



Emergency Medical Services Agency Prehospital Care Manual **Policy 402**

INTERFACILITY TRANSFER – AIR AMBULANCE

Effective Date January 22, 2007
Replaces August 1, 2003

Resources
None

Purpose

I. Purpose

To establish a procedure for the interfacility transport of patients by air ambulance from Santa Clara County facilities.

II. Description

Air Ambulance – Any Santa Clara County permitted air ambulance staffed with at least two clinical crewmembers, one of whom must be a nurse or physician.

III. Utilization Guidelines

- A. The 911 System shall not be used as a means for intake of interfacility transportation requests. All requests for interfacility requests shall be made directly to a private air ambulance services dispatch center.
- B. The sending physician is responsible for determining the appropriate level of transportation required. Each air ambulance service dispatch center shall have call screening mechanisms that will assist callers in selecting the most appropriate unit. The dispatch center shall also have a clear policy on which calls are immediately transferred to County Communications.
- C. The sending physician shall make arrangements for the receipt of the patient by another physician or facility.

IV. Scope of Practice

- A. The scope of practice for flight nurses shall be established by their providers Medical Director and approved by the EMS Medical Director.
- B. Flight paramedics may not take orders from any physician other than the Base Hospital or the EMS Medical Director unless the physician accompanies the patient and maintains care (ie: a physician is part of the flight crew).
- C. Flight paramedics may not perform any skills beyond those approved in the ALS Standing Orders.
- D. The sending physician or designee shall provide verbal report and transfer documents to arriving crews. These transfer documents must include the name of the sending and receiving physician. Once this has occurred, care for the patient is transferred to the air ambulance crew until arrival at the destination and care has been transferred to the staff of the facility.
- E. At such time that EMSA approves *Expanded Scope of Practice for Paramedic Interfacility Transfer Programs Guidelines*, any Santa Clara County permitted air ambulance provider may apply for approval.

V. Patient Care Records (PCR)

- A. An Agency approved PCR must be completed for each IFT. By October 2005, each service must provide electronic data transfer to the Agency for all calls that originate in the County. Each service may develop additional patient care documents that augment the approved PCR.

VI. Hospital Communications

- A. Each provider shall provide a notice to the receiving facility of impending patient arrival. This may be accomplished on Frequency 9, by cellular phone, or through the services dispatch center. Frequency 91 and 92 shall not be used for interfacility hospital notifications.
- B. Based on radio frequency availability, the County may discontinue the ability for private service use of Frequency 9 for non-emergency hospital communications.

VII. Changes in Patient Condition

- A. In the event that a patient's condition deteriorates in route to the planned destination, the following actions should be taken.
 - 1. Flight paramedics may perform any ALS care approved in the ALS Standing Orders as appropriate for the care of the patient. Unless the paramedic is unable to manage the patient appropriately (full arrest, etc.) they should not divert to another facility.
 - 2. Flight nurses should follow the procedures developed by their Medical Director as approved by the EMS Medical Director.