

PURPOSE: The purpose of this policy is to specify the patient type and time criteria for utilization of an EMS Aircraft during an EMS system response.

AUTHORITY: Title 22, California Code of Regulations, Division 9, Chapter 8

DEFINITIONS:

- A. "Inappropriate" means when the incident or patient's condition does not meet the utilization criteria as outlined in this policy.
- B. "LIFECOM" means the authorized point of contact for all EMS aircraft requests in San Joaquin County.
- C. "Total Transport Time" means the ground transport time, air transport time (including response time if the helicopter is not on-scene), weather, traffic considerations (closures/detours), or other similar factors, which may affect **total** transport time.

POLICY:

- I. EMS Aircraft should only be used when it is in the best interest of the patient. In general, consideration should be given to requesting an EMS Aircraft whenever the patient's condition appears life or permanent disability threatening after field assessment. It is expected that the patient's condition, available ground resources, incident location in relation to the closest, most appropriate receiving facility and call circumstances will be evaluated and balanced when making the determination of transport modality.
- II. All EMS aircraft requests will be routed through LIFECOM. Request from any other source, other than LIFECOM will not be honored by EMS aircraft providers. The requesting agency shall be redirected to LIFECOM by the EMS Aircraft dispatch center.
- III. The responding paramedic may request an air ambulance while enroute to the call, if the responding crew suspects that an air ambulance will be needed based on previous knowledge of the area.
- IV. The senior medical person on scene shall be responsible for assessing EMS Aircraft utilization criteria and shall advise the IC or designee to cancel the EMS Aircraft when indicated.
- V. Prehospital personnel shall consider the request of an EMS Aircraft only after a risk/benefit analysis has been performed and when the **clinical and time criteria** are met.

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VI. When these criteria are not met, the EMS Aircraft shall **not be requested** or **shall be cancelled** by the IC, if already dispatched. EMS Aircraft has the authority and responsibility to turn over patient care to ground ambulance if patient does not meet EMS aircraft utilization criteria.

VII. Do Not Utilize Ems Aircraft Transport For The Following Patients:

- A. Cardiac arrest (in hypothermic arrest consider air transport).
- B. Stable patient(s); i.e., fracture ankle, dislocated shoulder, etc. (consideration for air transport may be given when the ground transport unit is greater than 30 minutes from a receiving facility).
- C. Patient(s) contaminated by hazardous materials that cannot be completely decontaminated prior to transport (e.g., possible nausea/vomiting of Hazardous Materials; eye wash or wound care necessary which has Hazardous Materials contaminant, etc).
- D. Patient(s) who are agitated or combative and a potential threat to the crew.
- E. Patient(s) located within any city limits. The only exception to this shall be if the patient must be transported to a specialty care facility (i.e., trauma center, burn center, etc.) outside the city limits.

VIII. **Patient Transport Criteria:** Prior to requesting an EMS Aircraft a risk/benefit assessment shall be performed, see Appendix A, **EMS Aircraft Request Form** for an overview of this criteria.

- A. Risk/benefit analysis:
 - 1. Does this patient meet the clinical criteria to be transported by air?
 - 2. Does air transport save at least 10 minutes over ground to the closest, ***MOST*** appropriate receiving facility?
 - 3. Is air transport in the best interest of the patient?
 - 4. Is air transport the safest way to transport the patient from the scene?
 - 5. Is air transport the most appropriate mode of transportation?
- B. Clinical Criteria: EMS Aircraft transport shall only be used when the patient(s) meet the following clinical criteria.
 - 1. Unusual circumstances
 - a. Inaccessibility to the scene by ground personnel or equipment.
 - b. Extended extrication.
 - c. A multi-casualty incident.
 - 2. Patient Condition (s)
 - a. Multi-casualty incidents (red or yellow priority patients).
 - b. Critical trauma patients
 - c. Spinal injury with neurological deficit.

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- d. Unstable burn patient.
 - e. Unstable patient from environmental injuries.
 - f. Vascular compromise in a limb or amputation.
 - g. Prolonged seizure refractory to medication or seizures involving pregnancy.
 - h. Cardiovascular instability.
 - i. Respiratory arrest or severe respiratory compromise.
 - j. Complications of childbirth (e.g., abnormal presentations, massive blood loss, etc.)
 - k. Pediatric Trauma (Refer to Pediatric Trauma Policy).
 - l. Any other conditions subject to approval of the **Base Hospital Physician**.
- C. Time Criteria: EMS Aircraft transport shall only be used when it will provide benefit in **total transport time** to the closest, most appropriate facility when compared to ground transport time, specifically:
- 1. Long response times to scene, i.e., greater than twenty (20) minutes by ground.
 - 2. Patient transport to the closest, most appropriate facility is twenty (20) or more minutes by ground.
 - 3. Air transport may be considered for a stable patient, if the transport time is greater than thirty (30) minutes by ground.
 - 4. Air transport for approved patients as identified in this policy will be significantly more rapid (at least ten (10) minutes faster).

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