

**SIERRA-SACRAMENTO VALLEY EMS AGENCY
PROGRAM POLICY**

REFERENCE NO. 812

SUBJECT: BASE / MODIFIED BASE / RECEIVING HOSPITAL CONTACT

PURPOSE:

To provide for delineation of the circumstances in which EMS field provider personnel shall make base / modified base / receiving hospital contact for medical control or patient reporting purposes on EMS calls.

AUTHORITY:

California Health and Safety Code, Division 2.5, Sections 1797.220, 1798, 1798.2, 1798.102.

California Code of Regulations, Title 22, Division 9, Chapters 2, 3 and 4.

POLICY:

- A. S-SV EMS field personnel shall make appropriate hospital contact according to the requirements contained in this policy.
- B. Base / modified base hospital contact is required by EMS personnel to perform procedure(s) and/or administer medications(s) that are identified in S-SV policy / protocol as 'Base / Modified Base Hospital Physician Order Only'. In the event of communication failure those procedures/medications shall not be performed / administered.
- C. When requesting to speak directly to a base / modified base hospital physician, EMS personnel shall advise the hospital staff member who initially answers the telephone or radio of the reason for the request (AMA approval, destination consultation, medication or procedure approval, treatment consultation, etc.).

PROCEDURE:

- A. Contact with the base / modified base hospital that is in closest proximity to the incident shall be made for any of the following circumstances:

Effective Date: 12/01/2011
Next Review Date: 10/2014
Approved:

Date last Reviewed / Revised: 10/11
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SIGNATURE ON FILE
S-SV EMS Medical Director

SIGNATURE ON FILE
S-SV EMS Regional Executive Director

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1. For authorization to administer medications and/or perform field procedures that are delineated in S-SV EMS policies and protocols as "Base /Modified Base Hospital Physician Order Only."
2. For any of the following classes of patients refusing assessment, treatment and/or transportation:
 - a. Released at Scene (RAS) patients meeting the following criteria:
 - RAS within the previous 24 hours
 - Children 3 years of age or under
 - Patients age 4 years to 17 years old without a responsible adult signature
 - b. All Against Medical Advice (AMA) patients.
3. For destination decision consultation on the following classes of patients:
 - a. Trauma patients who meet the following criteria as defined in S-SV EMS 'Trauma Triage Criteria' policy (Reference No. 860).
 - Anatomic and/or Physiologic criteria when the time closest trauma center is a Level III Trauma Center (*Note: contact shall be made with that Level III Trauma Center for these patients)
 - 'Mechanism of Injury Criteria' only, with or without meeting any of the 'Special Considerations Criteria'.
 - 'Special Considerations Criteria' only when prehospital personnel determine that transport to a trauma center may be in the best interest of the patient.
 - b. When there is initiation of an ALS / LALS protocol and transport to a facility other than the most accessible is being considered

EXCEPTION:

The following classes of patients meeting criteria for transport directly to a designated specialty care facility

- STEMI patients identified with a 12 Lead EKG

If a STEMI patient identified with a 12 Lead EKG is within the authorized catchment area of a designated or recognized STEMI Receiving Center, contact shall be made with the designated or recognized STEMI receiving center.

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- Stroke patients

If a patient is identified as meeting stroke symptom criteria and the patient is within the authorized catchment area of a Stroke Receiving Center, contact shall be made with the Stroke Receiving Center.

- Trauma patients

If a patient meets Anatomic and/or Physiologic Trauma Triage Criteria, contact shall be made with the appropriate designated trauma center.

***Note – These exceptions do not apply to patients that require transport to the closest facility (i.e. – unable to establish an airway, CPR in progress)**

4. For any patient who, in the opinion of the EMS field provider, requires the additional input or judgment of the base / modified base hospital for appropriate management.

- B. S-SV EMS field personnel shall make contact directly with the destination facility for any patient who does not meet the above criteria or when base / modified base contact is made and the patient is authorized / directed to be transported to a facility other than the base / modified base hospital initially contacted.

CROSS REFERENCES:

Policy and Procedure Manual

Patient Destination, Reference No. 505

S-SV EMS Base / Receiving Hospitals List, Reference No. 505-A

Cardiovascular “STEMI” Receiving Centers, Reference No. 506

Stroke System Triage and Patient Destination, Reference No. 507

Trauma Triage Criteria, Reference No. 860

Communication Failure, Reference No. 890

Chest Pain or Suspected Symptoms of Cardiac Origin, Reference No. C-8

Suspected CVA / Stroke, Reference No. N-3