

STATE AND TERRITORIAL REGULATIONS AUTHORIZING PEDIATRIC INTERFACILITY TRANSFER GUIDELINES OR AGREEMENTS

| STATE/<br>TERRITORY | CITATION   | DESCRIPTION AS IT RELATES TO<br>PERFORMANCE MEASURE   | URL   |
|---------------------|--|---|---|
| Arkansas            | Code of Arkansas Rules and Regulations: 007 Department of Health, 28 Emergency Medical Services and Trauma Systems, 003 Rules and Regulations for Trauma Systems | Allows Level 1 and Level 2 trauma facilities to arrange for the transfer of care for pediatric patients to an available specialized Pediatric Trauma Center and establishes standards for the triage and transfer of pediatric trauma patients  | <a href="http://www.healthyarkansas.com/ems/pdf/traumasystem_rules_regs_2002.pdf">http://www.healthyarkansas.com/ems/pdf/traumasystem_rules_regs_2002.pdf</a>   |
| California          | California Code of Regulations: (1) Title 22, Div 9, Chap 7, Art 2, § 100255; (2) Title 22, Div 9, Chap 7, Art 3, § 100259 and § 100261                          | Requires that (1) a local EMS agency that implements a trauma system develop policies on intertrauma center transfers, transfers from a receiving hospital to a trauma center, and integration of pediatric hospitals, if applicable and (2) trauma centers without a pediatric intensive care unit establish and utilize written criteria for consultation and transfer of pediatric patients needing intensive care and pediatric trauma centers have written interfacility transfer agreements with referring and speciality hospitals | <a href="http://government.westlaw.com/linkedslice/default.asp?Action=TOC&amp;RS=GVT1.0&amp;VR=2.0&amp;SP=CCR-1000">http://government.westlaw.com/linkedslice/default.asp?Action=TOC&amp;RS=GVT1.0&amp;VR=2.0&amp;SP=CCR-1000</a>   |
| Colorado            | Code of Colorado Regulations: Department 1000, Agency 1015, 6 CCR 1015-4, Chap 2, § 202  | Establishes standards for pediatric interfacility transfer and consultation   | <a href="http://www.sos.state.co.us/CCR/Rule.do?deptID=16&amp;deptName=1000%20Department%20of%20Public%20Health%20and%20Environment&amp;agencyID=147&amp;agencyName=1015%20Health%20Promotion%20and%20Disease%20Prevention%20Services%20/%20Emergency%20Medical%20Services%20Division&amp;ccrDocID=2485&amp;ccrDocName=6%20CCR%201015-4%20STATEWIDE%20EMERGENCY%20MEDICAL%20AND%20TRAUMA%20CARE%20SYSTEM&amp;subDocID=32587&amp;subDocName=CHAPTER%20TWO%20-%20STATE%20EMERGENCY%20MEDICAL%20AND%20TRAUMA%20CARE%20SYSTEM%20STANDARDS&amp;version=8">http://www.sos.state.co.us/CCR/Rule.do?deptID=16&amp;deptName=1000%20Department%20of%20Public%20Health%20and%20Environment&amp;agencyID=147&amp;agencyName=1015%20Health%20Promotion%20and%20Disease%20Prevention%20Services%20/%20Emergency%20Medical%20Services%20Division&amp;ccrDocID=2485&amp;ccrDocName=6%20CCR%201015-4%20STATEWIDE%20EMERGENCY%20MEDICAL%20AND%20TRAUMA%20CARE%20SYSTEM&amp;subDocID=32587&amp;subDocName=CHAPTER%20TWO%20-%20STATE%20EMERGENCY%20MEDICAL%20AND%20TRAUMA%20CARE%20SYSTEM%20STANDARDS&amp;version=8</a> |

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| District of Columbia | DC Municipal Regulations: Title 22, Chap 28, §22-2800 and § 22-2818 | Requires that Level I pediatric trauma centers ensure prompt transfer between facilities and have transfer agreements with other hospitals acting as receiving facilities and allows Level II pediatric trauma centers to ensure the prompt transfer between facilities and to have transfer agreements as transferring and receiving facilities | Not available on the Internet.  |
| Hawaii               | Code of Hawaii Rules: Title 11, Chap 72, Subchap 3, § 11-72-21      | Requires that there be appropriate treatment, triage, and transfer protocols for emergency management of seriously ill patients for use by all acute care facilities and specialty physicians in the area of pediatrics  | <a href="http://gen.doh.hawaii.gov/sites/har/AdmRules1/11-72.htm#sec_21">http://gen.doh.hawaii.gov/sites/har/AdmRules1/11-72.htm#sec_21</a> |

