

Division of Intramural Research Programs

Guidelines for Emergency Transfer



Guidelines for Emergency Transfer

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The staff of the NIMH Office of the Clinical Director is available to assist with any questions or problems (301-496-1338).

Guidelines for Emergency Transfer

OVERVIEW OF PROCEDURES FOR CURRENT INPATIENTS

We cannot commit inpatients involuntarily to NIH since this is a voluntary research hospital.

- On NIMH units, it is the responsibility of the primary physician and the unit social worker (SW) to initiate procedures for transferring an inpatient to another facility. On non NIMH units, the Psychiatric Consultation Liaison may be contacted at 301-496-9675 for assistance. After 5:00 PM and on weekends, the NIMH Officer of the Day (O.D.) and the Clinical Center on call SW may be paged (301-496-1211).
- The NIMH Clinical Director's Office should be notified as soon as possible when planning to initiate an application for involuntary commitment of an NIMH inpatient to a community facility.
- All inpatients in the NIH CC requiring involuntary admission **MUST** be transferred to a Maryland hospital regardless of their state of residence*.
- The procedure for involuntary commitment is the same whether he/she is participating in NIMH studies or studies in another Institute. For the latter, the patient's clinical care team may contact the Psychiatry Consultation Liaison Service (PCLS) at 301-496-9675 or page the NIMH Officer of the Day (O.D.) through the paging operator at 301-496-1211 for an emergency evaluation and assistance with disposition.
- The insurance status of the patient influences whether the patient will be transferred to a private or Maryland state facility. Obtain this information prior to initiating a transfer.
- The Behavioral Health inpatient units in the Clinical Center do not accept admissions of non NIMH outpatients or transfers of inpatients from other units (except in very rare circumstances and only with the approval of the NIMH Clinical Director).
- Use the NIH Interhospital Transfer Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.)

*Arrangements for a subsequent transfer to an out of state hospital will be arranged by the Maryland state hospital via the interstate compact after the patient has been transferred. The contact number for the interstate compact is: 410-402-8480. This contact number should be given to the patient and family in the event that they are seeking an eventual transfer to their home state area.

Guidelines for Emergency Transfer

CURRENT CLINICAL INPATIENTS - without insurance

- Two NIH staff physicians (or a physician and a clinical psychologist) who are licensed in Maryland should complete certificates supporting commitment to a Maryland state hospital (form DHMH 2**). The primary physician completes pages 2 and 3 of the DHMH 2 and a second physician or psychologist completes page 2 of the DHMH2. The DHMH 34** is completed by a nurse or social worker.
- A clinical summary (written on a CC progress note) must be prepared and signed by the primary physician to provide sufficient history and mental status information to support a commitment. A copy of this is sent to the receiving facility. The primary physician should communicate by phone with the physician at the receiving facility.
- An NIH staff member (the primary physician, the NIMH O.D. or the unit social worker) should contact the Maryland Central Admissions Referral Center (1-866-632-3648) to arrange admission. There may be a waiting list for a bed in a state hospital. The patient may remain hospitalized at NIH while these arrangements are being made. Document the name of the facility and name of approving official on the NIH Interhospital Transfer Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.)
- Transportation by ambulance must be arranged (usually by the unit social worker or nurse) through the Clinical Center Admissions Office by calling 301-496-4144). Complete the CC Request for Ambulance form and the Authorization for Outside Medical Services form available at: http://intramural.nimh.nih.gov/ocd/ocd_docs.html. The Clinical Director of the Institute to which the patient is assigned must sign the paperwork for ambulance transport. For NIMH patients, Dr. Rosenstein, NIMH Clinical Director or Dr. Pao, NIMH Deputy Clinical Director, maybe reached through the page operator.
- Complete the NIH Interhospital Transfer Checklist with the signature of the primary physician and place in the patient's medical record. A copy of this as well as the DHMH 2 and 34 should be forwarded to the appropriate Institute's Clinical Director.

