

State of Iowa Department of Corrections

Adult Correctional Institutions

Policy and Procedures

Policy Number: HSP-611

Applicability: DOC

Policy Code: Public Access

Iowa Code Reference: 225.28, 904.201

Chapter 6: Health Services

Sub Chapter: Acute/Specialty Services

Related DOC Policies: N/A

Administrative Code Reference: N/A

Subject: Health Services Available from External Sources

ACA Standards: 5-ACI-6A-04, 5-ACI-6A-05, 5-ACI-6A-06

Responsibility: Dr. Jerome Greenfield

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Authority:

1. PURPOSE

To outline procedures in obtaining emergency services and/or specialty services for patients.

2. POLICY

It is the policy of the Iowa Department of Corrections (IDOC) to provide patients access to emergency services and specialty medical services not available within the institution.

3. DEFINITIONS - See IDOC Policy AD-GA-16 for Definitions.

4. PROCEDURE

Each institution shall develop policies and procedures detailing:

- A. A primary source of hospitalization for definitive care to the seriously ill or injured patient. For most correctional facilities, these services are received at the University of Iowa Hospitals and Clinics (UIHC).

A fax machine is available in the UIHC Emergency Treatment Center to facilitate timely and convenient communication. The following fax address and telephone number is available for use by DOC staff for patients being transferred to the UIHC by ground or air ambulance: University of Iowa Hospitals and Clinics, Emergency Treatment Center, Iowa City, IA 52240, **Telephone number: (319) 356-2233, Fax number: (319) 356-0533**

- B. The method for providing specialized clinics and/or services, off site and per telemedicine services.
- C. Unless written documentation indicates otherwise, health conditions should receive off-site medical attention in decreasing priority as listed below.

Priorities established for off-site referrals:

1. All potentially life-threatening conditions, i.e., major trauma, cerebral vascular accident, myocardial infarction, onset of labor, major respiratory obstruction.
 2. All conditions or trauma associated with significant potential for loss of limb or major body function, e.g., vision.
 3. High-risk pregnancy.
 4. Psychotic mental conditions with evidence that the patient is imminently dangerous to self or others. After appropriate notification/consultation, (including the on-call psychiatrist), the Iowa Medical and Classification Center (IMCC) should be utilized.
- D. Methods for assuring adequate patient follow up upon return from off-site evaluation and/or treatment.

1. DOC patients receive inpatient medical surgical services and specialty outpatient services at the University of Iowa Hospitals and Clinics as authorized in **Chapter 255 (Section 255.28), The Code of Iowa**, "Medical and Surgical Treatment of Indigent Persons."
2. Referring medical/dental/nursing/optometry staff must provide appropriate referral information using DOC approved form **HSF-301D, Medical Referral**.

E. Utilization of Medical Surgical Telemedicine Services

1. Except for emergency conditions, available telemedicine consultation services should be utilized for initial specialty consultations. Medical referral forms are uploaded in University of Iowa Care Link system.
2. Follow-up consultation after receiving off-site inpatient or outpatient health services, if available.

The electronic medical record of patients hospitalized or receiving healthcare in a non-DOC setting for more than one week must minimally reflect a weekly entry documenting the patient's status.