



Health & Social Services Department

Donald R. Rowe, Director

Public Health Division - Mental Health - Public Guardian
Adult and Child Services - Eligibility & Employment Services
Substance Abuse Services

Public Health Division
Thomas L. Charron, M.D., M.P.H.
Health Officer
Deputy Director Health and Social Services

EMERGENCY MEDICAL SERVICES
717-B Missouri Street
Fairfield CA 94533
(707) 421-6685
FAX (707) 421-6682

EMERGENCY MEDICAL SERVICES POLICY MEMORANDUM #5540

EFFECTIVE DATE: 5/26/93

APPROVED BY:

A handwritten signature of Thomas L. Charron.

THOMAS L. CHARRON, M.D., M.P.H., SOLANO COUNTY HEALTH OFFICER, EMS MEDICAL DIRECTOR

REVIEWED BY:

A handwritten signature of Allen J. Morini, D.O.

ALLEN J. MORINI, D.O., ASSISTANT EMS MEDICAL DIRECTOR

SUBJECT: IMMEDIATE REQUEST TO DISPATCH A BLS AMBULANCE FOR PATIENT TRANSFER

AUTHORITY: SOLANO COUNTY AMBULANCE ORDINANCE # 1457.; CALIFORNIA HEALTH & SAFETY CODE 1797.204, 1797.220

PURPOSE/POLICY:

To provide for the public health and safety of the citizens of Solano County by establishing standards for the dispatch of Basic Life Support (BLS) ambulance for patient transport under the care and direction of certified EMTs and to ensure that BLS ambulances are not inappropriately dispatched to life threatening emergencies.

BACKGROUND INFORMATION:

Based upon their familiarity with the patient's condition and the need to transport that patient to a higher level of care (acute care hospital), there are situations where private physicians may desire transport of the patient in a BLS ambulance; thus negating the initiation of an ALS response in the pre-hospital setting.

PROCEDURE:

The private physician (or his/her agent) may request a (BLS) ambulance to perform an unscheduled transport by adhering to the following procedure, thus establishing a mechanism for the private physician to have access to ambulances dedicated to the EMS system; but allows for clinical discretion in limiting costly ALS response and unnecessary medical services.

- I. *TO REQUEST A BLS AMBULANCE FOR IMMEDIATE TRANSPORT via CMED (or a private ambulance), the Health Care Professional must:*

- A. Establish that the patient is clinically stable within his/her pre-existing medical condition for immediate BLS ambulance transport. The health care professional requesting the immediate BLS transport shall provide the patient's vital signs (including, HR, B/P, & RR) and assurance that the patient will not need immediate pre-hospital ALS intervention until the patient arrives at his/her intended destination (the patient's MD wishes no ALS intervention and will verify that the patient's clinical status will not change until the next available BLS ambulance is dispatched). It is recognized that many patients under the care of a health care professional need transport via BLS ambulance and have long-term chronic illness or terminal disease associated with their need for immediate BLS transport. It is the responsibility of the medical professional requesting immediate BLS ambulance transport to determine that the patient condition does not require immediate pre-hospital ALS intervention.
 - B. Verbally assure the Dispatcher that the receiving facility has agreed to accept the patient, and all necessary information and paperwork are ready to accompany the patient. The Health Care Professional shall inform the Dispatcher that the transfer by BLS ambulance creates no medical hazard to the patient. The Dispatcher shall note the name of the Health Care Professional ordering an immediate BLS ambulance in his/her dispatch log.
- II. *IF ANY PART OF THIS INFORMATION IS UNAVAILABLE OR MISSING, THE EMERGENCY MEDICAL DISPATCHER (EMD) HAS THE RIGHT AND RESPONSIBILITY TO:***
- A. Dispatch an EMT-P ambulance to provide emergency care and transportation of the patient OR
 - B. Establish a three (3) way call with the Base Hospital Physician on duty at the Base Hospital designated for the area where the ambulance must respond to notify him/her of the case and the medical professional requesting a BLS ambulance. The final decision to respond an ALS or BLS ambulance rests with the Base Physician.
- III. *EMS calls where Physicians (or their agents) elect NOT to abide by this Policy , and initiate orders that prohibit the dispatch of an ALS ambulance, shall be subject to retrospective review by the EMS office to ascertain that a patient's clinical status did/did not deteriorate because the physician refused to comply with Federal and State "patient dumping laws." Any alleged violations of Local EMS Agency Transfer Protocols or Guidelines shall be evaluated by the Local EMS Agency. If the Local EMS Agency concludes that a violation has occurred, it shall take whatever corrective action it deems appropriate within it's jurisdiction, including referrals to either State Department of Health Services or the District Attorney under Section 1798.206 and 1798.208.***
