

# MEDCOM Transfer Process to the USA Institute for Surgical Research (USAISR) Burn Unit for patients with life/limb threatening dermatological conditions (Stevens-Johnson Syndrome (SJS), Toxic Epidermal Necrolysis Syndrome (TENS), etc.).

*v\_ October 2019, Final*

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Requests to MEDCOM for inter-facility transfer of patients with suspected/confirmed SJS and/or TENS will follow the process outlined in this document. The goal of the process is to secure transfer of this patient population to a facility best capable of providing optimal care. While the volume of these patients is relatively low (appropriately 36/year), they can be among the most challenging to transfer.

The USAISR would like to care for patients with confirmed (Biopsy proven) SJS/TENS. It is recognized that transferring facilities may not have this capability readily available. In order to facilitate the care of these patients and the USAISR Burn Surgeon does not identify clinical features consistent with SJS/TENS, Methodist and North Central Baptist Trauma Services will assist in the confirmation and facilitate transfer as required. The MEDCOM Advisory Group (MAG), with participation from UH and SAMMC Trauma Medical Directors, the ISR Burn Unit Medical Director, and other committee members have developed this protocol to provide guidance and standardization for transfers of patients with SJS and/or TENS.

These are the functional steps for the success of this protocol:

1. USAISR Burn Unit will receive the initial consultation request and evaluate each transfer request on its own merits with the transferring physician. Patients originating outside of TSA-P should have a confirmation biopsy prior to transfer.
2. If in the opinion of the Burn Unit surgeon: the patient has biopsy confirmed or clinical symptoms consistent with SJS/TENS where biopsy is not possible, the patient will be routed to the Burn Unit at SAMMC. If after transfer to the Burn Unit, the condition proves to not be SJS/TENS or a condition that will benefit from Burn Unit care, the patient will immediately be routed through MEDCOM back to the referring center, or to the trauma services at Baptist Health System or Methodist Healthcare System.
  - a. USAISR should contact MEDCOM to initiate transfer to L3
  - b. MEDCOM should determine the initial facility (that originally transferred to USAISR); if MHS then initiate transfer to Methodist Hospital; all others initiate transfer to North Central Baptist.
3. The patient does not have signs and symptoms consistent with SJS/TENS or a condition that will benefit from Burn Unit Care, Methodist and North Central Baptist Trauma Services agree to accept patient in transfer through MEDCOM. If at any point, the patient's condition transforms to one of tissue loss, the patient will be routed through MEDCOM for the Burn Unit transfer process above.

**For 24-hour help contact MEDCOM at (210) 233-5815.** Questions or concerns regarding this process can be directed to Eric Epley, Executive Director, STRAC, at [eric.epley@strac.org](mailto:eric.epley@strac.org) or (210) 602-4322.

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# MEDCOM Transfer Process for SJS/TENS (suspected or confirmed)

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