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| <p>Illinois</p>          | <p>Illinois Administrative Code:(1) Title 77, Part 515, Subpart B, § 515.220; (2) Title 77, Part 515, Subpart C, § 515.445; (3) Title 77, Part 515, Subpart J, § 515.4000</p> | <p>Requires that (1) the EMS Medical Directors portion of an EMS Regional Plan address protocols for inter-System/inter-Region patient transports, including protocols for pediatric patients and pediatric patients with special health care needs; (2) the Department of Public Health establish guidelines for referring children to the appropriate emergency treatment facility and guidelines and protocols for hospital facilities encompassing all levels of pediatric emergency medical services, hospital, and pediatric critical care services, including transfers and referrals; and an interhospital transfer system for critically ill or injured children; (3) a facility with Emergency Department Approved for Pediatrics recognition have transfer agreements with Pediatric Critical Care Centers (PCCC) and policies/procedures concerning transfer of critically ill and injured patients to PCCCs</p> | <p>(1)<br/>&lt;<a href="http://www.ilga.gov/commission/jcar/admincode/077/077005150B02200R.html">http://www.ilga.gov/commission/jcar/admincode/077/077005150B02200R.html</a>&gt;; (2)<br/>&lt;<a href="http://www.ilga.gov/commission/jcar/admincode/077/077005150C04450R.html">http://www.ilga.gov/commission/jcar/admincode/077/077005150C04450R.html</a>&gt;; (3)<br/>&lt;<a href="http://www.ilga.gov/commission/jcar/admincode/077/077005150J40000R.html">http://www.ilga.gov/commission/jcar/admincode/077/077005150J40000R.html</a>&gt;</p> |
| <p>Illinois (cont'd)</p> | <p>Illinois Administrative Code: (4) Title 77, Part 515, Subpart J, § 515.4010; (5) Title 77, Part 515, Appx M</p>  | <p>Requires that (4) a facility with Standby Emergency Department Approved for Pediatrics recognition have transfer agreements with Pediatric Critical Care Centers (PCCC) and policies/procedures concerning transfer of critically ill and injured patients to PCCCs; and establishes (5) interfacility pediatric trauma and critical care consultation and/or transfer guidelines</p>   | <p>(4)<br/>&lt;<a href="http://www.ilga.gov/commission/jcar/admincode/077/077005150J40100R.html">http://www.ilga.gov/commission/jcar/admincode/077/077005150J40100R.html</a>&gt;; (5)<br/>&lt;<a href="http://www.ilga.gov/commission/jcar/admincode/077/07700515ZZ9996mR.html">http://www.ilga.gov/commission/jcar/admincode/077/07700515ZZ9996mR.html</a>&gt;</p>  |

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| Iowa          | Iowa Administrative Code: 481 Inspections and Appeals Department, Chap 51, § 481-51.34  | Requires that all hospitals providing pediatric care have written protocols for transfer of pediatric patients in the event the hospital does not have capability to provide care for these patients   | <a href="http://search.legis.state.ia.us/NXT/gateway.dll/lowaState/iac_4/a481/c51/iac_a481_c51_r34v4.pdf">http://search.legis.state.ia.us/NXT/gateway.dll/lowaState/iac_4/a481/c51/iac_a481_c51_r34v4.pdf</a>  |
| Maryland      | Code of Maryland Regulations: (1) Title 30, Subtitle 08, Chap 01; § 30.08.01.03; (2) Title 30, Subtitle 08, Chap 08, § 30.08.08.03; (3) Title 30, Subtitle 08, Chap 08, § 30.08.08.20 | Requires that (1) the Maryland Institute for Emergency Medical Services Systems write and periodically review interfacility transfer criteria for pediatric (trauma) patients, (2) an emergency department that is not located in a designated Level I pediatric trauma center have a designated person who addresses the quality improvement issues for the initial stabilization and transfer of pediatric trauma patients and that hospitals have protocols that are written to direct the organized and safe intrahospital and interhospital transports of pediatric trauma patients, and (3) a Level I pediatric trauma center write, distribute, and monitor for quality interhospital transfer protocols and have written transfer agreements with specialty and pediatric rehabilitation centers | (1)<br>< <a href="http://www.dsd.state.md.us/comar/30/30.08.01.03.htm">http://www.dsd.state.md.us/comar/30/30.08.01.03.htm</a> >; (2)<br>< <a href="http://www.dsd.state.md.us/comar/30/30.08.08.03.htm">http://www.dsd.state.md.us/comar/30/30.08.08.03.htm</a> >; (3)<br>< <a href="http://www.dsd.state.md.us/comar/30/30.08.08.20.htm">http://www.dsd.state.md.us/comar/30/30.08.08.20.htm</a> > |
| Massachusetts | Code of Massachusetts Regulations: Title 105, Chap 130, § 130.761 and § 130.851   | Requires that all hospitals providing emergency care for pediatric patients have written policies and procedures for the transfer of pediatric patients to other facilities and that designated trauma centers (including pediatric trauma centers) enter into transfer agreements and provide consultation to lower level trauma centers and/or hospitals that are not designated trauma centers  | <a href="http://www.mass.gov/Eeohhs2/docs/dph/regs/105cmr130.pdf">http://www.mass.gov/Eeohhs2/docs/dph/regs/105cmr130.pdf</a>  |