**All DHMH Forms are available at <http://www.dhmh.state.md.us/mha/forms.htm>.

Guidelines for Emergency Transfer

CURRENT CLINICAL INPATIENTS - with insurance

- Two NIH staff physicians (or a physician and a clinical psychologist) who are licensed in Maryland should complete certificates supporting commitment to a Maryland state hospital (form DHMH 2**). The primary physician completes pages 2 and 3 of the DHMH 2 and a second physician or psychologist completes page 2 of the DHMH 2. The DHMH 34** is completed by a nurse or social worker.
- A clinical summary (written on a CC progress note) must be prepared and signed by the primary physician to provide sufficient history and mental status information to support a commitment. A copy of this is sent to the receiving facility. The primary physician should communicate by phone with a physician at the receiving facility.
- The unit social worker should obtain preauthorization from the patient's insurance company.
- The NIH staff, usually a social worker, then contacts a Maryland private hospital that will accept the patient's insurance to arrange the admission. Obtain the name of the person at the private hospital who has agreed to accept the admission and document on the NIH Interhospital Transfer Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.) Private hospitals to which we have had the most success transferring patients in the past are:
 - Washington Adventist -- 301-891-5070
 - Potomac Ridge -- 301-251-4500
 - Sheppard Pratt -- 410-938-3800The complete list of facilities is found in the Appendices of the "hard copy" of these guidelines found in all of the behavioral health clinical care units.

If several refusals (usually at least three) are received from private hospitals for lack of beds or any other reason, the patient may be eligible for admission to a state hospital. An NIH staff member (the primary physician, the NIMH O.D. or the unit social worker) should contact the Maryland Central Admissions Referral Center (1-866-632-3648) to arrange admission. There may be a waiting list for a bed in a state hospital. The patient may remain hospitalized at NIH while these arrangements are being made.

- Transportation by ambulance is arranged (usually by the unit social worker or nurse through the Clinical Center Admissions Office by calling 301-496-4144. Complete the CC Request for Ambulance form and the Authorization for Outside Medical Services form available at: http://intramural.nimh.nih.gov/ocd/ocd_docs.html. The Clinical Director of the Institute to which the patient is assigned must sign the paperwork for ambulance transport. For NIMH patients, Dr. Rosenstein, NIMH Clinical Director or Dr. Pao, NIMH Deputy Clinical Director maybe reached through the page operator.
- Complete the NIH Interhospital Transfer Checklist with the signature of the primary physician and place in the patient's medical record. A copy of this as well as the DHMH 2 and 34 should be forwarded to the appropriate Institute's Clinical Director.

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Guidelines for Emergency Transfer

OVERVIEW OF PROCEDURES FOR CURRENT OUTPATIENT -presenting in a clinic

We cannot commit outpatients involuntarily to NIH since this is a voluntary research hospital.

All outpatients presenting at the NIH CC requiring involuntary admission **MUST** be transferred to a Maryland hospital regardless of their state of residence*.

During normal business hours (8:00 AM to 5:00 PM) it is the responsibility of the primary physician and social worker to initiate procedures for transferring an outpatient to another facility. After 5:00 PM and on weekends the NIMH Officer of the Day (O.D.) and the SW on call may be paged for assistance. Pages 6 and 7 outline the procedures according to the insurance status of the outpatient.

NIMH OUTPATIENTS:

- The NIMH Clinical Director's Office should be notified as soon as possible when planning to initiate an application for involuntary commitment of an NIMH outpatient to a community facility.
- If an outpatient in an active phase of an NIMH protocol requires hospitalization, he/she may be offered voluntary hospitalization on one of the CC Behavioral Health Units with approval by the Office of the Clinical Director and the Behavioral Health Nurse Manager.
- If the NIMH outpatient does not agree to voluntary hospitalization and in the medical judgment of the responsible physician requires involuntary hospitalization, the certification procedures as outlined for involuntary hospitalization outside of the CC are the only option.

