FORT IRWIN CONTINUATION OF TRAUMA CARE

THIS POLICY IS FOR FORT IRWIN/WEED ARMY HOSPITAL TRANSPORT/TRANSFER OF TRAUMA PATIENTS TO A TRAUMA CENTER ONLY AND SHALL NOT BE USED FOR ANY OTHER REQUESTED TRANSFERS FROM OTHER FACILITIES.

PURPOSE

To provide a mechanism of rapid transport of trauma patients from Fort Irwin and Weed Army Hospital to an appropriate trauma hospital for higher level of care with minimal delay.

1. FIELD TO TRAUMA HOSPITAL

a. The terrain and nature of the Army National Training Facility at Fort Irwin presents particular obstacles to the transport of trauma patients. Most trauma patients must be airlifted to appropriate treatment facilities. To expedite appropriate treatment, trauma patients from Fort Irwin may be airlifted directly to the most appropriate Trauma Hospital, in accordance with ICEMA Protocol #15030 Trauma Triage Criteria and Destination Policy.

b. ICEMA accredited paramedics will follow ICEMA Trauma Protocols #15010 and #15020.

c. The assigned base hospital for medical control will be Loma Linda University Medical Center (LLUMC).

d. Requests for air ambulances shall be made through County Communications Center (CCC). Trauma hospital destination will be rotated by the CCC in accordance with ICEMA Protocol #8070.

e. If LLUMC is not the receiving facility, the medic will attempt to inform Arrowhead Regional Medical Center (ARMC) of the incoming trauma patient.

2. WEED ARMY HOSPITAL TO TRAUMA HOSPITAL

a. INITIAL TREATMENT GOALS

- Initiate resuscitative measures within the capabilities of the facility.

- Prepare patient for transport.
- Contact CCC for air ambulance rotation and trauma hospital destination.
- **DO NOT DELAY TRANSFER** by initiating any diagnostic procedures that do not have direct impact on immediate resuscitative measures.
- Weed Army Hospital ED Physician will make direct physician-to-physician contact with the ED physician at the Trauma Center.
- The Trauma Center will accept all referred trauma patients unless the hospital is on Internal Disaster Diversion (Reference ICEMA Protocol #8060).
- The Trauma Center ED physician is the accepting physician at the Trauma Center and will activate the Trauma Team according to internal Trauma Center protocols.
- Weed Army Hospital must send all medical records, test results, radiologic evaluations to the Trauma Center. **DO NOT DELAY TRANSFER** – these documents may be FAXED to the Trauma Center.

2. SPECIAL CONSIDERATIONS

a. If the patient has arrived at Weed Army Hospital via EMS, the Weed Army Hospital ED physician may request the transporting team to remain with the patient and immediately transport once the minimal stabilization is done at Weed Army Hospital.

b. Weed Army Hospital may consider sending one of its nurses with the transporting unit if deemed medically necessary.

c. Paramedics may transport patients on Dopamine, Lidocaine and Procainamide drips only. Unless medically necessary, avoid using medication drips that are outside the paramedic scope of practice to avoid any delay in transferring trauma patients.

Reza Yaezazizi, MD Medical Director	6/21/10 Date	Virginia Hastings Executive Director	6/21/10 Date