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| Michigan       | Michigan Administrative Code: Department of Community Health, Bureau of Health Policy, Planning and Access, EMS and Trauma Services Section, Statewide Trauma System, Part 1, R 325.131 and R 325.137 | Requires that the Department of Community Health develop protocols which are established and adopted by local medical control for the inter-facility transfer of pediatric trauma patients, allows each trauma region to develop their own such protocols, and requires that trauma centers maintain such protocols | <a href="http://www.state.mi.us/orr/emi/admincode.asp?AdminCode=Single&amp;Admin_Num=32500125&amp;Dpt=&amp;RngHigh=32599408">http://www.state.mi.us/orr/emi/admincode.asp?AdminCode=Single&amp;Admin_Num=32500125&amp;Dpt=&amp;RngHigh=32599408</a>   |
| New Jersey     | New Jersey Administrative Code: (1) Title 8, Chap 43G, Subchap 12, § 8:43G-12.2; (2) Title 8, Chap 43G, Subchap 22, § 8:43G-22.2  | Requires that (1) an emergency department have transfer protocols that govern interhospital transfers of pediatric patients and (2) a hospital pediatric service have an emergency transfer policy which specifies mechanisms for transport of pediatric patients requiring specialized or intensive care services  | <a href="http://www.michie.com/newjersey/lpext.dll?f=templates&amp;fn=main-h.htm&amp;cp=">http://www.michie.com/newjersey/lpext.dll?f=templates&amp;fn=main-h.htm&amp;cp=</a>   |
| New Mexico     | New Mexico Administrative Code: Title 7, Chap 27, Part 7 § 7.27.7.8   | Requires that the Injury Prevention and EMS Bureau approve and periodically review statewide and regional inter-facility transfer criteria for pediatric trauma patients with the advice of the Trauma Advisory Committee   | <a href="http://www.nmcpr.state.nm.us/NMAC/parts/title07/07.027.0007.htm">http://www.nmcpr.state.nm.us/NMAC/parts/title07/07.027.0007.htm</a>   |
| New York       | New York Codes, Rules and Regulations: Title 10, Chap V, Subchap C, Art 1, Part 708, § 708.5  | Requires that emergency departments and emergency services have written protocols and agreements for the transfer of pediatric patients who cannot receive definitive care at the receiving hospital  | <a href="http://government.westlaw.com/linkedslice/default.asp?SP=nycrr-1000">http://government.westlaw.com/linkedslice/default.asp?SP=nycrr-1000</a>   |
| North Carolina | North Carolina Administrative Code: Title 10A, Chap 13, Subchap P, § 13P.1103   | Requires that a Regional Advisory Committee oversee the development, implementation, and evaluation of a regional trauma system that includes transfer agreements with pediatric specialty care facilities that outline mutual understandings between facilities to transfer/accept certain patients                | <a href="http://reports.oah.state.nc.us/ncac/title%2010a%20-%20health%20and%20human%20services/chapter%2013%20-%20nc%20medical%20care%20commission/subchapter%20p/10a%20ncac%2013p%20.1103.html">http://reports.oah.state.nc.us/ncac/title%2010a%20-%20health%20and%20human%20services/chapter%2013%20-%20nc%20medical%20care%20commission/subchapter%20p/10a%20ncac%2013p%20.1103.html</a> |

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| North Dakota | North Dakota<br>Administrative Code: Title 33, Art 38, Chap 1, § 33-38-01-13 and § 33-38-01-14  | Requires that Level IV and Level V trauma centers have transfer agreements as the transferring facility to a level II trauma center for pediatric trauma management   | <a href="http://www.legis.nd.gov/information/acdata/pdf/33-38-01.pdf">http://www.legis.nd.gov/information/acdata/pdf/33-38-01.pdf</a>  |
| Tennessee    | Rules of the Tennessee Department of Health and Tennessee Department of Environment and Conservation: (1) Chap 1200-8-14, § 1200-8-14-.03; (2) Chap 1200-8-30 | Requires that (1) Level II trauma centers appropriately utilize a current signed transfer agreement with a hospital with a Pediatric Intensive Care Unit; (2) Basic Pediatric Emergency Facilities, Primary Pediatric Emergency Facilities, General Pediatric Emergency Facilities, and Comprehensive Regional Pediatric Centers have transfer agreements; and sets various standards for such agreements | (1) < <a href="http://www.tennessee.gov/sos/rules/1200/1200-08/1200-08-14.pdf">http://www.tennessee.gov/sos/rules/1200/1200-08/1200-08-14.pdf</a> >; (2) < <a href="http://www.tennessee.gov/sos/rules/1200/1200-08/1200-08-30.pdf">http://www.tennessee.gov/sos/rules/1200/1200-08/1200-08-30.pdf</a> > |
| Washington   | Washington<br>Administrative Code: Title 246, Chap 246-976, § 247-976-750   | Requires that a facility with a designated pediatric trauma care service have interfacility transfer guidelines and agreements  | <a href="http://apps.leg.wa.gov/WAC/default.aspx?cite=246-976-750">http://apps.leg.wa.gov/WAC/default.aspx?cite=246-976-750</a>  |