### PATIENT HAND-OFF

No Patient hand off: Requires RN or RT to stay during procedure? Yes

### S Situation

Destination Department:
If RN to RN report required call to __________________________ number

Mode of Transportation:  
- Cart
- Bed
- Wheelchair
- Other: _______________

Procedure/Exam: _______________

### B Background (circle Yes or No)

<table>
<thead>
<tr>
<th>Allergy Band On</th>
<th>Yes / No</th>
<th>Diabetic</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNR</td>
<td>Yes / No</td>
<td>Isolation</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Fall Risk</td>
<td>Yes / No</td>
<td>Communication Barrier</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Clipboard Contents</td>
<td>Telemetry</td>
<td>Yes / No</td>
<td></td>
</tr>
<tr>
<td>on Chart</td>
<td>Yes / No</td>
<td>CMU notified</td>
<td>Yes / NA</td>
</tr>
</tbody>
</table>

### A Assessment (circle Yes or No)

<table>
<thead>
<tr>
<th>Oriented</th>
<th>Yes / No</th>
<th>NPO</th>
<th>Yes / No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needs Assist for Transfer</td>
<td>Yes / No</td>
<td>Restraints</td>
<td>Yes / No</td>
</tr>
<tr>
<td>VS Stable</td>
<td>Yes / No</td>
<td>IV Present</td>
<td>Yes / No</td>
</tr>
</tbody>
</table>

02 Yes / No If Yes, liters/% ______________  Tank PSI________

### R Recommendation

Comments:

Sending Unit: __________________________ / Phone #
Print Contact Name: __________________________ name

Signature Date Time

Transported By: __________________________
Print Name: __________________________

Signature Date Time

Note: Place in Patient Care Notes Section of Medical Record
A. **MINIMAL CARE**
- Indicates that the patient requires minimal attention to their needs while in transport. Patient may be on home oxygen.
- Can be transported by a RN, LPN, Respiratory Therapist, transporter, technician/technologist or volunteer.
- Patients are at low risk for injury or deterioration of condition.
- No acute change in mental status in last 24 hours.
- No increase in oxygen needs in past 8 hours.
- There may be tubes, intravenous infusions, etc., in place that require no intervention while off the unit.
- Patient is not an identified suicide or elopement risk.
- If patient is on telemetry monitoring, CMU must be alerted that the patient is off the unit and the patient’s destination.

B. **MODERATE CARE**: (Progressive or General Care)
- Indicates the patient requires moderate care from the person transporting the patient while patient is off the unit. If patient requires moderate care transporting by RN or LPN, nurse to nurse report is required prior to leaving patient.
- Transporter must be an RN, LPN, or Respiratory Therapist.
- Patient has a moderate risk for injury or deterioration of condition during transport.
- There may be tubes, intravenous infusions, etc., in place that require close observation or possible interventions while off the unit. Patient may be on cardio/vaso-active drips not requiring increasing titration.
- If patient is on telemetry monitoring, CMU must be alerted that the patient is off the unit and the patient’s destination (CMU cannot monitor in MRI).
- If a portable cardiac monitor is in place, the transporter must be an RN with appropriate competency. If a continuous pulse oximeter is ordered and in place, the transporter must be an RN and/or Respiratory Therapist.

C. **MAXIMUM CARE** (PCU/ICU status)
- Indicates the patient has a high risk for injury or deterioration in condition during transport.
- When defined as Maximum Care must be transported by a PCU/ICU/PACU RN/ Anesthesia Provider or PALS trained RN for the pediatric patient (16 years of age or younger) or a NRP RN for neonates. A Respiratory Therapist must accompany all invasive or non-invasive mechanically ventilated patients on transports unless it accompanies the anesthesia provider. A Respiratory Therapist must accompany all patients on “Comfort flow” and patient on non-rebreathing masks or simple masks greater than 8 lpm.
- Includes ventilator dependent patients, patients requiring titration of cardio or vaso-active drips, and all ICU status patients.
- A PCU/ICU/PACU RN/ Anesthesia Provider and Respiratory Therapist will be responsible for transport of invasive mechanical ventilation patients and will determine, based on patient needs, whether both the RN and the Respiratory Therapist must stay with patient to monitor patient in the ancillary department. Therapists must assure stability on vent prior to leaving the patient in the area.
- If a portable cardiac monitor is in place, the transporter must be an RN with appropriate competency. If a continuous pulse oximeter is in place, the transporter must be an RN and/or Respiratory Therapist.

D. **PATIENTS WITH 1:1 SUPERVISION INCLUDING MENTAL HEALTH SERVICES PATIENTS**
- Includes patients requiring direct observation
- The staff member (may be MH tech) assigned to provide continuous observation of the high risk Mental Health patient (suicide precautions or high risk for elopement) will accompany the high risk Mental Health patient and continue to provide continuous observation while the patient is away from the Mental Health unit.
  a. On other inpatient areas staff member (may be nursing tech) assigned 1:1 observation care will accompany the patient.