NON-NIMH OUTPATIENTS:

- The appropriate Institute Clinical Director should be notified as soon as possible when planning to initiate an application for involuntary commitment of an Institute outpatient to a community facility.
- For outpatients of other Institutes who require psychiatric evaluation and possible treatment as an inpatient, the medical staff of that Institute should contact the Psychiatry Consultation Liaison Service at 301-496-9675 or page the NIMH Officer of the Day through the paging operator at 301-496-1211 for emergency evaluation and, if necessary, assistance with admission to a psychiatric facility in the community.

*Arrangements for a subsequent transfer to an out of state hospital will be arranged by the Maryland state hospital via the interstate compact after the patient has been transferred. The contact number for the interstate compact is: 410-402-8480. This contact number should be provided to the patient and family in the event that they are seeking an eventual transfer to their home state area.

Guidelines for Emergency Transfer

CURRENT OUTPATIENTS - without insurance

- Two NIH staff physicians (or a physician and a clinical psychologist) who are licensed in Maryland should complete certificates supporting commitment to a Maryland state hospital (form DHMH 2**). The primary physician completes pages 2 and 3 of the DHMH 2 and a second physician or psychologist completes page 2 of the DHMH 2. The DHMH 34** is completed by a nurse or social worker.
- A clinical summary (written on a CC progress note) must be prepared and signed by the primary physician to provide sufficient history and mental status information to support a commitment. A copy of this is sent to the receiving facility. The primary physician should communicate by phone with a physician at the receiving facility.
- An NIH staff member should contact the Maryland Central Admissions Referral Center (1-866-632-3648) to arrange admission. There may be a waiting list for a bed in a Maryland state hospital. If there is a waiting list for a state hospital bed, then he/she may be sent to a community hospital Emergency Room such as Suburban Hospital. Complete an Emergency Petition CC/DC 13 (<http://www.courts.state.md.us/index.html>) to accompany the patient.
- Document the name of the facility and name of the accepting physician on the NIH Interhospital Transfer Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.)
- Transportation by ambulance is arranged (usually by a unit social worker or nurse through the Clinical Center Admissions Office by calling 301-496-4144). Complete the CC Request for Ambulance form and the Authorization for Outside Medical Services form available at: http://intramural.nimh.nih.gov/ocd/ocd_docs.html. The Institute Clinical Director must sign the paperwork for ambulance transport. For NIMH patients, Dr. Rosenstein, NIMH Clinical Director or Dr. Pao, NIMH Deputy Clinical Director maybe reached through the page operator.
- Complete the NIH Interhospital Transfer Checklist with the signature of the primary physician and place in the patient's medical record. A copy of this as well as the DHMH 2 and 34 should be forwarded to the appropriate Institute Clinical Director.

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Guidelines for Emergency Transfer

CURRENT OUTPATIENTS - with insurance

- Two NIH staff physicians (or a physician and a clinical psychologist) who are licensed in Maryland should complete certificates supporting commitment to a Maryland state hospital (form DHMH 2**). The primary physician completes pages 2 and 3 of the DHMH 2 and a second physician or psychologist completes page 2 of the DHMH 2. The DHMH 34** is completed by a nurse or social worker.
 - A clinical summary (written on a CC progress note) must be prepared and signed by the primary physician to provide sufficient history and mental status information to support a commitment. A copy of this is sent to the receiving facility. The primary physician should communicate by phone with a physician at the receiving facility.
 - Obtain preauthorization from the patient's insurance company.
 - The NIH staff, usually a social worker, then contacts a Maryland private hospital that will accept the patient's insurance to arrange the admission. Obtain the name of the person at the private hospital who has agreed to accept the admission and document on the NIH Interhospital Transfer Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.) Private hospitals to which we have had the most success transferring patients in the past are:
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- If several refusals (usually at least three) are received from private hospitals for lack of beds or any other reason, the patient may be eligible for admission to a state hospital. An NIH staff member (the primary physician, the NIMH O.D. or the unit social worker) should contact the Maryland Central Admissions Referral Center (1-866-632-3648) to arrange admission. There may be a waiting list for a bed in a state hospital, then he/she may be sent to a community hospital emergency room, such as Suburban Hospital. Complete an Emergency Petition CC/DC 13 (<http://www.courts.state.md.us/index.html>) to accompany the patient.
- Transportation by ambulance is arranged (usually by a social worker or nurse) through the Clinical Center Admissions Office by calling the 301-496-4144. Complete the CC Request for Ambulance form and the Authorization for Outside Medical Services form (see http://intramural.nimh.nih.gov/ocd/ocd_docs.html). The Institute Clinical Director must sign the paperwork for ambulance transport. For NIMH patients, Dr. Rosenstein, NIMH Clinical Director or Dr. Pao, NIMH Deputy Clinical Director may be reached through the page operator.
 - Complete the NIH Interhospital Transfer Checklist with the signature of the primary physician and place in the patient's medical record. A copy of this as well as the DHMH 2 and 34 should be forwarded to appropriate Institute Clinical Director.

