



Inland Counties Emergency Medical Agency

Serving San Bernardino, Inyo, and Mono Counties

Tom Lynch, EMS Administrator

Reza Vaezazizi, MD, Medical Director

DATE: December 15, 2015

TO: Inyo County EMS Providers - ALS, LALS, BLS, EMS Aircraft
Northern Inyo Hospital CEO, ED Director, Nurse Managers and PLNs
Inyo EMCC Members

FROM: Tom Lynch
EMS Administrator

Reza Vaezazizi, MD
Medical Director

SUBJECT: IMPLEMENTATION OF POLICY EFFECTIVE DECEMBER 15, 2015

The policy listed below is in response to the Southern Inyo Hospital closure following consultation with the ICEMA Medical Director and the base hospital. The policy is effective December 15, 2015.

ICEMA Reference Number and Name

8140 - Transport Policy (Inyo County Only)

Please insert and replace the attached policy and the Table of Contents in the EMS Policy, Procedure and Protocol Manual with the updated documents and ensure every station or facility has a reference copy. The ICEMA policies and protocols can also be found on ICEMA's website at ICEMA.net under Emergency Medical Services Information and select the EMS Policy, Procedure and Protocol Manual section.

If you have any questions related to documents in the manual, please contact Ron Holk, RN, EMS Coordinator, at (909) 388-5808 or via e-mail at ron.holk@cao.sbcounty.gov.

TL/RV/jlm

Attachment

c: File Copy



TRANSPORT POLICY

(Inyo County Only)

I. PURPOSE

To provide guidelines for EMS field personnel for the transportation of patients in Inyo County.

II. POLICY

A. Ground Transport of Patients in Inyo County

- All patients originating in Independence (EOA 3) shall be transported to Northern Inyo Hospital (NIH) per ICEMA Reference #8130 - Destination Policy.
- All patients originating in Olancha/Cartago (EOA 5 and 6) shall be transported to Ridgecrest Regional Hospital (RRH) per ICEMA Reference #8130 - Destination Policy.
- Advanced Life Support (ALS) intercept may be used when available and only when the patient's condition requires a higher level of care.
- The receiving hospital shall be contacted as soon as possible according to ICEMA Reference #5040 - Radio Communication Policy.
- Base hospital physician may override prior destination decision by paramedic (EMT-P) per ICEMA Reference #8130 - Destination Policy.

NOTE: As a reference, Cottonwood Creek Bridge (halfway between Olancha/ Cartago and Lone Pine) is the mid-point between NIH and RRH.

B. Special Considerations

All patients originating in Lone Pine (EOA 4) that require a higher level of care:

- An ALS flight crew (Sierra Lifeflight) may be requested if ALS care is required.

- Simultaneously base hospital contact shall be made to base hospital who will determine (in collaboration with the ground and flight crew) whether:
 - Patient is transported via ground to NIH with ALS flight crew.
 - Patient is transported via air to Bishop and then by ground to NIH.
 - Patient is transported by air or ground to a hospital outside the county.

C. Base Hospital Contact

- Base hospital contact is required according to ICEMA Reference #5040 - Radio Communication Policy.
- All patients being considered for transport to hospitals other than NIH or RRH require NIH base hospital contact for medical control and destination decision.
- Patients requiring higher level of care such as that required by patient condition (trauma, stroke or STEMI), may be directed to a more distant facility by the base hospital.
- All patient destinations other than by ground transport require base hospital direction prior to transport.

D. Patient Documentation and Quality Improvement (QI/QA)

- EMS field personnel must complete an ICEMA approved electronic patient care record (ePCR) for all patients.
- All ePCRs will be reviewed as part of the EMS provider and base hospital review process.

III. REFERENCES

<u>Number</u>	<u>Name</u>
5040	Radio Communication Policy
8130	Destination Policy

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SERIES	SYSTEM POLICIES AND PROCEDURES	EFFECTIVE DATE
1000	CERTIFICATION, ACCREDITATION and AUTHORIZATION	
1020	EMR Certification	07/01/15
1030	EMT Certification	07/01/15
1040	EMT-P Accreditation	09/01/15
1050	MICN Authorization - Base Hospital, Administrative, Flight Nurse, Critical Care Transport	09/01/15
1060	Certification/Accreditation Review Policy	12/01/14
1070	EMT/AEMT Incident Investigation, Determination of Action, Notification, and Administrative Hearing Process	08/15/14
1090	Criminal History Background Checks (Live Scan)	08/15/14
1100	AEMT Certification	07/01/15
2000	DATA COLLECTION	
2010	Requirements for Patient Care Records	05/01/06
2020	ICEMA Abbreviation List	03/15/12
2030	Minimum Documentation Requirements for Transfer of Patient Care	03/15/12
2120	Instructions for the 01A/F1612 Forms	04/01/09
3000	EDUCATION	
3020	Continuing Education Provider Requirements	07/01/15
3030	EMT Continuing Education Requirements	03/15/11
4000	QUALITY IMPROVEMENT	
4010	Continuous Quality Improvement Plan	02/28/11
5000	MISCELLANEOUS SYSTEM POLICIES	
5010	Licensure Changes 911 Receiving Hospitals	01/01/10
5020	Base Hospital Selection Criteria	07/15/00
5030	Procedure for Adoption of Protocols and Policies	06/01/14
5040	Radio Communication Policy	03/15/11
5050	Medical Response to a Multi-Casualty Incident	04/01/13
5050 I/Mono Annex	Inyo and Mono Counties Medical Response to a Multi-Casualty Incident	05/01/11
5060	MCI Definitions/Key ICS Positions	01/01/10
5070	Medical Response to Hazardous Materials/Terrorism Incident	04/01/13
5080	ICEMA Ground Based Ambulance Rate Setting Policy-San Bernardino County	05/08/12
6000	SPECIALTY PROGRAM/ PROVIDER POLICIES	
6010	Paramedic Vaccination Policy	04/01/13
6030	AED Service Provider Policy - Public Safety	07/01/15
6040	AED Service Provider - Lay Rescuer	07/01/15
6060	Specialty and Optional Scope Program Approval Policy	07/01/15
6070	Cardiovascular ST Elevation Myocardial Infarction Receiving Centers Criteria and Destination Policy	12/01/14

