

## FAQs for Physicians at UCSF regarding Adult Transfer Requests beginning April 16, 2020

We now plan to ease the restrictions for adult transfer requests to UCSF which were implemented as part of our institution-wide COVID-19 pandemic response, please review the following guidelines. As with the initiation of high priority surgeries and procedures, our goal is to reduce nonCOVID-19 morbidity and mortality as we currently have capacity and are seeing signs that the COVID-19 curve is flattening in San Francisco. This protocol aligns with our strategic plan, destination services and the need to provide T/Q support for our affiliate hospitals.

*1. How will patients be prioritized and which patients will I start to hear about now that I had not over the last few weeks?*

Until now, we had been prioritizing acute emergency cases requiring immediate intervention or care that could not be provided locally (such as endovascular therapy for an acute stroke) and our known UCSF patients with complex care issues, including recently post-operative status or active chronic conditions.

Starting today, you will start to get referrals from the Adult Transfer Center for patients who have tertiary/quaternary care needs that require subspecialty care at UCSF. We ask that physicians remain mindful of our need to maintain flexibility in our capacity and capability in the setting COVID-19. Please prioritize transfers for patients with surgical, medical, and interventional care needs that cannot be provided at the referring institution.

When appropriate, patients that can be safely cared for at the referring hospital with guidance and consultation from UCSF providers or that can be seen in expedited fashion over video or in person in a UCSF outpatient setting should not be transferred to UCSF inpatient services. This is of course true for known UCSF patients as well. Similarly, transfer requests being made because of patient or family preferences or for social reasons should be deferred. Any questions about triaging cases may be discussed with Maulik Shah, Medical Director of the Adult Transfer Center, or with your service chief or department chair.

*2. I would like to transfer a patient with a non-emergent but urgent surgical need, are there any considerations I should be aware of?*

We continue to prioritize emergency surgical cases and have protocols to expedite the transfer process for these patients. For patients that are likely to need surgery this hospital admission but not emergently, please assure that the surgery/procedure can be performed in a timely manner after transfer and that resources such as ICU stay, blood products and overall LOS are considered.

*3. How will patient experience be affected during the COVID-19 response?*

Most patients will already know about visitor restrictions, but please remind the referring MD that we continue to have strict visitor restrictions for patients at UCSF and that family members should not plan to arrive with patient at UCSF (Transfer Center staff will also communicate this). Families should have the expectation that communication will be largely be over the phone or by video, and that it would be helpful to have a single point person identified at the time of transfer to streamline communication.

*4. What considerations are there regarding patients in an outside Emergency Department? Are there any COVID-19 screening protocols that I should be aware of?*

If a patient in an outside ED is identified as having a tertiary/quaternary care need, they will be referred to the appropriate service at UCSF and the physician should proceed with their usual clinical review and acceptance with respect to EMTALA guidelines. If patient is accepted from an ED, does not need to be transferred emergently and is otherwise stable, we ask that they be screened for COVID-19 infection prior to transfer to UCSF. Specifically, any patient with a fever, respiratory symptoms, altered mental status or condition that makes it so they cannot provide a history (and deny symptoms), or who came from a skilled nursing facility should have test results back prior to transfer. If a patient needs to be transferred emergently and there is not time to wait for test results, COVID-19 testing will be done at UCSF.

*5. Will we still get financial clearance and transfer back agreements for inpatient to inpatient transfers?*

Yes, for already admitted patients we will quickly obtain financial clearance prior to transfer to UCSF (unless this requirement is waived by chair of department or appointed designee per our usual protocol). In addition, we will work to obtain a transfer back agreement for inpatient transfers as consistent with our usual process. We encourage accepting physicians to discuss transfer back with the referring MD early-on, setting the expectation with local providers and families that patients will be transferred back to the referring hospital once their tertiary/quaternary care needs are met and their care can be continued safely at referring hospital.

*6. What about transfers specifically for COVID-19 infection?*

We already have a protocol for transfer requests regarding patients at outside hospitals who are followed at UCSF for their complex medical conditions and now are hospitalized with COVID-19 infection, or patients requiring tertiary/quaternary ICU respiratory and cardiac support with COVID-19 infection. These processes will continue in coordination with COVID ICU, Hospital Medicine, and Infectious Disease teams.

*7. What should I do if I get a request directly from a physician colleague to transfer a patient to UCSF (and not through the Transfer Center)?*

This is very common! If you feel that patient needs to be transferred to UCSF for clinical care, please call the transfer center to provide them basic information (e.g. name of patient, which hospital, which level of care the patient will require, service line and acuity) and then have your referring colleague's team call the Transfer Center to start the formal process (415 353 9166). We encourage that this be done immediately so that calls can be on a recorded line.

We appreciate everyone's patience and support during this time and encourage providers to reach out to our leadership with any questions or concerns.