



Inland Counties Emergency Medical Agency

Serving San Bernardino, Inyo, and Mono Counties

Tom Lynch, EMS Administrator

Reza Vaezazizi, MD, Medical Director

DATE: February 27, 2014

TO: EMS Providers - ALS, LALS, BLS, EMS Aircraft
Hospital CEOs, ED Directors, Nurse Managers and PLNs

FROM: Tom Lynch 
EMS Administrator

Reza Vaezazizi, MD
Medical Director 

**SUBJECT: EXTENSION OF PROCEDURES FOR EMS MONITORING OF
MULTIPLE PATIENTS DURING BED DELAY IN SAN BERNARDINO
COUNTY**

ICEMA has recognized a substantial increase in the time interval between ambulance arrival and the time the hospital assumes care of the patient. This is often referred to as bed delay. At times, multiple ambulances are waiting to offload patients and are forced to wait for extended periods in the Emergency Department (ED). This places a heavy burden on the EMS system and directly affects the number of ambulances and other EMS providers that are able to respond to additional lifesaving emergencies. The objective of this process is to establish a mechanism which will release ambulance crews and equipment from the hospital so sufficient resources are available to respond to emergency calls when needed. This process is not intended to replace best practices in resource management and hospital throughput.

Effective immediately, ICEMA is authorizing all ALS transport providers to assign multiple patients to be monitored by a single EMS crew during times of extended off-load delay. These procedures may only be activated by the transport provider and their designated supervisor in consultation with the EMS crews in the hospital. The transport provider must notify the ICEMA EMS Duty Officer (EMSDO) by e-mail whenever this process occurs. This notification shall indicate the name of the hospital, the number units and the duration of the bed delay for each unit where an EMS crew will be caring for multiple patients.

The following conditions apply:

1. One (1) EMS crew (paramedic and EMT) may monitor only the number of patients determined to be safe by their supervisor and the EMS crew.
2. Patients must be stable and require no additional medications or procedures while being monitored by an EMS crew or until transferred to a hospital gurney under hospital care.
3. Patients must be in the same vicinity of the hospital and within sight of the assigned EMS crew at all times. The EMS crew may not be split up.
4. Patients may be on an ambulance or hospital gurney, surge bed, cot, chair or other device that can safely accommodate a patient and allows for appropriate monitoring.

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5. Patient vital signs, condition and changes must be monitored and documented every 30 minutes.
6. An EMS crew may continue to monitor multiple patients until all patients have been transferred to hospital care. Additional patients may be assigned to an EMS crew at the discretion of the supervisor provided all of these procedures continue to be met.
7. Documentation will be maintained on each patient via the electronic patient care record (ePCR).
8. Patient care information will be transferred to the monitoring EMS crew via electronic transfer to maintain continuity of documentation.
9. Agencies using paper patient care records (O1As) will leave a completed green sheet with the EMS crew monitoring the patient.
10. If patient's condition deteriorates, the EMS crew will notify ED staff immediately and transfer care to the hospital.
11. Transport agency supervisors will check crews holding multiple patients and assist with monitoring as required.

This authorization will be in effect until March 31, 2014, unless cancelled by ICEMA at an earlier date, and may be reissued as needed.

If you have any questions, please contact the ICEMA EMSDO, at (909) 208-8618 or via e-mail at ICEMADutyOfficer@cao.sbcounty.gov.

TL/RV/jlm

c: Maxwell Ohikhuare, Health Officer, San Bernardino County
Dimitrios Alexiou, Vice President, HASC
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