

December 2023

Surgical Services Guideline

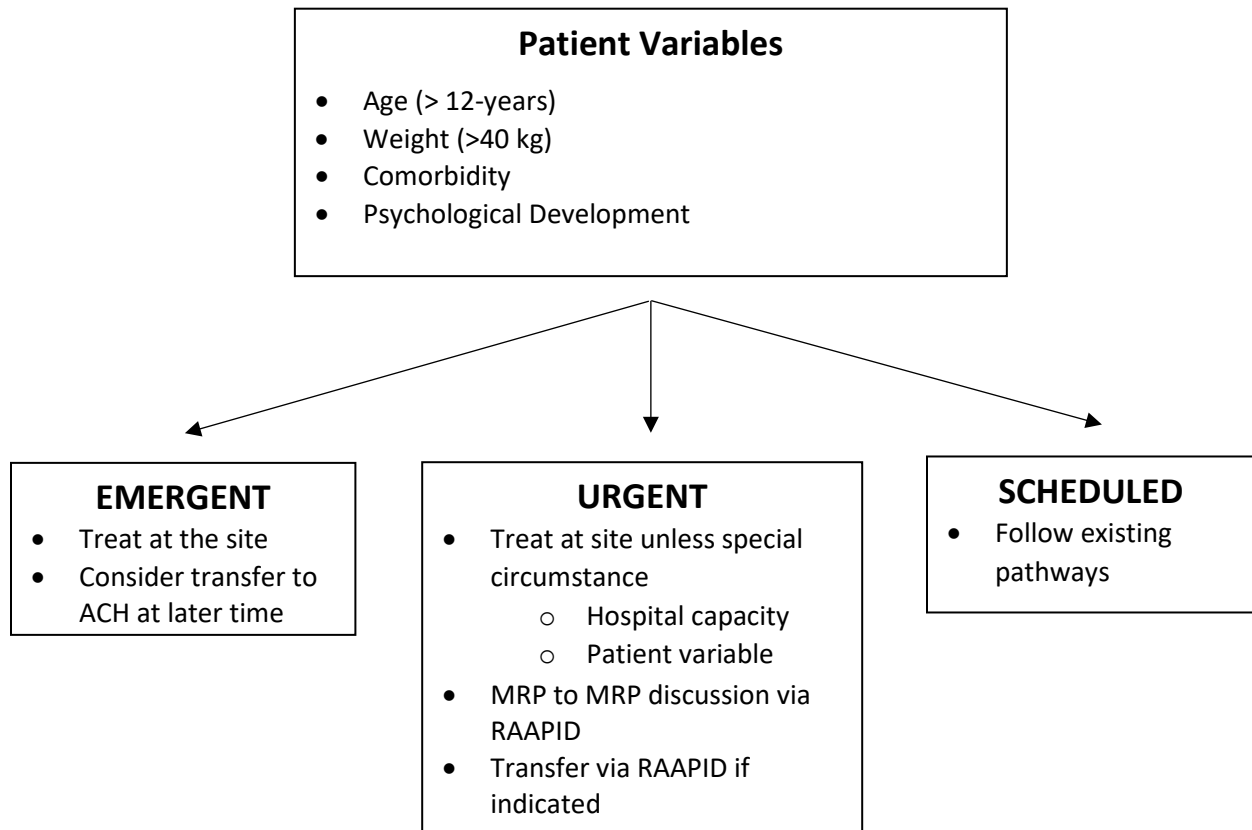
Adolescent emergency surgical care – inter-facility transfers, Calgary Zone Ages 12-17 inclusive.

1. Adolescents, defined as at least 12-years and 40 kg, may require urgent / emergent surgical care on presentation to any one of the hospitals in the Calgary Zone. The aim is to provide timely, quality and efficient care, such that patients meeting this definition should be cared for at that hospital unless requiring specialized services. In these cases, direct attending to attending discussion must occur in advance of transfer.
 2. The adolescent transfer guideline accepts that Pediatric Advanced Life Support (PALS) Guidelines are aimed at infant (< 1 year age) and children (up to 8-years or puberty), after which adult resuscitation guidelines are applicable.
 3. Special circumstances may warrant transfer of adolescents to support safe patient care. In the instance of hospital overcapacity likely to delay patient care, transfer of adolescents may be considered. The receiving facility must have capacity to accommodate the transfer. Direct attending to attending discussion via RAAPID must occur in advance of transfer. In cases of disagreement, admin on call and site chiefs for surgery and/or Department head will determine triage.
 3. Adolescents who receive acute surgical care at an adult facility may benefit from medium to long term convalescence at the ACH. Important considerations include counselling, physio, rehab, OT and special needs. In these cases transfer will occur with direct attending MD to MD discussion, via RAAPID. These potential transfers may be identified by nurse clinicians, practitioners or allied health. In cases of disagreement, admin on call and site chiefs for surgery and/or Department head will determine triage.
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Adolescent Surgical Patient Transfer Flow Map

for patients presenting to Adult Hospitals in the Calgary Zone

(>12 years)



- A surgical **EMERGENCY** exists when an individual faces an **IMMEDIATE** threat to life, limb, organ or sensory function. In an emergency, safe transfer of the patient is not possible and the patient must be supported at the site of presentation to the best of that sites ability.
- A medical/surgical/obstetrical **URGENCY** exists when an individual faces a **TIME SENSITIVE** threat to life, limb, organ or sensory function. Individuals with an urgent medical concern may be safely transferred to another site if that site has unique skills, equipment or conditions that favour the patient and the patient’s family.
- **SCHEDULED** care describes non urgent or emergent health care problems that reasonably can be reasonably cared for in a delayed fashion. The best site to deliver this care may depend on unique equipment or expertise and in most cases these pathways already exist and are acknowledged as appropriate.