

Subject: EMS Aircraft Services
Patient Care and Destination

Associated Policies:

- I. Authority and Reference (incorporated herein by references)
 - A. Division 2.5 of Health and Safety Code
 - B. California code of Regulations, Title 22
 - C. North Coast EMS Policies and Procedures
 - D. County Ambulance Ordinances

- II. Purpose:
To ensure a rapid and safe transport of patients with an established coordinated response.

- III. Prehospital Care Guidelines
 - A. County and regional EMS policies and procedures will apply to all EMS aircraft flights responding to a request for medical aid and/or transportation within the region.
 1. Medical crews shall be limited to their scope of practice in the county or region of origin.
 2. While the patient is being handled by ALS ground personnel, these personnel shall follow standard NCEMS medical control policies which state that their base hospital must supervise prehospital treatment, triage and transport, and advanced life support.
 3. When patient care is handled by EMS aircraft personnel, medical control rests with the EMS aircraft crew under the direction of their base hospital located in their county of origin (pursuant to existing reciprocity agreements between North Coast EMS and all surrounding jurisdictions).
 4. EMS aircraft personnel are requested to make patient destination decisions, whenever possible, in concurrence with ALS ground personnel and the ambulance's base hospital (pursuant to existing participation agreements between NCEMS and air ambulance providers).

- IV. On scene Transfer of Patient Care
 - A. The highest medical authority on scene shall provide the EMS aircraft crew with a patient report. Including but not limited to patient and scene assessment, treatment and pertinent findings.
 - B. Transfer of care by ground personnel shall be made to an EMS aircraft crew with equal or higher medical training; except,
 1. A BLS rescue aircraft arrives on scene (USCG/CDF) and is unable to take the highest medical authority on the ground onboard. If this situation shall occur the following will be accomplished:

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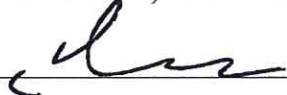
- a. The highest medical authority on scene shall attempt contact with the Base Hospital Physician and seek direction.
- b. If the Base Hospital cannot be contacted (radio failure), the highest medical authority on scene shall decide whether or not to transport the patient via the BLS rescue aircraft on scene.
- c. All considerations regarding the "best interest of the patient" will be taken by the highest medical authority on the ground.

V. Aircraft Patient Destination Policy

- A. The patient destination will generally be to the closest appropriate facility, with considerations made to the Patient Destination Policy #2309, Trauma Transport Destination Policy #7000, or the STEMI Receiving Center Designation Criteria Policy #2215. Determinants in patient condition and severity, safety, weather, patient's preference, fuel availability, and time of day.
 1. EMS aircraft transporting a patient will land at a hospital which has a CalTrans and Federal Aviation Agency (FAA) approved helipad unless there is an unanticipated situation where the safety of the aircraft or patient so requires an emergency landing at another side.

VI. Aircraft Communications

- A. Communication between aircraft and hospital destination will include at a minimum:
 1. E.T.A.
 2. Age, gender, weight
 3. Chief Complaint, including mechanism of injury if appropriate
 4. Vital Signs, indicating status of A.B.C.'s (i.e. intubated)
- B. If EMS Aircraft Personnel are unable to directly contact receiving hospital by radio, ask the dispatch center to communicate basic medical information (as listed above in section A) to receiving hospital via landline.

Approved:  Date: 9-30-19

Approved as to Form:  Kendall Date: 9-19-19