DETERMINATION OF TRANSPORT TO AN APPROPRIATE FACILITY

I. AUTHORITY:
California Health and Safety Code, Division 2.5, 1797.220; 1798 (a), (b)

II. APPLICATION:
This policy describes considerations, including patient, caretaker, and law enforcement 51-50 based requests, for determination of Orange County EMS (OCEMS) basic life support (BLS) or advanced life support (ALS) unit transport of patients to an appropriate receiving facility, for patients transported by an Orange County EMS (OCEMS) basic life support (BLS) or advanced life support (ALS) unit.

III. DEFINITIONS:

**ERC** means emergency receiving center approved by OCEMS.

**51-50 Hold** means a patient is legally detained by law enforcement or a Health Care Agency approved mental health provider because they are a physical threat to themselves or others.

**Diversion** means formal notification of the EMS system through ReddiNet® by an ERC that it is not physically or medically safe for that facility to accept further patients.

**Specialty Center** means OCEMS approved facility that provides a specific medical service (for example: trauma center, emergency mental health center).

**Transported patient** means a patient transported by BLS or ALS ambulance.

**ALS Escorted** patient means a patient transported and accompanied by a paramedic.

IV. CRITERIA:

A. A BLS or ALS transported patient not expressing a facility preference (section IV) shall be transported from the scene of the incident to the closest (within the shortest transport time) appropriate hospital showing open on ReddiNet®.

B. ALS or BLS crews will provide the receiving hospital staff with a verbal report and completed prehospital care report per OCEMS policy 300.10. The PCR shall be completed and available posted electronically or provided in paper form prior to leaving the ERC or specialty center hospital.

C. A physician at the scene may assume full responsibility and must accompany the patient to the receiving hospital per the “Physician at Scene” policy (reference OCEMS P/P 310.15).

V. PATIENT OR CAREGIVER REQUESTS:

ERC destination preference expressed by a patient or a patient's legal guardian or other persons lawfully authorized to make health care decisions for the patient shall be honored unless:

A. Such request is not medically in the best interest of the patient as determined by OCEMS Standing Order or the Base Hospital physician; or

B. The preferred facility is beyond a reasonable transport time (estimated 20 minutes) from the incident scene; or

OCEMS Policy #310.10  Effective Date: April 1, 2014
C. The preferred facility has declared it is on Emergency Department Saturation diversion status (by ReddiNet®). This exception to preferred transport destination does not apply when a patient is scheduled to bypass the Emergency Department for direct admission to an available hospital in-patient bed or diagnostic site (e.g. CT Scan, MRI, GI laboratory).

Specially hospital center transport destination to a trauma, cardiovascular center, stroke-neurology receiving center, burn, and replant center is determined by an OCEMS Base Hospital.

VI. CRITERIA

D. A BLS or ALS transported patient not expressing a facility preference (section IV) shall be transported from the scene of the incident to the closest (within the shortest transport time) appropriate hospital showing open on ReddiNet®.

E. ALS or BLS crews will provide the receiving hospital staff with a verbal report and completed prehospital care report per OCEMS policy 300.10. The PCR should be completed and available prior to leaving the hospital.

F. A physician at the scene may assume full responsibility and must accompany the patient to the receiving hospital per the "Physician at Scene" policy (reference OCEMS P/P 310.15).

VI. LAW ENFORCEMENT OR MENTAL HEALTH PROVIDER (51-50 HOLD) REQUESTS

A patient being detained under a 51-50 hold shall be transported to the ERC or OCEMS approved emergency mental health center requested by law enforcement or a mental health provider unless:

A. Such request is not medically in the best interest of the patient as determined by OCEMS Standing Order or the Base Hospital; or

B. The preferred facility is beyond a reasonable transport time (estimated 20 minutes) from the incident scene; or

C. The preferred facility has declared it is on Emergency Department Saturation diversion status (by ReddiNet®). This exception to preferred transport destination does not apply when a patient is scheduled to bypass the Emergency Department for direct admission to an available in-patient bed or diagnostic site (e.g. CT Scan, MRI, GI laboratory).

Specially center transport destination to a trauma, cardiovascular center, stroke-neurology receiving center, burn, and replant center is determined by an OCEMS Base Hospital.

Approved:

______________________________  ________________________________
OCEMS Medical Director        OCEMS Administrator

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Page 3 of 3