

Maryland Institute for Emergency Medical Services Systems eMEDS® BULLETIN

Facility Review of Destination Name and Date/Time of Transfer of Care

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Overview

MIEMSS continues to closely monitor EMS prehospital care-to-hospital transfer times and sends weekly reports to all hospitals and freestanding emergency departments across Maryland. Hospitals use this data to re-evaluate their triage processes and prioritize improvement in transfer times.

Confirmation of Destination Name & Date/Time of Transfer of Care

When facility staff are asked to sign for a patient transfer, they will see a signature box. Before signing, confirm with the EMS crew that the selected destination name and the entered date/time of transfer are correct.

- Close the Signature Window:** Select (1) **Cancel** to exit the signature window.
- Review Transfer Details:** At the top of the Signatures section, confirm that the (2) **Destination Name** and **Date/Time of Transfer** are correct. If not, work with the EMS crew to update the information accurately.
- Reopen the Signature Window:** Once the information is correct, open the signature window again by selecting (3) **Add** within the signature grid, then choose (4) **Transfer to Healthcare Clinician**.
- Provide Signature:** Enter your name, the current date/time, and add your graphical signature as requested.