

Subject: Trauma Transport Destination Guideline/Policy

Authority: Title 22, Division 9, Chapter 7

Purpose: To ensure that trauma patient destination is based upon the patient needs and the utilization of the highest level of resource available to provide timely appropriate trauma care.

Trauma Triage Criteria:

The primary goals of trauma triage in Imperial County is to rapidly and accurately identify victims who are at risk for life-threatening injuries. The specific criteria are identified in the guideline for, "Trauma Triage Criteria." Once a patient is identified as meeting the criteria to be classified as a trauma patient, the following guidelines are to be utilized in determining the appropriate patient destination.

Patient Destination Decision:

Patients who meet critical trauma triage criteria should be transported directly to the highest- level trauma center

- 1) Patients will be taken to the closest Level IV trauma center in Imperial County, unless they are critically injured and air transport is available.
- 2) When air transport is on scene then consideration of transport to a higher- level trauma center outside of the county is appropriate
- 3) If ground ambulance is on scene and air transport is in route to the scene, it may be in the patient's best interest to wait for air transport. Factors to consider include the severity of injury, air arrival time, and ground transport time to the Level IV trauma center. The Base Hospital should be consulted in making the determination to wait on scene for air transport.
- 4) Patients transported by ground ambulance that rendezvous with air transport at an alternate site, will have medical control provided by the air medical unit's base of operation, once the patient is turned over to the air transport team
- 5) Patients transported by ground ambulance that rendezvous with air transport at the Level IV trauma center helipad, are not required to have a medical clearance provided by the ED physician prior to air transport to a

higher- level trauma center. Medical control is maintained by the ground ambulance base hospital until the patient is turned over to the ALS air transport team. The use of the hospital helipad, (ground or roof), is looked upon as a 9-1-1 response location and does not obligate the hospital to provide a medical screening exam. If the ambulance provider (air or ground) request any medical intervention by hospital staff, the patients then becomes an ED patient and falls under the requirements for a medical screening exam.

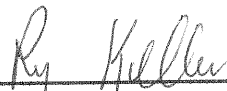
Patient Destination Exceptions:

1. A trauma patient may at the option of the Base Hospital Physician, or air transport team, be brought to the closest appropriate medical facility, when the patient has life threatening condition, which overrides the need for expedient surgery. This would include conditions such as obstructed airway, tension pneumothorax, etc., which cannot be relieved or stabilized in the field.
2. Diversion – When a trauma center is on diversion and not able to respond to trauma activation (i.e. lack of CT, or lack of surgical coverage), notifications will be made according to the Hospital Diversion policy.

APPROVAL



Bruce E. Haynes, M.D.
EMS Medical Director



Ryan Kelley
EMS Manager