


Sierra – Sacramento Valley EMS Agency Program Policy

Communication Failure

	Effective: 06/01/2017	Next Review: 01/2020	890
	Approval: Troy M. Falck, MD – Medical Director		SIGNATURE ON FILE
	Approval: Victoria Pinette – Executive Director		SIGNATURE ON FILE

PURPOSE:

To define the conditions under which a paramedic or AEMT may utilize Advanced Life Support (ALS) medications/procedures for prehospital patient care in the event of communication failure.

AUTHORITY:

- A. California Health and Safety Code, Division 2.5, § 1797.84, 1797.185, 1797.220, 1798, 1798.100, and 1798.102.
- B. California Code of Regulations, Title 22, Division 9.

POLICY:

If during the course of patient treatment a paramedic or AEMT attempts direct voice contact with a base/modified base hospital but cannot establish or maintain adequate contact:

- A. They may initiate necessary ALS procedures specified in approved S-SV EMS policies and protocols.
- B. Procedures/medications listed in applicable treatment protocols as ‘Base/Modified Base Hospital Order Only’ may be performed in the event of communication failure if warranted by the patient condition.
- C. The following procedures/medications listed in applicable treatment protocols as ‘Base/Modified Base Hospital Physician Order Only’ shall not be performed/administered in the event of a communication failure and without a direct order from a base/modified base hospital physician:
 - 1. Terminating resuscitative efforts utilizing the BLS termination of resuscitation criteria if no ROSC in an adult pulseless arrest patient (Reference No. C-1).
 - 2. Administration of activated charcoal (Reference No. M-5).
 - 3. Activation/utilization of the Nerve Agent Treatment Protocol (Reference No. E-8).

PROCEDURE:

In each instance where ALS procedures are initiated or attempted under the conditions specified for communication failure, the paramedic or AEMT shall:

- A. Attempt to establish base/modified base hospital contact by telephone and/or radio throughout the call as circumstances permit.
- B. Immediately upon voice contact, provide a verbal report to the base/modified base hospital MICN or physician.
- C. Document the existence and reason for the communication failure in the patient care report.