Best Practice / Preparing for a Survey

Board of Trustees Policies
☐ Designated personnel qualified to perform MSEs
☐ General EMTALA compliance document
☐ Board responsibility for quality and compliance

Contracts
☐ On-call obligations

Medical Staff Bylaws or Rules and Regulations
☐ General policy of compliance
☐ On-call responsibility
☐ Participation in quality assurance

Hospital-Wide EMTALA Policies
☐ Medical screening policies
☐ Obstetrics policies on medical screening
☐ Triage policies (ER and OB)
☐ Transfer policies (ER and OB)
☐ Movement of patients on campus
☐ Transfer acceptance policies
☐ Capacity Policy
☐ Diversion Policy
☐ Reporting of possible EMTALA violations
☐ Record retention for EMTALA
☐ Registration policies (left without being seen)
☐ Performance Improvement Policies
☐ Performance Improvement Indicators
☐ Forms to facilitate EMTALA compliance

Department Policies
☐ Check for conflicts with general EMTALA policy

Site-Specific Policies
☐ Off-site locations that are covered by EMTALA
☐ Medical screening requirements, capabilities, and procedures for off-site locations
☐ Emergency Response and Transfer Policy

Educational Components
☐   General medical staff orientation to EMTALA policies and
      procedures
☐   New medical staff orientation to EMTALA policies and procedures
☐   Nursing staff orientation to EMTALA policies and procedures
☐   Inservice requirements for EMTALA refreshers

Physical Compliance
☐   Placement of required signs

References
Bitterman, Robert, Providing Emergency Care Under Federal Law:
      EMTALA, 2000, American College Emergency Physicians
Centers for Medicare and Medicaid Services, Survey and Certification
      Memorandums, www.cms.hhs.gov