Adil al Kharousi Dr. Naresh Vandavasi	2028

9 Related Documents:

1. Intensive Care Unit Admission guideline.
2. Isolation Policy and Procedure