

ACCTS Patient Preparation Checklist

Handover	Please be prepared to: ·Contact the receiving hospital to provide a brief handover ·Handover to the transfer team when they arrive
Airway & Breathing	Endotracheal tube adequately secured for transfer (do not cut tube)? Tracheostomy adequately secured and emergency trache box available? Lung protective ventilation?
Circulation	Adequate IV access – 2 free (peripheral or CVC lumens)? Arterial line if indicated (intubated patients, vasopressor requirement) and if time allows
Neuro & Sedation	Regular pupil assessment Sedation and analgesia adequate?
GI	Feed stopped and NG required?
Renal	Urinary catheter (all intubated patients) If requiring RRT for electrolyte control / anuria, wash back filter only once transfer team on-site
Micro	Infection control issues? Antibiotics administered?
Blood	Blood products ordered if required for transfer?If uncertain, discuss with transfer service
Drugs	Patient allergy status confirmed? Administer medication that is due Does the patient have any issued medications that need to be transferred with them? Prepare adequate infusions for journey (discuss with transfer service).In general, these will include the following drugs for twice the journey time (for a sedated, ventilated patient) ·Sedative and analgesia ·Muscle relaxation ·Vasopressor infusion(s)
Temperature	Keep patient warm
Identification	2 patient identification bands
Documentation	Discharge summary (or transfer letter) and copy of: ·Relevant patient notes ·Drug chart ·Results: blood, relevant microbiology (latest COVID, MRSA, CPE, etc most useful) Imaging electronically transferred to receiving hospital?
Patient property	All patient property collected and at bedside ready for transfer?
Next of Kin	Aware of transfer and destination?