

FRESNO COUNTY HUMAN SERVICES SYSTEM

Department of Community Health

Gary M. Carozza, Director

DATE: August 12, 2003

TO: Ambulance Provider Agencies

From: Daniel J. Lynch, EMS Division Manager

Jim Andrews, EMS Medical Director

Subject: Call-ins and ETA Notifications to Receiving Hospitals

The EMS Agency has been receiving an increasing number of reports that some ambulances are not providing the receiving hospitals with a call-in per EMS policy, or they are using EMS Dispatch to forward information to the receiving hospital. The purpose of this memo is to remind ambulance personnel that it is their responsibility to contact the receiving hospital and provide the appropriate call-in. The use of EMS Dispatch is not acceptable and should only be used in very rare instances.

While we realize that there are instances when the hospital radio may not be answered or a short ETA prohibits a call-in, every effort must be made to contact the receiving hospital as soon as possible. As you are aware, hospital emergency departments are constantly functioning at near capacity, and any lead time on a patient allows the hospital to find space and/or prepare for the patient's condition. This is especially true for STAT medical/trauma patients, airway compromise, and code blue patients.

A call-in to the hospital, whether ETA or standard, is an important component of patient care. EMS Policy #542 makes the paramedic responsible for notifying the hospital and only allows an EMT-I to make the call-in when the paramedic cannot physically make a call-in due to patient treatment. EMS Policy does not include the use of EMS Dispatch in hospital notification. The paramedic, or person responsible for patient care (BLS units), must make time to notify the hospital as soon as possible..

Hospitals want to be prepared to receive patients that may need immediate attention, especially patients that may need to be intubated. As soon as possible, ETA notifications must be provided when indicated (backboards, restraints, active labor, cardiac monitor, patients on oxygen, and patients receiving breathing treatments). This again is part of patient care and is the responsibility of the paramedic or person responsible for patient care (BLS units).

We appreciate your assistance in resolving this issue. If you have any questions, contact the EMS Agency at (559) 445-3387.

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