

## Emergency Access Certificate of Transfer

**BE ADVISED THAT ACCEPTANCE BY JMH OF AN EMERGENCY ACCESS REQUEST IS NOT DEPENDANT ON THE COMPLETION OF THIS FORM.**

This certificate is to be completed and signed by the transferring physician or a qualified medical person in consultation with a physician who countersigns the form. Once completed fax the form to (305)326-7885 Attn: JMH Transfer Center. Send original form with the copy of the patient's medical record.

Patient's Last Name	Mother's Maiden Name	First Name	MI

Based upon your medical examination of the patient and the information available to you at the time of transfer:

- I. Do you certify that this patient has an **emergency medical condition** (EMC) that requires **stabilization** that is unavailable at your facility?  Yes  No
  
- II. Do you certify that JMH is the closest facility geographically with the requested capability and capacity?  Yes  No (If no, explain below)

<b>Comments:</b>
<b>Reason for Transfer Request</b>
<input type="checkbox"/> Transferring hospital does not have service capability
<input type="checkbox"/> Transferring hospital does not have service capacity
<input type="checkbox"/> Patient needs specialized level of care not available at the transferring hospital
<input type="checkbox"/> On-call physician at transferring hospital is unavailable
<input type="checkbox"/> Other:

List Risk(s) of Transfers	List Benefit(s) of Transfers
1.	1.
2.	2.
3.	3.

- III. Do you certify that risks of transfer are outweighed by the benefits reasonably anticipated from proper care at the receiving facility?  
 Yes  No (If no explain)

- IV. It is my medical opinion that:
  - There is no reasonable likelihood of deterioration from or during transport
  - The patient may be at risk for deterioration from or during transport
  - Patient is pregnant with contractions

- V. Do you certify that you have informed the patient that all transfers have inherent risks of delays or accidents in transit, pain or discomfort upon movement, and limited medical capacity of transport units that may limit available care in the event of a crisis?  
 Yes  No (If no explain)

If a physician is not physically present in the emergency services area at the time an individual is transferred and a qualified medical person signs a certification that a physician, in consultation with personnel, has certified the above statements. The consulting physician must countersign the certification.

<b>Qualified medical person</b> (Print Name)	<b>Signature</b>	<b>Title</b>	<b>Date</b>
			/ /
<b>Counter-signed by</b> (Print Name)	<b>Signature</b>	<b>Title</b>	<b>Date</b>
			/ /

