OPTIONAL SUPPLEMENTAL PROTOCOL TRANSPORT TO FREESTANDING EMERGENCY MEDICAL FACILITY (BASE STATION OR NON-BASE STATION)

Z. TRANSPORT TO FREESTANDING EMERGENCY MEDICAL FACILITY (BASE STATION OR NON-BASE STATION)

1. PURPOSE

The purpose of this protocol is to define the type of patient an EMS service may transport to a MIEMSS-designated freestanding emergency medical facility.

2. INDICATIONS

A jurisdiction may allow transport of a patient, who meets one or more of the following indications, to a freestanding emergency medical facility.

- a) A stable Priority 2, 3, or 4 patient as outlined in *The Maryland Medical Protocols* for *EMS* who does not need a time-critical intervention
- b) Priority 1 patient with an unsecured airway or in extremis, who requires stabilization beyond the capability of the EMS crew (e.g., cardiac or respiratory arrest)

3. CONTRAINDICATIONS

Except as provided in INDICATIONS, above, the following patients shall not be transported to a freestanding emergency medical facility.

- a) Any patient meeting the criteria for transport to a Trauma Center or Specialty Referral Center as defined in *The Maryland Medical Protocols for EMS*
- b) A pregnant patient complaining of abdominal pain or a patient who is in active labor
- Any patient in need of time-critical intervention that can be provided only at a hospital-based emergency department

4. PROCEDURE

The EMS clinician shall consult with a designated Base Station at the freestanding emergency medical facility, or the nearest Base Station if the freestanding emergency medical facility is not a designated Base Station, prior to arrival on all Priority 1 and 2 transports as provided in INDICATIONS and when otherwise unclear of the appropriate destination. The designated Base Station shall direct the clinician to the appropriate destination.

5. SPECIAL CONSIDERATIONS

None