**Intra-Hospital Transfer Checklist** Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

*Patient Label*

**□ Current medical & nursing notes**

**Contact Numbers**

**Radnor:** 4374 / 4373

**CT:** 4877

**MRI:** 4876

**Room 7 (Angio):** 4825

**Resus:** 4165 / 4166

**Bleep – ICU Reg** 1319

**Bleep – ICU Consultant:** 1373

**Bleep – Technician:** 1600

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| Transfer Team**Nurse:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Technician:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| Equipment□ Intubation drugsKept in fridge: Suxamethonium chloride & Rocuronium bromide(Consider opiates)□ Emergency drug pack□ IV Fluids□ Appropriate drugs□ Sufficient oxygen□ Batteries on monitor fully charged□ Batteries on ventilator fully charged□ Batteries on infusion pumps / drivers fully charged / power cable(s)□ Suction unit fully charged□ Transfer bags AB and CD□ Grab bag (optional) |
| Airway□ Secure ETT / tracheostomy tube & spare □ C-Spine immobilisation for trauma□ Self-inflating bag □ Water’s circuit |
| Breathing□ End-tidal CO2□ Pulse oximetry□ Arterial blood gas□ Adequate ventilation |
| Circulation□ Ensure two patent well secured lines – minimum 20g□ ECG & NIBP□ Arterial line secure (Velcro transducer holder) |
| Other considerations□ Temperature monitoring □ Nil by mouth / Aspirate NG Tube□ Blood glucose monitoring □ Urinary catheter |