I. PURPOSE
This policy defines the role of the Base Hospital and to define the procedure when Base Hospital contact is required and/or communication is disrupted.

II. BASE HOSPITAL ROLE
A. Contra Costa County EMS Agency (LEMSA) Policies and Procedures, including the Prehospital Care Manual, are guidance documents that direct the actions of prehospital personnel. The Base Hospital is available at all times to provide medical direction and advice. Base Hospital contact may be necessary to address any of the following issues:
   1. Orders for medical care as required by Field Treatment Guidelines;
   2. Orders for care not outlined in the Field Treatment Guidelines;
   3. Patient destination concerns;
   4. Determination of death or cessation of resuscitative efforts;
   5. Other policy concerns that may need additional input, direction and guidance (e.g., patient refusal of care, physician on scene, variation order, etc.).

B. Prehospital personnel are encouraged to contact the Base Hospital if they have any questions regarding patient treatment or disposition.

III. DISRUPTED COMMUNICATION
When a paramedic is directed by a field treatment guideline to contact the Base Hospital and he/she is unable to establish or maintain contact and determines that a delay in treatment may jeopardize the patient, the paramedic may initiate indicated ALS care as specified in the Field Treatment Guidelines until Base Hospital contact can be established or until the patient is delivered to the closest appropriate receiving hospital. The paramedic shall transport the patient as soon as possible while providing necessary treatment en-route.

If ALS procedures normally requiring Base Hospital contact are performed under disrupted communications, the paramedic shall:
A. Immediately following delivery of the patient to the receiving hospital:
   1. Complete the EHR documenting the ALS skills performed;
   2. Notify, or request that the agency dispatcher notifies Sheriff’s Dispatch of the communication problem, if the paramedic suspects that any radio problem was due to a situation other than geographical location.

B. Within twenty-four (24) hours, send a copy of the completed EHR and a written report explaining the reason(s) or suspected reason(s) for communication failure to the paramedic provider agency QI coordinator. The paramedic shall be prepared to demonstrate that the treatment delivered was appropriate.