



HEALTH HOLDING

HAFER ALBATIN HEALTH  
CLUSTER  
MATERNITY AND  
CHILDREN HOSPITAL

<b>Department:</b>	Emergency Room		
<b>Document:</b>	Multidisciplinary Policy and Procedure		
<b>Title:</b>	Screening, Stabilization and Management of Outgoing Patients		
<b>Applies To:</b>	All Emergency Room Staff		
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## 1. PURPOSE:

1.1 To establish guidelines for the provision of a medical screening examination to individuals presenting at emergency room of Maternity and Children Hospital, Hafar Al Batin, for the provision of stabilizing treatment for any emergency medical condition discovered in a medical screening examination and for management of transferring patients to other health institution.

## 2. DEFINITIONS:

2.1 **Transfer** – is the formal shifting of responsibility for the care of a patient from one care unit to another, one clinical service to another, one qualified practitioner to another or one organization to another organization.

2.2 **Emergency Medical Condition** – a medical condition manifesting itself by acute symptoms of sufficient severity (including without limitation severe pain) such that the absence of immediate medical attention could reasonably be expected to result in placing the health of the individual in serious jeopardy, serious impairment to bodily functions or serious dysfunction of any bodily organ or part.

2.3 **To Stabilize or Stabilized** – individual is provided such medical treatment as is necessary to assure, within reasonable medical probability, that no material deterioration of the condition is likely to result from, or occur during the transfer of the individual from the facility as determined by a physician or other qualified medical personnel.

## 3. POLICY:

3.1 To provide an appropriate medical screening examination to individuals presenting at the emergency department requesting examination or treatment of a medical condition, and either to stabilize an emergency medical condition if one exists or to transfer the individual appropriately and in conformity with legal and regulatory requirements.

## 4. PROCEDURE:

4.1 Cases required care not available:

4.1.1 Pediatrics:

- 4.1.1.1 ENT
- 4.1.1.2 Orthopaedic case
- 4.1.1.3 Neurosurgery >1 year
- 4.1.1.4 Psychiatric case
- 4.1.1.5 Patient >12 years old
- 4.1.1.6 Ophthalmology
- 4.1.1.7 Plastic surgery cases

4.1.2 OB/Gyne

- 4.1.2.1 <24 weeks with any medical problem
- 4.1.2.2 Cases not related to OB/GYNE

- 4.2 Pregnant patient <24 weeks of gestation with medical or surgical problem (not related to pregnancy) should be referred/ transferred to other health specialities.
- 4.3 Pregnant patients more than 24 weeks of gestation with acute medical/ surgical problem (not related to pregnancy). Transfer of such patients should be through Specialist on duty after discussion with Consultant - OB/GYNE on call or consultant in emergency room in morning hours.
- 4.4 Residents on duty should inform the Specialist on duty for transfer of patient. Specialist on duty should evaluate the patient if he/ she can consult with Consultant on call if needed.
- 4.5 Transfer of stable patients- If a patient has been stabilized, such that no material deterioration of the patient's condition is likely within reasonable medical probability to result from or occur during the transfer of the individual, or if a patient has been determined not to have an emergency medical condition, the hospital may transfer the patient, if written informed consent is obtained from the patient.
- 4.6 If the physician determines that an emergency medical condition does exist, the patient may be transferred from MCH when the patient has been stabilized.
- 4.7 To transfer patient who is stabilized, the physicians must provide medical treatment within their capacity to minimize the risks to the patient's health or to the health of an unborn child.
- 4.8 The medical screening examination for critical cases shall be performed without regard to the patient's ability to pay and without regard to the diagnosis, financial status, race, color, national origin, sex or age.
- 4.9 All patients to be transferred must have an identified sending and accepting physician and facility. This must be documented in the medical record.
- 4.10 A transfer request may be initiated under the following circumstances and will require documentation in addition to completion of the patient transfer order form.
- 4.11 The initial emergency care to stabilize the patient prior to transfer must be documented in the medical record.
- 4.12 Copies of all medical records must be forwarded to the receiving facility.
- 4.13 If the examining physician or other staff determines a consultation is needed from a particular specialty, the physician on call for that specialty service shall be called.

## **5. MATERIALS AND EQUIPMENT:**

- 5.1 Referral Form
- 5.2 Emergency Room Sheet

## **6. RESPONSIBILITIES:**

- 6.1 Emergency Room Physician
- 6.2 Emergency Room Staff Nurse
- 6.3 Other Speciality on Call Physicians
- 6.4 Hospital Ambulance

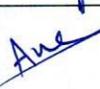
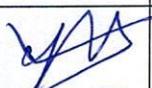
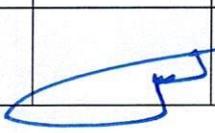
## **7. APPENDICES:**

- 7.1

## **8. REFERENCES:**

- 8.1 Maternity and Children hospital Buraidah, Emergency department Policies and Procedures.

**9. APPROVALS:**

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