

# SIERRA-SACRAMENTO VALLEY EMS AGENCY PROGRAM POLICY

REFERENCE NO. 844

**SUBJECT: ALS / LALS TRANSFER OF PATIENT CARE**

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## **PURPOSE**

To ensure a mechanism exists for the appropriate transfer of patient care from ALS / LALS personnel to other prehospital care providers.

## **AUTHORITY**

California Health and Safety Code, Division 2.5, Section 1791.220

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

## **POLICY**

- A. Patient assessment and care shall be started by the first arriving ALS / LALS unit Advanced EMT, paramedic or flight nurse.
- B. The first on duty ALS / LALS licensed and accredited or certified responder who makes patient contact at the scene of an emergency shall be the primary care provider for that patient until such responsibility is transferred to another Advanced EMT, paramedic, flight nurse or EMT partner.
- C. All ALS / LALS personnel on scene have a duty to provide the primary care provider with recommendations and assistance, to ensure the best possible patient care as logistics permit and circumstances require.
- D. The primary care provider shall provide other assisting ALS / LALS personnel who arrive on scene with all appropriate patient care information.
- E. If there are significant differences regarding the transfer of care or correct course of treatment between ALS / LALS providers, base / modified base hospital consultation shall be utilized to determine the appropriate treatment.

## **PROCEDURE**

### **A. PARAMEDIC TO PARAMEDIC:**

- 1. Paramedics are authorized to transfer the role of primary paramedic to another paramedic when patient condition permits.

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**Effective Date: 06/01/2012**

**Date last Reviewed / Revised: 02/12**

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**Approved:**

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**SIGNATURE ON FILE**  
**S-SV EMS Medical Director**

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**SIGNATURE ON FILE**  
**S-SV EMS Regional Executive Director**

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2. The primary paramedic shall maintain the lead responsibility and accompany the patient during transport in the following circumstances:
  - a. When the patient is determined to be critical, with the exception of the following special circumstances:
    - Paramedics who are functioning in an S-SV EMS Agency approved specialized role (Tactical Medic, Fireline Medic, Bike Medic) may transfer care of a critical patient to another paramedic when necessary.
    - Paramedics may transfer care of a critical patient to an ALS Flight Crew, including paramedic flight personnel, when necessary.
  - b. When the receiving paramedic refuses transfer of care due to the patient's condition or complexity of treatment.

If there are significant differences regarding the transfer of care or correct course of treatment between ALS providers, base / modified base hospital consultation shall be utilized to determine the appropriate treatment.

3. The primary paramedic that decides to transfer care to another paramedic shall:
  - a. Provide complete patient assessment and treatment information to the Paramedic accepting responsibility for the patient.
  - b. Ensure the completion of an electronic patient care record (ePCR) per Agency policy. The narrative portion of the ePCR shall include; the time of transfer, name of paramedic personnel and ALS provider accepting transfer, and the time of the transport unit's departure from the scene.

**B. ADVANCED EMT TO ADVANCED EMT:**

1. Advanced EMTs are authorized to transfer the role of primary Advanced EMT to another Advanced EMT when patient condition permits.
2. The primary Advanced EMT shall maintain the lead responsibility and accompany the patient during transport in the following circumstances:
  - a. When the patient is determined to be critical
  - b. When the receiving Advanced EMT refuses transfer of care due to the patient's condition or complexity of treatment.

If there are significant differences regarding the transfer of care or correct course of treatment between LALS providers, base / modified base hospital consultation shall be utilized to determine the appropriate treatment.

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3. The primary Advanced EMT that decides to transfer care to another Advanced EMT shall:
  - a. Provide complete patient assessment and treatment information to the Advanced EMT accepting responsibility for the patient.
  - b. Ensure the completion of an electronic patient care record (ePCR) per Agency policy. The narrative portion of the ePCR shall include; the time of transfer, name of Advanced EMT personnel and LALS provider accepting transfer, and the time of the transport unit's departure from the scene.

