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| **Handover during interdepartmental transfers** | |
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| **Policy Name :** | **Handover during interdepartmental transfers** |
| **Date of implementation :** |  |
|  | |
| **Approved By :** | ***Superintendent in Chief / Chief Medical Superintendent*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Reviewed By:** | ***District Hospital Quality Assurance Team (Incharge / Member)*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Issued By:** | ***SiC / CMS / Quality Manager*** |
|  | Name : |
|  | Signature : |
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|  | |
| **Responsibility of Updating :** | ***Head Of Department*** |
|  | Name : |
|  | Signature : |
|  |
| **Last Date of Updating** |  |
|  |  |

1. **Purpose:** To provide guideline instruction for handover of the patient condition after interdepartmental transfer of the patient.

1. **Scope:** Hospital Wide

1. **Policy:** 
   * All patient approaching in the hospital will get appropriate care and receive all necessary investigation at the point of treatment
   * Patient like in Emergency / ICU/ NICU /SNCU and after treatment patient condition is in normal condition then shifting of the Patient will be required and after shifting of the patient whole condition of the patient should be explained to the receiving staff of the next department
   * In Handover should have to explain :-

* Disease of the patient
* Treatment given in previous department
* Present status of the patient
* Pending medicines of the patient
* Pending investigation of the patient
* Precaution for the patient should be explained which will be follow in next department
* If the patient are not feeling well then shift the patient on urgent basis in the previous department
  + Quality of medical care will be same in all care settings of the hospital and no discrepancy of any sort will be followed in the provision of medical care.
  + All treatment orders would be signed, dated and timed by the concerned clinician. Any treatment order initiated by a hospital’s clinician different from the primary treating consultant of the patient will be countersigned by the primary treating consultant within 24 hours.
  + Incase required the primary treating consultant of the patient may consult other care providers available within the hospital for patients care related issues.
  + Patients response to treatment ,his /her health status , further treatment plan etc will be discussed among the clinical and nursing staff involved in provision of care to the patient
  + The primary treating consultant can refer the patient to other clinical specialty either within the hospital or to the identified external healthcare institutions if the patients medical need demand the same

**Clinicians are encouraged to consider the following points in using evidence based medicine for the provision of optimum care to the patients which are :**

* + 1. Convert information need into answerable questions.
    2. Track down the best evidence to answer the question (with maximum efficiency).
    3. Critically appraise the evidence for its validity and usefulness.
    4. Integrate appraisal results with clinical expertise and patient values.
    5. Evaluate outcome