

COUNTY OF VENTURA HEALTH CARE AGENCY	EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: STEMI Receiving Center (SRC) Standards and STEMI Referral Hospital (SRH) Standards		Policy Number 430
APPROVED: Administration:  Steven L. Carroll, Paramedic		Date: July 1, 2025
APPROVED: Medical Director:  Daniel Shepherd, M.D.		Date: July 1, 2025
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- I. PURPOSE: To define the criteria for designation as a STEMI Receiving Center in Ventura County.
- II. AUTHORITY: Health and Safety Code, Division 2.5, Sections 1798, 1798.101, 1798.105, 1798.2 and California Code of Regulations, Title 22, Section 100106.02, 100149.01 and 100149.02.
- III. DEFINITIONS: Refer to California Code of Regulations, Title 22, Chapter 6.2, Article 4.
- III. POLICY:
- A. A STEMI Receiving Center (SRC), approved and designated by Ventura County EMS shall meet the following requirements:
1. All the requirements of a Receiving Hospital in VCEMS Policy 420.
 2. All the requirements of an SRC in VCEMS Policy 440.
 3. The hospital shall have established protocols for triage, diagnosis, and Cath lab activation following field notification.
 4. The hospital shall have a single call activation system to activate the Cardiac Catheterization Team directly.
 5. Written protocols shall be in place for the identification of STEMI patients.
 - a. At a minimum, these written protocols shall be applicable in the ICU/Coronary Unit, Cath lab, and the Emergency Department.
 6. The hospital shall be available for treatment of STEMI patients 24 hours per day, 7 days a week, 365 days per year.
 7. The hospital shall have a process in place for the treatment and triage of simultaneous arriving STEMI patients.

8. SRCs shall comply with the requirements for an annual minimum volume of procedures (25) required for designation by VCEMS.
 9. The hospital shall have a STEMI program manager and a STEMI medical director.
 10. The hospital shall have job descriptions and organizational structure clarifying the relationship between the STEMI medical director, STEMI program manager, and the STEMI team.
 11. Operate a cardiac catheterization lab licensed by the Department of Health Services and approved for emergency percutaneous coronary interventions.
 12. A STEMI receiving center without cardiac surgery capability on-site shall have a written transfer plan and agreements for transfer to a facility with cardiovascular surgery capability.
 13. The hospital shall maintain daily STEMI team and Cardiac Catheterization team call rosters
 14. Have policies for patients to receive emergent angiography or emergent fibrinolysis, based on physician decisions for individual patients.
 15. The hospital shall participate in the local EMS agency quality improvement processes related to a STEMI critical care system.
 16. The hospital shall submit their data to the STEMI Registry System by the 15th of each month for the previous month patients.
 17. Will accept all ambulance-transported patients if the interpretation on the monitor meets the manufacturer guidelines for a POS STEMI ECG, except when on internal disaster or no cardiac catheterization lab is available, regardless of ICU/CCU or ED saturation status.
 18. Have policies and procedures that allow the automatic acceptance of any STEMI patient from a Ventura County Hospital upon notification by the transferring physician.
 19. The Cardiac Catheterization Team, including appropriate staff, shall be immediately available.
 20. Have policies in place for the transfer of STEMI patients.
- B. A STEMI Referral Hospital (SRH), approved and designated by Ventura County EMS shall meet the following requirements:
1. All the requirements of a Receiving Hospital in VCEMS Policy 420.
 2. All the requirements of an SRH in VCEMS Policy 440.

3. The hospital shall be available for treatment of STEMI patients 24 hours per day, 7 days a week, 365 days per year.
4. Written protocols shall be in place to identify STEMI patients and provide an optimal reperfusion strategy using fibrinolytic therapy.
5. The Emergency Department shall maintain a standardized procedure for the treatment of STEMI patients.
6. The hospital shall have a transfer process through interfacility transfer agreements and have pre-arranged agreements with EMS ambulance providers for rapid transport of STEMI patients to an SRC.
7. The hospital shall have a program to track and improve treatment of STEMI patients.
8. The hospital must have a plan to work with an SRC and VCEMS on quality improvement processes.

B. Designation

1. Application:
Eligible hospitals shall submit a written request for SRC or SRH approval to the VC EMS, documenting the compliance of the hospital with Ventura County SRC or SRH Standards.
2. Approval:
SRC or SRH approval or denial shall be made in writing by VCEMS to the requesting Hospital within two weeks after receipt of the request for approval and all required documentation.
3. VC EMS may deny, suspend, or revoke the approval of a SRC or SRH for failure to comply with any applicable policies, procedures, or regulations. Requests for review or appeal of such decisions shall be brought to the Ventura County Board of Supervisors for appropriate action.
4. The VCEMS Medical Director may grant an exception to a portion of this policy upon substantiation of need by the PSC that compliance with the regulation would not be in the best interests of the persons served within the affected area.
5. SRCs and SRHs shall be reviewed every three years.
 - a. SRCs or SRHs shall receive notification of evaluation from VCEMS.
 - b. SRCs or SRHs shall respond in writing regarding program compliance.

- c. On-site SRC or SRH visits for evaluative purposes may occur.
- d. SRCs or SRHs shall notify VCEMS by telephone, followed by a letter or email within 48 hours, of changes in program compliance or performance.