**C. ADVANCED EMT TO GROUND PARAMEDIC:**

1. Advanced EMTs shall provide a verbal and written report when able (in some cases a triage tag) to the arriving ground paramedic.
2. Patient care shall be transferred to the ground paramedic as soon as possible after their arrival on scene.
3. The ground paramedic shall provide a report and ETA to the receiving hospital staff while enroute.
4. Advanced EMTs shall ensure the completion of an electronic patient care record (ePCR) per Agency policy. The narrative portion of the ePCR shall include; the time of transfer, name of paramedic ground personnel and EMS ground provider accepting transfer, and the time of the transport unit's departure from the scene.

**D. ADVANCED EMT OR PARAMEDIC TO ALS FLIGHT CREW:**

1. Ground Advanced EMT and paramedic personnel shall provide a verbal and written report when able (in some cases a triage tag) to the arriving flight crew.
2. Patient care may not be transferred to ALS flight crews until they are ready to accept care of the patient. This shall permit the flight crew to prepare for lift-off and begin any additional interventions.
3. The ALS flight crew shall provide a report and ETA to the receiving hospital staff while enroute.
4. Ground Advanced EMT and Paramedic personnel shall ensure the completion of an electronic patient care record (ePCR) per Agency policy. The narrative portion of the ePCR shall include; the time of transfer, name of ALS Flight personnel and EMS Air provider accepting transfer, and the time of the transport unit's departure from the scene.

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**E. RN FLIGHT NURSE TO AEMT OR PARAMEDIC:**

1. Flight Nurses are authorized to transfer the role of primary care provider to an Advanced EMT or paramedic when the care does not exceed the Advanced EMTs or paramedic's scope of practice, and patient condition permits.
2. The flight nurse shall maintain the lead responsibility and accompany the patient during transport in the following circumstances:
  - a. When the patient is determined to be critical.
  - b. When the receiving Advanced EMT or paramedic refuses transfer of care due to the patient's condition or complexity of treatment.
3. The flight nurse that decides to transfer care to an Advanced EMT or paramedic shall:
  - a. Provide complete patient assessment and treatment information to the Advanced EMT or paramedic accepting responsibility for the patient.
  - b. Ensure the completion of an electronic patient care record (ePCR) per Agency policy. The narrative portion of the ePCR shall include; the time of transfer, name of Advanced EMT or paramedic personnel and ALS / LALS provider accepting transfer, and the time of the transport unit's departure from the scene.

**F. ADVANCED EMT OR PARAMEDIC TO EMT PARTNER:**

The Advanced EMT or paramedic is responsible for the initial patient history, assessment and reassessment. The Advanced EMT or paramedic is ultimately responsible for all aspects of patient care rendered. Patient care may be delegated to an EMT partner, pursuant only to the requirements as defined in this policy.

1. Prior to delegation of patient care to an EMT partner:
  - a. The Advanced EMT or paramedic shall be responsible for a complete initial assessment and patient history.
  - b. Delegation of patient care can occur only if the patient does not meet ALS / LALS treatment criteria including, but not limited to, the following:
    - All patients refusing assessment, treatment, or transportation.
    - All patients where ALS treatment is indicated according to S-SV EMS policies or treatment protocols.

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- All trauma patients as defined by S-SV EMS Trauma Triage Criteria policy (Reference No. 860).
  - All 5150 patients.
  - Any patient who, in the opinion of the ALS / LALS provider, requires the additional input or judgment of the Advanced EMT / paramedic or base / modified base hospital for appropriate management.
  - All patients in active labor or pregnant patients with greater than 20 week's gestation, with an obstetric complaint.
- c. The Advanced EMT or paramedic is responsible to ensure that the documentation of his/her initial assessment and patient history is completed on the PCR.

**CROSS REFERENCES**

Policy and Procedure Manual

Prehospital Documentation, Reference No. 605.

Base / Modified Base / Receiving Hospital Contact, Reference No. 812.

Medical Control at The Scene of an Emergency, Reference No. 835.

Patient Initiated Release at Scene (RAS or Refusal of Service Against Medical Advice (AMA), Reference No. 850

Trauma Triage Criteria, Reference No. 860