

**CENTRAL CALIFORNIA**  
**EMERGENCY MEDICAL SERVICES**  
A Division of the Fresno County Department of Public Health

Manual	Emergency Medical Services Administrative Policies and Procedures	Policy Number 322
Subject	STEMI Receiving Center and STEMI Referring Hospital Designation	Page 1 of 2
References	California Code of Regulations Title 22. Social Security Division 9. Prehospital Emergency Medical Services Chapter 7.1. STEMI Critical Care System	Effective 09/20/23

I. POLICY

ST Elevation Myocardial Infarction (STEMI) Receiving Centers and STEMI Referring Hospitals are designated by the Central California EMS Agency (CCEMSA) according to criteria defined in the State of California Code of Regulations and CCEMSA Policies and Procedures.

II. DEFINITIONS

- A. STEMI Receiving Center (SRC) is a licensed general acute hospital that meets the minimum hospital STEMI care requirements by the State of California, CCEMSA EMS Policies and Procedures, and is able to perform primary percutaneous coronary intervention (PCI), 24 hours a day, 7 days a week, 365 days a year.
- B. STEMI Referring Hospital (SRH) is a licensed general acute care hospital that meets the minimum hospital STEMI care requirements by the State of California, CCEMSA EMS Policies and Procedures, 24 hours a day, 7 days a week, 365 days a year.

III. PROCEDURE

- A. The EMS Agency shall develop and update a plan for the provision of STEMI care within the four-county region. This plan shall minimally address the provision of STEMI care services, triage mechanisms for patient routing, the type of STEMI hospitals needed for the EMS System, and the evaluation process.
- B. Any hospital wishing to be designated as a SRC/SRH shall notify the EMS Agency, in writing, of its intent to seek designation. This documentation shall include the hospital's justification, plan, and anticipated timetable for implementation.
- C. Hospitals shall be designated by the EMS Agency as a SRC/SRH to receive prehospital STEMI patients.
- D. Prior to designation as a SRC/SRH, the hospital shall submit to the EMS Agency:

Approved By	Revision
EMS Director <b>Daniel J. Lynch</b> (Signature on File at EMS Agency)	<b>09/20/2023</b>
EMS Medical Director <b>Jim Andrews, M.D.</b> (Signature on File at EMS Agency)	

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1. The Application for SRC/SRH Designation with required documents.

2. Documentation that the SRC/SRH Criteria in EMS Policy #321 has been met.

- E. Applications shall be reviewed for the compliance with Central California EMS Agency's policies. The Regional Medical Control Committee will be consulted for its recommendation.
- F. After review of the submitted application and documents, the EMS Agency will conduct an on-site review of the hospital as outlined in the Application for STEMI Receiving Center or STEMI Referring Hospital Designation.
- G. Upon the completion of a satisfactory review, the EMS Agency will designate the hospital as either a STEMI Receiving Center or STEMI Referring Hospital.
- H. In the event that the hospital fails to meet the criteria for designation, the EMS Agency may elect to issue a conditional designation that will be followed within six (6) to twelve (12) months by another evaluation of the deficient areas.
- I. Upon the satisfactory completion of the second evaluation, the EMS Agency will authorize full designation of the SRC/SRH.
- J. If the second evaluation is unsatisfactory, the EMS Agency will deny designation. Once deficiencies are corrected, reapplication may occur following the procedure outlined in this Section.
- K. The hospital requesting designation and the EMS Agency will enter into a written agreement for designation of the SRC/SRH.

#### IV. PROCEDURE FOR RE-EVALUATION OF A STEMI CENTER'S STATUS

- A. The EMS Agency shall evaluate the designated SRC/SRH's status every three years for contractual compliance and compliance with State Regulations and Local policies.

#### V. PROCEDURE FOR DE-DESIGNATION

- A. Failure by a hospital to comply with State and local policies may result in revocation of the SRC/SRH designation.
- B. Failure for a hospital to provide an adequate quality of care, as identified through medical audit and PI process, may result in revocation of their SRC/SRH designation.
- C. Failure of a hospital to provide required or requested data for system analysis or case review or inadequate participation in the CQI process may result in revocation of their SRC/SRH designation.