



INTERFACILITY TRANSFER – AIR AMBULANCE

Effective: July 1, 2018
Replaces: September 12, 2014
Review: July 1, 2021

I. Purpose

The purpose of this policy is to define the use of Air Ambulance providers for interfacility transports.

II. Description

Air Ambulance: Any Santa Clara County permitted air ambulance as identified in Table A, providing advanced life support in accordance with Title 22 Regulations. This air ambulance is staffed with a minimum of two attendants, to include, one (1) registered nurse and one (1) additional registered nurse or Santa Clara County accredited paramedic.

III. Utilization Guidelines

- A. The 911 System shall not be used as a means for intake of interfacility transportation requests. All requests for interfacility transfers shall be made directly to a private air ambulance services dispatch center.
- B. The sending physician is responsible for determining the appropriate level of transportation required. Each air ambulance service dispatch center shall have call screening mechanisms that will assist callers in selecting the most appropriate unit. The dispatch center shall also have a clear policy on which calls are immediately transferred to Santa Clara County Communications.
- C. The sending physician shall contact the physician receiving the patient to ensure continuity of care and patient acceptance.
- D. The air ambulance or service dispatch center is responsible to pre-arrange any ground ambulance transportation needs that may be required.

IV. Scope of Practice

- A. The scope of practice for nurses shall be established by their provider's Medical Advisor and approved by the County EMS Medical Director.
- B. Paramedics may not take orders from any physician other than the County's Base Hospital Physician unless the physician accompanies the patient and maintains care (i.e., a physician is part of the flight crew).

- C. Paramedics may not perform any skills beyond those approved in *Santa Clara County Prehospital Care Policy*.
- D. The sending physician or designee shall provide verbal report and transfer documents to arriving crews. These transfer documents must include the name of the sending and receiving physician. Once this has occurred, care for the patient is transferred to the air ambulance crew until arrival at the destination and care has been transferred to the staff of the facility.

V. Patient Care Reports (PCRs)

- A. An EMS Agency-approved prehospital care report (PCR) must be completed for each interfacility transfer (IFT). Each service may develop additional patient care documents that augment the approved PCR.

VI. Hospital Communications

- A. Each provider shall notify the receiving facility of impending patient arrival. This may be accomplished by cellular phone, or through the services dispatch center. “County EMS” and “EMS Command 92” radio frequencies shall not be used for interfacility hospital notifications.

VII. Changes in Patient Condition

- A. In the event that a patient’s condition deteriorates en route to the planned destination, the following actions should be taken.
 - 1. Paramedics may perform any ALS care approved in *Santa Clara County Prehospital Care Policy* as appropriate for the care of the patient. Unless the paramedic is unable to manage the patient appropriately (full arrest, etc.), they should not divert to another facility.
 - 2. Nurses should follow the procedures developed by their Medical Advisor as approved by the County EMS Medical Director.

Table A: Santa Clara County Permitted Air Ambulance Providers

Provider	Minimum Attendant Staffing	Phone Number
CALSTAR 2	CCT RN (2) or CCT RN (1) / Paramedic (1)	(800) 252-5050
CALSTAR 5	CCT RN (2) or CCT RN (1) / Paramedic (1)	(800) 252-5050
Stanford Life Flight	CCT RN (2)	(800) 321-7828