



San Joaquin County

Emergency Medical Services Agency



<http://www.sjgov.org/ems>

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Policy Memorandum No. 2010-04

DATE: December 17, 2010

TO: Advance Life Support (ALS) Providers
Lifecom
San Joaquin County Base Hospital

FROM: Richard N. Buys, M.D., Medical Director
Dan Burch, EMS Administrator

SUBJ.: Bariatric Patient Transports

A handwritten signature in black ink, appearing to be "Dan Burch", written over the printed name of the EMS Administrator.

Recently several EMS providers have contacted the EMS Agency seeking advice on the care and transport of prehospital bariatric patients. This Policy Memorandum is intended to provide clarification and direction to prehospital care providers and personnel in treating and transporting bariatric patients until such time that appropriate policies or policy modifications are implemented.

A bariatric patient is any morbidly obese patient that cannot be safely transported using a standard ambulance cot due to the weight of the patient or the inability to properly secure the patient to the cot due to the patient's size. The Striker Pro XT ambulance cot has a maximum weight capacity of 700 lbs.

American Medical Response (AMR) San Joaquin Operations has one ambulance specially designed to provide safe, dignified transport of the bariatric or morbidly obese patient. AMR's bariatric ambulance has the capacity to accommodate a patient weighing up to 1,500 lbs, and is equipped with an extra wide gurney, a movable ramp, and bed winch.

Emergency ambulance personnel (AMR, Manteca, Escalon, and Ripon) should consider requesting, through Lifecom, the response of the AMR bariatric ambulance anytime they encounter a bariatric patient that cannot be safely transported using a standard ambulance cot due to the size or weight of the patient. If the AMR San Joaquin bariatric ambulance is unavailable, Lifecom may make a mutual aid request for a bariatric ambulance from AMR operations in Alameda County or Sacramento County.

If no bariatric ambulance is immediately available, consideration should be given to transporting the bariatric patient on the floor of a standard ambulance. In such instances, ambulance personnel shall ensure that all floor/wall mounts have been removed and all other patient safety risks have been mitigated prior to loading the patient into the ambulance. In no circumstance should a patient be transported by prehospital care personnel by any vehicle other than an ambulance.

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For known bariatric patient responses Lifecom should dispatch the AMR bariatric ambulance to augment the response of the closest ALS ambulance.

In accordance with EMS Policy No. 5103 Determination of Death in the Field when presented with a bariatric patient in cardiac arrest, prehospital personnel should initiate appropriate treatment and remain on scene unless a life sustaining cardiac rhythm is reestablished.

Questions regarding EMS Policy Memo 2010-04 should be directed to Kevin O'Loughlin, Sr., MICP, EMS Specialist at (209) 468-6818 or by email at koloughlin@sigov.org