SAN JOAQUIN COUNTY
EMERGENCY MEDICAL SERVICES AGENCY

TITLE: **ALS WITHOUT BASE HOSPITAL CONTACT**   Policy No. **5130**

PURPOSE: The purpose of this policy is to provide a mechanism for advanced life support (ALS) personnel to perform skills and administer medications requiring a base hospital order when base hospital contact cannot be established and immediate treatment of the patient is required.

AUTHORITY: Health and Safety Code, Division 2.5, Section 1797.220, 1798 et seq. Title 22, California Code of Regulations, Section 100145(d).

POLICY:

I. ALS personnel are authorized to perform skills and administer medications requiring a base hospital order when base hospital contact cannot be established and immediate treatment of the patient is required.
II. ALS personnel shall complete an ALS without Base Hospital Contact Report (Appendix A).
III. Each occurrence shall be reported using one or more of the following classification(s):
   A. Patient's clinical status demanded intervention prior to voice contact with the base hospital.
   B. Field communication equipment not available at the patient's side.
   C. No response from the base hospital, after three (3) attempts
   D. Scene environment not suitable for radio and/or land line communications.
   E. EMS communication equipment malfunction(s).
   F. Radio interference/inability to establish radio contact.
IV. Upon completion of the call requiring ALS without base hospital contact ALS personnel shall:
   A. Determine the cause of the communications failure and report or replace faulty equipment.
   B. Complete the ALS without Base Hospital Contact Report and submit the report to their provider's quality improvement coordinator before close of shift but no later than 24 hours after the occurrence.
   C. The Provider's quality improvement coordinator shall complete a review and submit the ALS without Base Hospital Contact Report with their findings and a copy of the patient care report (PCR) to EMS Agency CQI Coordinator within 72 hours of the occurrence.

Approved: Signature on File   Signature on File
                       Medical Director   EMS Administrator