

TRANSFER FROM A&E, RIE TO ROYAL EDINBURGH HOSPITAL



PATIENT DETAILS Name Address Postcode Telephone		Title Gender DOB Legal status: Voluntary/Detained [specify] Section papers attached: yes/no/not applicable	
GP DETAILS Name Address Postcode Telephone		NOK DETAILS Name Relationship Address Postcode Telephone	
Reason for referral to NRIE: Investigations undertaken/results: Further investigations required: Follow up arranged: Relevant/significant previous contact/medical history:		Referred by: Psychiatric services-seen by:	
Interventions at NRIE: Medicines received [type,dose,route,time].			
Reason for referral to REH:include identified risks & give detail [eg aggression, self harm, absconding, disinhibition]			
Referred by: Contact details:			
Transfer agreed with: Discussed with receiving doctor: Discussed with nurse in charge of receiving ward: [include expected time of arrival & inform when transport leaves]			
Patient condition at time of transfer:[include GCS, mobility level, vital signs, venflon in situ, alerts etc]			
Further physical interventions required [eg dressings, vital signs, BM,etc]			
Completed by:		Contact Details:	

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