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 553 Page 1 of 2
Subject	ALS Interfacility Transports	
References	Title 22 of the California Code of Regulations	Effective 04/18/83

I. POLICY

ALS personnel (EMT-II or EMT-Paramedic) may function within their locally approved scope of practice during an interfacility transport in accordance with established procedures.

II. PROCEDURE

A. Response Information

The dispatcher of the responding ALS unit shall obtain the following information from the sending facility and relay the information to the responding ALS unit:

- 1. Patient's location (emergency department, ICU, etc.); and
- 2. Name of the sending physician; and
- 3. Name of receiving physician; and
- 4. Patient destination; and
- 5. Patient chief complaint; and
- 6. Description of ALS skills required during transport (EKG, IV drips, etc.); and

B. EMS Transport Unit Arrival at Sending Facility

- 1. Obtain a brief history from the sending physician or nursing staff,
- 2. Complete a <u>brief</u> assessment, including vital signs and history.
- 3. Information required by EMS personnel before leaving on the Interfacility Transfer:
 - a. Name of receiving MD,
 - b. Name of sending MD,

Approved By EMS Division Manager	Daniel J. Lynch (Signature on File at EMS Agency)	Revision
EWIS DIVISION Manager	(Signature on The at EWIS Agency)	11/14/2017
EMS Medical Director	Jim Andrews, M.D. (Signature on File at EMS Agency)	
ENIS Wedicar Brector	(Signature on the at Elvis Agency)	

Subject ALS Interfacility Transfers	Policy Number 553
-------------------------------------	----------------------

- b. Name of person who made arrangements at the sending facility,
- c. Hospital location where patient is to be transported, (i.e. Emergency Room, ICU, Room #, etc.)
- d. Name of RN or person who is expecting the transfer at accepting facility.
- e. Emergency Transports (Code 3) require a call-in to the appropriate Base Hospital prior to departing the sending hospital. For these patients the MICN or Base Hospital Physician will contact the receiving facility to confirm transport arrangements.

<u>NOTE</u>: If the sending physician is present and orders immediate transport without patient assessment or Base Hospital contact, the ALS person shall initiate transport, complete the patient assessment and make Base Hospital contact enroute. The ALS person shall submit a Quality Improvement Report to the Base Hospital within 72 hours.

C. EMS Transport Unit Call-in Requirements to the Receiving Facility

<u>Immediately</u> after departing the sending facility the EMS Transport Unit will provide an ETA call-in to the receiving facility only if indicated (Big 4 - backboard, restraints, active labor, or patients on oxygen). This is to assist the receiving facility in being better prepared in accepting the patient upon arrival. If the patient does not meet the criteria for an ETA call-in, no call-in is necessary, unless for consultation or further orders, which would require a Standard Call-in. (Refer to EMS Policy 530.02 – Call-in Format for Patients that Require Call-ins)

<u>NOTE</u>: This only applies when transporting within the Central California EMS Region. When transporting outside Fresno, Kings, Madera, and Tulare Counties no call-in is necessary.

D. Patients Requiring Treatment which Exceeds the ALS Person's Scope of Practice

If the patient's care needs exceed the scope of practice of the available EMS personnel, the transferring physician will arrange for the patient to be accompanied by a physician or registered nurse along with any other personnel, equipment or supplies necessary for patient care. In these cases, while assisting the M.D. or R.N. with patient care, EMS personnel must function within their scope of practice. EMS Personnel in Fresno/Kings/Madera/Tulare Counties shall not perform any skill that is not identified in EMS Policy #119, #129, or #139 even if they are directly supervised by a physician or registered nurse.

If the sending facility is unable to provide a physician or registered nurse for transport and the patient's treatment exceeds the prehospital personnel's scope of practice, the Base Hospital Physician, in life-threatening situations, may order transport consistent with Policy #139. The ALS person shall file a Quality Improvement Report to the EMS Agency within 72 hours.

E. Interfacility Transport between Two Base Hospitals

When an interfacility transport occurs between two Base Hospitals, medical control shall be maintained through the sending facility (Base Hospital).

F. Out-of-County Interfacility Transports

Refer to EMS Policy #552 (Out-of-County Transports and Instant/Mutual Aid Responses by ALS personnel).