

Name of Policy: <u>Patient Transportation to other Health Resources</u> Policy Number: 3364-100-01-03 Department: Hospital Administration Approving Officer: Associate Vice Present Patient Care Services Chief Nursing Officer Responsible Agent: Chief Nursing Officer Scope: The University of Toledo Medical Center	 Effective Date: 6/29/2020 Effective Date: November 23, 1977
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

When necessary to provide an inpatient of The University of Toledo Medical Center (“UTMC”) with a diagnostic procedure or treatment at another health facility, transportation will be arranged.

(B) Purpose of Policy

To arrange the most reasonable mode of transportation for an inpatient requiring a diagnostic procedure or treatment at another health facility.

(C) Procedure

When an inpatient of UTMC requires transportation to another health care facility for a diagnostic procedure or treatment, the following modes of travel shall be considered:

1. A patient may be transported by ambulance or Mobile Life if warranted by the patient's condition. The patient will be requested to sign a release from liability form by an RN.
2. A patient may be transported by auto or taxicab accompanied by a family member or authorized designee. In this event, the patient will be requested to sign a release from liability form. The patient will never be transported unescorted or approved to drive alone.
3. A patient transportation service may be used to transport the patient dependent upon the patient's condition and the procedure or test being done. The patient will be accompanied by a family member or authorized designee.
4. A physician must approve transporting the patient for diagnostic purposes, and the mode of transportation.

The following procedure will be followed:

1. UTMC is responsible for the cost of transportation. The unit where the patient is residing will be billed. Outcome Management may arrange for transportation and instruct the transportation company where to send the invoice.
2. Purchase requisitions for these transportation charges should be charged to UTMC Outside Services account #51760 which is maintained by the Hospital Business Office.
3. Nursing Services and/or Outcome Management will make transportation arrangements and Nursing Services will be responsible for obtaining a release from liability when applicable.
4. Medical Staff and/or Nursing Services shall determine when the patient's condition requires health care providers to accompany the patient. Nursing Services will assure that the patient has an appropriate escort.
5. A copy of the patient's medical record will be sent with the patient in a sealed envelope.

<p>Approved by:</p> <p><u>/s/</u> <u>06/29/2020</u> Monecca Smith, MSN, RN Associate Vice President Patient Care Services Chief Nursing Officer</p> <p><i>Review/Revision Completed By:</i> HAS Outcome Management Legal Affairs – HSC</p>	Review/Revision Date:		
	<p>5/30/81 10/1/81 4/8/84 8/1/84 4/15/86 6/26/87 6/15/88 2/17/89</p>	<p>3/30/90 3/11/92 3/24/93 7/31/96 3/31/98 6/18/01 6/30/04 12/13/06</p>	<p>2/15/11 2/1/2014 2/1/2017 2/1/2020 6/29/2020</p>
Next Review Date: 6/29/2020			
Policies Superseded by This Policy: 7-01-03 - Patient Transportation to other Health Resources			



THE UNIVERSITY OF TOLEDO
MEDICAL CENTER

Release of Liability

ADDRESSOGRAPH

I hereby release the State of Ohio, The University of Toledo, The University of Toledo Medical Center and its agents, employees, directors, officers, residents, students and attending physicians, from any and all liability during my absence from the Hospital, while being

transported to: _____
Name of Health Care Facility

and returned to The University of Toledo Medical Center.

Witness _____

Signed _____
Patient Signature

Signed _____
Parent of Minor/Legal Guardian

Date _____