Yolo County Emergency Medical Services Agency

Policy



Revised Date: September 1, 2018

TRANSFER OF PATIENT CARE

PURPOSE

To ensure a mechanism exists for the appropriate transfer of patient care from Advanced Life Support (ALS) personnel to other prehospital care providers.

AUTHORITY

Health & Safety Code, Division 2.5, Chapter 4, Article 1, §1797.220 California Code of Regulations, Title 22, Division 9, Chapters 3, 4

POLICY

- I. Patient assessment and care shall be started by the first arriving Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Paramedic or Flight Nurse.
- II. The first on duty ALS licensed and accredited responder who makes patient contact at the scene of an emergency shall be the primary care provider for that patient until such responsibility is transferred to an EMT, Paramedic, or Flight Nurse.
- III. All ALS personnel on scene have a duty to provide the primary care provider with recommendations and assistance, to ensure the best possible patient care as logistics permit and circumstances require.
- IV. The primary care provider shall provide other assisting ALS personnel who arrive on scene with all appropriate patient care information.
- V. If there are significant differences regarding the transfer of care or correct course of treatment between ALS providers, Base Hospital consultation shall be utilized to determine the appropriate treatment.

PROCEDURE

- I. Paramedic to Paramedic
 - A. Paramedics are authorized to transfer the role of primary Paramedic to another Paramedic when patient condition permits.
 - B. The primary Paramedic shall maintain the lead responsibility and accompany the patient during transport in the following circumstances:
 - 1. When the patient is determined to be critical, with the exception of the following special circumstances:
 - a. Paramedics who are functioning in an YEMSA approved specialized role (Tactical Medic, Fireline Medic, Bike Medic) may transfer care of a critical patient to another Paramedic when necessary.
 - b. Paramedics may transfer care of a critical patient to an ALS Flight Crew, including Paramedic flight personnel, when necessary.
 - 2. When the receiving Paramedic refuses transfer of care due to the patient's condition or complexity of treatment.
 - C. The primary Paramedic that decides to transfer care to another Paramedic shall:
 - 1. Provide complete patient assessment and treatment information to the



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- Paramedic accepting responsibility for the patient.
- 2. Ensure the completion of an electronic patient care record (ePCR) per YEMSA policy. The narrative portion of the ePCR shall include; the time of transfer, name of Paramedic personnel and ALS provider accepting transfer, and the time of the transport unit's departure from the scene.
- II. Ground Paramedic to ALS Flight Crew:
 - A. Ground Paramedic personnel shall provide a verbal and written report when able (in some cases a triage tag) to the arriving flight crew.
 - B. Patient care may not be transferred to ALS flight crews until they are ready to accept care of the patient. This shall permit the flight crew to prepare for lift-off and begin any additional interventions.
 - C. The ALS flight crew shall provide a report and Estimated Time of Arrival (ETA) to the receiving hospital staff while en route.
 - D. Ground Paramedic personnel shall ensure the completion of an ePCR per YEMSA policy. The narrative portion of the ePCR shall include the time of transfer and the name of the ALS Flight personnel and agency.
- III. RN Flight Nurse to Paramedic:
 - A. Flight Nurses are authorized to transfer the role of primary care provider to a Paramedic when the care does not exceed the Paramedic's Scope of Practice, and patient condition permits.
 - B. The Flight Nurse shall maintain the lead responsibility and accompany the patient during transport in the following circumstances:
 - 1. When the patient is determined to be critical.
 - 2. When the receiving Paramedic refuses transfer of care due to the patient's condition or complexity of treatment.
 - C. The Flight Nurse that decides to transfer care to a Paramedic shall:
 - 1. Provide complete patient assessment and treatment information to the Paramedic accepting responsibility for the patient.
 - 2. Ensure the completion of an (ePCR) per YEMSA policy. The narrative portion of the ePCR shall include; the time of transfer, name of Paramedic personnel and ALS provider accepting transfer, and the time of the transport unit's departure from the scene.
- IV. Paramedic to EMT Partner:
 - A. The Paramedic is responsible for the initial patient history, assessment and reassessment.
 - 1. The EMT may accompany the patient in the patient compartment of the ambulance, if the following guidelines are met:
 - a. In the Paramedic's best judgment, the patient does not currently require ALS care and there is no reasonable possibility of the patient requiring ALS care throughout the transport.
 - b. The EMT who will be transporting is comfortable with the patient's condition and accepts care for the patient.
 - c. Patients must be stable with medical complaints that can be cared for at the Basic Life Support (BLS) level and that there are no anticipated changes in the patients' present condition.

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- d. No patient will be turned over once ALS or advanced scope interventions have been initiated.
- e. Patient airway, maintained without assistance or adjuncts.
- f. The patient must be hemodynamically stable. Vital signs (VS) should be steady and commensurate with the patients' condition.
- g. The patient must be of their normal mental status and not impaired because of alcohol or substances, or on a 5150 psychiatric hold not medically cleared.
- h. No mechanism or injury that would warrant a trauma alert or activation.
- i. No cardiac, respiratory, or neurological complaints that may warrant an ALS intervention(s).
- B. .Documentation
 - 1. The ALS crew member will complete an interim patient care report detailing all ALS assessment performed to determine transfer of care is appropriate.
 - 2. The BLS crew member will complete the final ePCR record. The ALS interim patient care report will be scanned into the ePCR.