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6000	SPECIALTY PROGRAM/ PROVIDER POLICIES (CONTINUED)	
6080	Paramedic Blood Draw for Chemical Test at the Request of a Peace Officer	04/01/13
6090	Fireline Paramedic	07/01/15
6100	Neurovascular Stroke Receiving Centers Criteria and Destination Policy <i>(San Bernardino County Only)</i>	12/01/14
6110	Tactical Medicine Program	07/01/15
6120	Emergency Medical Dispatch Center Requirements <i>(San Bernardino County Only)</i>	08/15/13
6130	Medical Priority Dispatch Minimum Response Assignments for Emergency Medical Dispatch (EMD) Categories	08/15/13
6140	Smoke Inhalation/CO Exposure/Suspected Cyanide Toxicity	06/01/14
6150	Trial Study Participation	03/01/15
7000	STANDARD DRUG & EQUIPMENT LISTS	
7010	BLS/LALS/ALS Standard Drug & Equipment List	06/01/15
7020	EMS Aircraft Standard Drug & Equipment List	06/01/15
7030	Controlled Substance Policy	06/01/15
7040	Medication - Standard Orders	07/01/15
8000	TRANSPORT/TRANSFERS AND DESTINATION POLICIES	
8010	Interfacility Transfer Guidelines	09/15/13
8020	Critical Care Interfacility Transport	12/01/14
8050	Transport of Patients (BLS)	02/01/92
8060	Requests for Hospital Diversion Policy <i>(San Bernardino County Only)</i>	04/01/13
8070	Aircraft Rotation Policy <i>(San Bernardino County Only)</i>	04/01/13
8090	Fort Irwin Continuation of Trauma Care	06/25/10
8110	EMS Aircraft Permit Policy	10/01/13
8120	Continuation of Care <i>(San Bernardino County Only)</i>	12/01/14
8130	Destination Policy	06/01/14
8140	Transport Policy <i>(Inyo County Only)</i>	NEW 12/15/15
	PATIENT CARE POLICIES	
9000	GENERAL PATIENT CARE POLICIES	
9010	General Patient Care Guidelines	04/01/13
9020	Physician on Scene	04/01/13
9030	Responsibility for Patient Management Policy	04/01/13
9040	Reporting Incidents of Suspected Abuse Policy	04/01/13
9050	Organ Donor Information	04/01/13
9060	Local Medical Emergency Policy	02/01/14
9070	Applying Patient Restraints Guidelines	05/01/06
9080	Care of Minors in the Field	05/01/06
9090	Patient Refusal of Care - Adult	06/01/14
9110	Treatment of Patients with Airborne Infections & Transport Recommendations	09/15/11
9120	Nausea and Vomiting	12/01/14

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10000	SKILLS	
10190	ICEMA Approved Skills	06/01/14
11000	ADULT EMERGENCIES (15 YEARS OF AGE AND OLDER)	
11010	Respiratory Emergencies - Adult	07/01/15
11020	Airway Obstruction - Adult	08/15/14
11040	Bradycardias - Adult	08/15/14
11050	Tachycardias - Adult	08/15/14
11060	Suspected Acute Myocardial Infarction (AMI)	06/01/15
11070	Cardiac Arrest - Adult	08/15/14
11080	Altered Level of Consciousness/Seizures - Adult	08/15/14
11090	Shock (Non-Traumatic)	08/15/14
11100	Burns - Adult	07/01/15
11110	Stroke Treatment - Adult	12/01/14
12000	END OF LIFE CARE	
12010	Determination Of Death on Scene	08/15/14
	Coroners Worksheet of Death - EMS Report of Death Form	09/15/12
12020	Withholding Resuscitative Measures	10/01/14
13000	ENVIRONMENTAL EMERGENCIES	
13010	Poisonings	08/15/14
13020	Heat Related Emergencies	08/15/14
13030	Cold Related Emergencies	06/01/15
14000	PEDIATRIC EMERGENCIES (LESS THAN 15 YEARS OF AGE)	
14010	Respiratory Emergencies - Pediatric	07/01/15
14020	Airway Obstruction - Pediatric	08/15/14
14030	Allergic Reactions - Pediatric	08/15/14
14040	Cardiac Arrest - Pediatric	08/15/14
14050	Altered Level of Consciousness - Pediatric	08/15/14
14060	Seizure - Pediatric	08/15/14
14070	Burns - Pediatric	06/01/15
14080	Obstetrical Emergencies	08/15/14
14090	Newborn Care	08/15/14
15000	TRAUMA	
15010	Trauma - Adult (15 years of age and older)	06/01/15
15020	Trauma - Pediatric (Less than 15 years of age)	06/01/15
15030	Trauma Triage Criteria & Destination Policy	08/15/14
15040	Glasgow Coma Scale Operational Definitions	04/01/13
15050	Hospital Emergency Response Team (HERT) Policy	10/15/13