



# Inter HealthCare Transfer Form

LCC IPC Guidance

Review December 2020

[infectionprevention@lancashire.gov.uk](mailto:infectionprevention@lancashire.gov.uk)



[www.lancashire.gov.uk](http://www.lancashire.gov.uk)



Is the patient / client aware of their colonisation / infection status? Yes  / No

If no, please give reason:

Has patient received information about their status? (Patient leaflet) Yes  / No

Has ambulance service been informed? Yes  / No

*This should be done when booking the transfer.*

If no, please give reason.

Name of staff member completing form:

Name:

Contact number:

Date completed: