I. PURPOSE
This policy describes options for interfacility transfer (IFT) between acute care hospitals and the procedures required to arrange transport. Transport options vary in terms of accompanying personnel, scope of practice provided and timeliness of availability.

II. PROCEDURES TO ARRANGE 9-1-1 PARAMEDIC IFT EMERGENCY TRANSPORT
A. For a patient who requires emergency transfer (needing immediate care or intervention at the receiving hospital – e.g., critical trauma or STEMI):
   1. Assure appropriate indication for use. Emergency ambulance transport utilizes 9-1-1 resources and is reserved for truly emergent cases;
   2. Activate 9-1-1 to request Interfacility Emergency Response. Exception: For San Ramon Medical Center, contact San Ramon Valley Fire Protection District Communication Center;
   3. Arrange for transfer with receiving hospital personnel;
   4. Assess patient needs in transport to determine if patient needs exceed paramedic scope of care. If beyond paramedic scope hospital will need to provide personnel and equipment to accompany patient (e.g., if IV pump needed, blood transfusion in progress, management of paralytic agents for intubated patient);
   5. Have records (and staff and equipment, if necessary) prepared for transport. The ambulance will generally arrive within ten (10) minutes of request and patient should be ready for transport. If delays occur, the 9-1-1 ambulance may be reassigned for other emergency needs. If additional records are not available, they can be faxed or transported separately.

Guideline Table:

<table>
<thead>
<tr>
<th>Type of Transport</th>
<th>Patient Needs</th>
<th>Scope of Practice</th>
<th>Contact</th>
</tr>
</thead>
</table>
| 9-1-1 Advanced Life Support (Paramedic) IFT Emergency Transport | Emergent intervention or evaluation not available at the sending hospital (e.g., trauma, STEMI, obstetric care for active labor where birth is not imminent). May include neuro and vascular patients transported directly to OR/intervention. | • Advanced airway (ETT and King);  
• Administer and adjust IV fluids including: Glucose, isotonic saline and those containing potassium;  
• ECG monitoring;  
• Defibrillation and synchronized cardioversion;  
• Monitoring of a water sealed chest tube;  
• Administration of ACLS medications.  
See 22 CCR § 100146(c)1 | 9-1-1 |
### III. ARRANGING NON-EMERGENCY INTERFACILITY TRANSPORT

It is the responsibility of the transferring hospital to determine the transport option appropriate for the patient’s condition based on the table below.

#### Guideline Table:

<table>
<thead>
<tr>
<th>Type of Transport</th>
<th>Patient Needs</th>
<th>Scope of Practice</th>
<th>Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Care Transport with RN</td>
<td>Advanced care for patients with complex medical care needs as determined by the transferring physician and the ambulance agency. May include pediatric and obstetric patients.</td>
<td>Critical Care RN</td>
<td>Contact ambulance service directly</td>
</tr>
<tr>
<td>Air Ambulance</td>
<td>RN/Paramedic level of care for patients with complex medical care needs when receiving is distant and time is a critical factor. May include pediatric and obstetric patients.</td>
<td>Critical Care RN/Paramedic</td>
<td>Contact air ambulance service directly</td>
</tr>
</tbody>
</table>
| Non-emergency Advanced Life Support (Paramedic) | Scheduled transport for patients who require advanced level of care. Patient does not require emergent intervention. | - Advanced airway (ETT and King);  
- Administer and adjust IV fluids including: Glucose, isotonic saline and those containing potassium;  
- ECG monitoring;  
- Defibrillation and synchronized cardioversion;  
- Monitoring of a water sealed chest tube;  
- Administration of ACLS medications.  
  See 22 CCR § 100146(c)1 | Contact Contra Costa County Fire Protection District  
(925) 941-3377                                                     |
| Non-emergency Basic Life Support (EMT)    | Needs transport for procedure or to another facility. May include pediatric and obstetric patients. | EMT scope of practice                             | Contact ambulance service directly                |

*See 22 CCR § 100146(c)1*