Dear Editor,

We read the publication on ‘Physician attendance during interhospital patient transfer in Ontario: 2005-2015’ with great interest. Wonnacott et al. concluded that ‘physician-attended ambulance transfer in Ontario is largely provided by family physicians in suburban to remote settings’. We would like to share some ideas on this issue. There is no doubt that having a physician attend during the interhospital transfer is useful. Nevertheless, the decision to transfer has to be carefully considered. In remote areas, there might be a limited number of physicians and it might not be possible for a physician to attend the patient transfer. In our setting, i.e., in a developing Asian country, it is usually not possible to have a physician attend during the interhospital transfer in remote areas. Generally, nurses play this role. In a worst case scenario, the facilities for transfer of patients are limited and the ambulance is sometimes lacking. To overcome the problem, a good plan for implementing a good transfer system is required. Training of specific personnel in the transfer process might be a good management tool for the lack of facilities and workload of medical personnel in remote areas in a developing country.

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REFERENCES