

NYGH/UHN Vascular Surgery Collaborative Algorithm (3/26/2019)

Urgent/Emergent Patient from NYGH requiring immediate Vascular Assessment
 (NOTE: **non-urgent assessment** of vascular patients to be referred to home hospital office practice)

NYGH ED Referral

1. **Referral** - ED physician will refer patient directly to UHN by calling UHN Switchboard 416-340-4800 and requesting vascular surgeon on-call.
2. If clinically indicated, the patient will be transferred to UHN for assessment and treatment. This includes urgent vascular clinic appointment if needed.
3. Referring physician will ensure that all CT imaging has been uploaded to ENITS by NYGH radiology department.
4. A copy of the on-call schedules will be provided to NYGH and UHN.
5. **Referring site arranges ambulance transfer to UHN ED**
6. ED staff explain to patient that vascular assessment will occur and treatment as follows:
 - Pt will be treated at UHN **if** vascular
 - Pt will return to home hospital **if not** a vascular issue.

NYGH In-patient Unit/Clinic Referral

1. In-patient requiring urgent/emergent vascular assessment, MRP will refer patient directly to UHN by calling UHN Switchboard 416-340-4800 and requesting vascular surgeon on-call. If clinically indicated, the patient will be transferred to UHN for assessment and treatment. This includes urgent vascular clinic appointment if needed.

UHN
 Accepts vascular assessment patient with direct referral to Vascular Surgery Service regardless of surge status
 (No Refusal Policy)

UHN Vascular Surgery On-Call:
 Completes patient assessment to determine if patient has vascular clinical issue or provides a UHN outpatient vascular clinic appointment.

YES: Vascular issue

1. If vascular, continues urgent treatment of patient within UHN or provides a vascular clinic appointment
2. OR Booking/Request for bed type to Patient Flow
3. Discharge planning to begin on admission

NO: Not Vascular Issue

1. **If not a vascular issue, UHN calls NYGH ED to inform of immediate transfer back for care:** Patient has been assessed but not admitted to UHN, patient is repatriated back to home site.
2. UHN will arrange the ambulance transfer back to NYGH and NYGH will assume transportation costs
3. If in-patient, UHN calls sending unit to inform team that either patient is staying at UHN or is returning to NYGH. UHN will arrange ambulance transfer back to NYGH and NYGH will assume transportation costs.

**Repatriation to Home Hospital:
 (From ICU & Ward Settings) within 48 hours of referral**

1. For Surgical pts, UHN physician or Nurse Practitioner will notify the referring physician and provide clinical handover.
2. If patient originated from NYGH ED or referring MD not available or on service, UHN physician or Nurse Practitioner will call the NYGH switchboard 416-756-6002 and request Medicine or Surgery on call and patient handover will be provided.
3. NYGH physician will inform NYGH Bed Control or Administration Coordinator if Bed Control is not available.
4. NYGH to provide a bed within 24 hours of request to repatriate.
5. UHN will arrange the ambulance transfer back to NYGH and NYGH will assume transportation costs.
6. A discharge summary will be sent to referring physician.
7. UHN vascular surgeon will ensure that all CT imaging has been uploaded to ENITS by UHN radiology department.

Both parties will use PHRS to facilitate communication and tracking of transfers between hospitals

Legend:
 North York General Hospital (NYGH)
 University Health Network (UHN)
 Emergency Department (ED)