

TRANSFER OF CARE IN THE FIELD

I. PURPOSE

- A. To provide guidelines for the transfer of care from non-transport to transport personnel.
- B. To provide guidelines for the transfer of care from an on-scene paramedic to an EMT-I staffed transport ambulance.

II. SCOPE OF DIRECTION AND OVERSIGHT

- A. Patient Care Authority
 - 1. The most medically qualified pre-hospital personnel first on-scene at a medical emergency shall have patient care management authority.
 - 2. The individual with patient care authority is responsible for the patient until care is turned over to another appropriate prehospital care provider or responsible receiving facility staff.
- B. Turn Over of Patient Care Authority
 - 1. BLS First Responders
 - a. BLS first responders initiating patient care shall transfer care upon the arrival of either an EMT-I or paramedic transport crew. BLS first responder personnel shall maintain patient care authority and accompany a BLS transport unit when an AED has been used and the BLS transport personnel do not have an AED.
 - 2. First Responder Paramedics
 - a. First Responder paramedics, when first on-scene, should transfer patient care authority and provide a verbal report to the transport paramedics as soon as feasible. In those cases where the first responder paramedic believes continuity of his/her care will be in the patient's best interest, he/she should maintain patient care authority and accompany the patient during transport.
 - 3. Paramedic to EMT-I Transport Crew
 - a. A paramedic may transfer patient care authority to a BLS ambulance crew for transport, when all of the following circumstances exist:
 - 1) The BLS unit is available within a reasonable time, and
 - 2) ALS care has not been initiated, and
 - 3) It does not appear that ALS care is likely to be required during transport.
 - b. A paramedic shall maintain patient care authority and shall accompany the patient in a BLS transport ambulance to the appropriate receiving facility if either of the following circumstances exist:
 - 1) ALS care has been started, or
 - 2) A reasonable likelihood exists that the patient may require ALS care enroute.
- C. Responsibility for Patients who Decline Care
 - 1. First responders who determine that patients are declining care or transport are responsible for appropriate documentation of those situations.
 - 2. If patient care has been transferred and a patient subsequently declines further treatment or transport, the transport crew is responsible for appropriate documentation.



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Emergency Medical Services**

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D. Documentation

1. Documentation of transfer of care shall be made by both transferring and receiving crews, e.g., "Patient care transferred to AMR paramedic 56 at 0900," and "Patient care accepted from CCC Fire paramedic 115 at 0900."

E. Turn-over Procedures

Those emergency medical response agencies providing enhanced levels of care are responsible for creating and implementing internal operational procedures regarding transfer of patient care. These procedures shall be consistent with the EMS Agency's policies, and shall interface with the procedures of other emergency medical response agencies which might be represented at the scene of an emergency.