Name of Policy:	Management of UTMC Inpatients Requiring Radiation Therapy at The Eleanor N. Dana Cancer Center	THE UNIVERSITY OF TOLEDO MEDICAL CENTER
Policy Number:	3364-100-01-20	
Department:	Hospital Administration	
Approving Officer:	Chief Executive Officer – UTMC Chief of Staff	
Responsible Agent:	Department Chair, Radiation Oncology	
Scope:	The University of Toledo Medical Center	Effective Date: May 1, 2021 Initial Effective Date: 11/1/2013
New policy proposal Minor/technical revision of existing policy Major revision of existing policy X Reaffirmation of existing policy		

(A) Policy Statement

University of Toledo Medical Center ("UTMC") inpatients requiring radiation therapy at The Eleanor N. Dana Cancer Center ("DCC") will be carefully selected and provided the same level of care during their transfer and treatment that they are provided during their inpatient stay.

(B) Purpose of Policy

- 1. To define the patient populations which are medically-appropriate for transfer to the DCC.
- To define the process for safely and efficiently transferring inpatients to and from the DCC for radiation therapy by consistently providing the necessary staff support, equipment and supplies to manage the patient appropriately, irrespective of patient acuity or severity of illness.

(C) Patient Populations Appropriate for Transfer to the DCC

- 1. Eligible patients include those with the following diagnoses/conditions:
 - a) Spinal cord compression,
 - b) Mediastinal/pulmonary mass causing superior vena cava obstruction or airway compression,
 - c) Intracranial metastases (requiring urgent whole brain radiation), and
 - d) High volume cervical/uterine bleeding attributable to a gynecologic malignancy (requiring transfusion and unable to be controlled via other appropriate means.
- 2. Patients being considered for transfer to the DCC for radiation planning/treatment must be first evaluated by Radiation Oncology faculty.
- 3. Final determination regarding eligibility for transfer to the DCC for radiation services is at the discretion of the consulting radiation oncologist.

(D) Procedure

- 1. Notify Outcome Management or Staff nurse taking care of the patient of the need to schedule EMS facilitated transportation or internal transportation services to and from the DCC.
- 2. Select and assign a UTMC Attending Pulmonologist or Pulmonary Fellow to accompany and lead the transfer of the patient.
- 3. Select and assign a CLS trained critical care nurse to accompany and care for the patient during the transport and treatment.
- 4. Select and assign a licensed respiratory therapist to accompany and manage the airway and respiratory needs of the patient during the transport.
- 5. Transfer an adult resuscitation (Code) cart from the UTMC department of respiratory therapy to the radiation therapy suite at the DCC *prior* to the patient transport.

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- 6. The RN is responsible for ensuring that a portable cardiac monitor with defibrillation and cardiac pacing functionality is present throughout the transport and treatment period and used as directed by the physician.
- 7. The respiratory therapist is responsible for insuring that supplemental oxygen and the necessary oxygen delivery modalities are readily available at all times during the transport and treatment.
- 8. Upon arrival of the EMS transportation team, all team members identified above will accompany the patient throughout the transport to the DCC, during the treatment period and back to UTMC following the treatment.
- 9. Documentation of the care of the patient during transport and treatment is to be manually written and scanned into the patient's medical record upon return to UTMC.
- 10. In the event of a cardiopulmonary arrest during transport to or from the DCC, staff are directed to immediately return to the UTMC Emergency Department while concurrently initiating Advanced Cardiac Life support.
- 11. In the event of a cardiopulmonary arrest during treatment at the DCC, medical staff are directed to immediately call campus police at 2600 for support while concurrently initiating Advanced Cardiac Life support.

Approved by: /s/ Richard Swaine Chief Executive Officer - UTMC	05/24/2021 Date	Review/Revision Date: 11/1/2013 11/1/2016 04/01/2020 05/01/2021
Andrew Casabianca, MD, DMD Chief of Staff	06/10/2021 Date	
/s/ Merisha Hadziahmetovic, MD Clinical Service Chief, Radiation Oncology Review/Revision Completed By:	05/21/2021 Date	
Nursing Administration Radiation Oncology Policies Superseded by This Policy:		Next Review Date: 05/01/2024

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.