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Guidelines for Emergency Transfer

WALK-INS, FORMER PATIENTS (> one year since completing NIH study), FAMILY MEMBERS, VISITORS, STAFF

- During the hours of 7:30 AM to 4:00 PM, Monday through Friday, the person should be escorted to the Occupational Medical Services (301-496-4411) on the 6th Floor of the ACRF where a full evaluation and recommendation for disposition will be provided.
- Between the hours of 4:00 PM and 7:30 AM, the NIMH O.D. and the nursing administrative coordinator should be paged (301-496-1211). If an individual requires psychiatric evaluation, he/she should be transferred by NIH Police to the Suburban Hospital Emergency Room. Notify the emergency room when the individual will be arriving. Transportation by ambulance is arranged by calling the Admissions Office (301-496-4144).
- Please assist both the NIH police and the Suburban Hospital receiving physician by filling out the Petition for Emergency Evaluation (CC/DC 13) found at <http://www.courts.state.md.us.index.html>.

TELEPHONE EMERGENCIES

NON-NIMH CALLERS:

In the event that a non-NIMH study participant calls and provides evidence of suicidal or homicidal risk on the phone, he/she should be told to go for evaluation to the nearest ER within their local geographical area for evaluation. If they refuse, keep them on the phone and call 9-911 to reach the emergency operator outside NIH.

NIMH STUDY PARTICIPANTS:

If the caller is an active research participant in NIMH studies they may be offered an emergency clinic visit and evaluation for voluntary inpatient admission on a CC Behavioral Health Unit. If the patients refuses to come to the clinic, advise the patient (and or a family member if available) to go to the nearest ER.

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PROCEDURES FOR VOLUNTARY TRANSFER TO A COMMUNITY TREATMENT FACILITY

- The patient's community psychiatrist should be notified of impending discharge from NIH and the need for a voluntary transfer to a community facility.
- Determine the preference of the patient, family and community psychiatrist for a specific facility.
- Check the patient's insurance status and obtain pre-authorization for transfer. Review the "Adult Facility Listing" (see "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices) for insurances accepted by the facility.
- Complete Interhospital Checklist. (Web version presently not available. See "hard copy" of these guidelines found in all of the behavioral health clinical care units under Appendices.)
- Complete Interhospital Transfer Checklist (found at http://intramural.nimh.nih.gov/ocd/ocd_docs.html).
- Complete Application for Voluntary Admission, DHMH 4**. This must be signed by the patient and his/her NIH physician.
- Send a written clinical summary with history and mental status information to the receiving facility. Primary NIH physician should communicate by phone with the physician at the receiving facility.
- Arrange transportation. Transportation by ambulance must be arranged (usually by the unit social worker or nurse) through the Clinical Center Admissions Office by calling 301-496-4144). Complete the CC Request for Ambulance form and the Authorization for Outside Medical Services form (see http://intramural.nimh.nih.gov/ocd/ocd_docs.html). The Clinical Director of the Institute to which the patient is assigned must sign the paperwork for ambulance transport. For NIMH patients, Dr. Rosenstein, NIMH Clinical Director or Dr. Pao, NIMH Deputy Clinical Director, maybe reached through the page operator.

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