

**HACKETTSTOWN REGIONAL MEDICAL CENTER  
ADMINISTRATIVE POLICY MANUAL**

**WHISTLE-BLOWER PROTECTION – EMTALA**

<b>Effective Date:</b>	<b>04/02</b>	<b>Policy No:</b>	<b>AD119</b>
<b>Cross Referenced:</b>		<b>Origin:</b>	<b>Chief Privacy Office</b>
<b>Reviewed Date:</b>	<b>08/07, 05/10</b>	<b>Authority:</b>	<b>Chief Operating Officer</b>
<b>Revised Date:</b>	<b>05/10</b>	<b>Page:</b>	<b>1 of 1</b>

**PURPOSE**

To delineate the EMTALA provisions to protect physicians and employees from retaliation for reporting violations.

To ensure accordance with the Federal provisions of EMTALA.

**POLICY**

It shall be the policy of Hackettstown Regional Medical Center not to sanction or initiate adverse action against physicians or employees for: 1) refusing to authorize a transfer of an individual who has an emergency medical condition that is unstable and/or 2) reporting to the CMS and/or State Department of Health and Senior Services a violation of the EMTALA requirements.

Employees and members of the medical staff are required to report directly to CMS or the Department of Health and Senior Services any time they have reason to believe that they may have received an “inappropriate” patient transfer; i.e., no prior notification from a transferring facility, a transfer that arrives at a receiving hospital in a deteriorated condition and no documentation.

An individual who attempts to initiate retaliatory action against a physician or employee shall be subject to disciplinary action as defined by the Human Resource Department.

In the event an employee or physician believes that they have personally been penalized for refusing to authorize a patient transfer or failed to report an inappropriate transfer from another facility, he or she should report the incident to his or her manager. Physicians who feel they have been adversely affected should report the incident to the Vice-president of the Medical Staff (Director of Medical P.I.) or Chief Medical Officer

The manager shall assume responsibility for directly communicating the incident to his or her administrative director and Chief Medical Officer. All written communication should be routed in a manner that permits confidentiality of the informant.

The appropriate administrative director or Chief Medical Officer shall determine whether the circumstance warrants a review and full investigation. In the event an investigation is initiated, it shall be conducted in a timely manner by the administrative director or designee. All names or parties involved shall be kept confidential.

**REFERENCE: AD111 -**

<https://intranet.adventisthealthcare.com/policiesandprocedures/HRMC/Admin%20-%20Administration/AD119.pdf>