## SOUTHEAST TEXAS TRAUMA REGIONAL ADVISORY COUNCIL (SETTRAC) TRAUMA SERVICE AREA -Q (TSA-Q)

# AIR MEDICAL ACTIVATION GUIDELINES

**Purpose**: These guidelines are intended to provide a standardized method for ground emergency medical service providers to request a scene response by an Air Medical Provider (AMP), to reduce delays in providing optimal care for severely ill or injured patients, and to decrease mortality and morbidity.

### Guidelines for Activation & Selection of AMP:

- 1. The EMS provider should comply with SETTRAC Prehospital Patient Triage and Facility Bypass Guidelines to activate AMP transport. Factors that should be considered are:
  - a. Location of incident
  - b. Number of patients
  - c. Age of patients

d. Response time of AMP(s) - The total AMP response time (response time + scene time + transport time) will result in delivery of the patient(s) to the most appropriate facility faster than transport by ground ambulance.

- e. Clinical needs of the patient
- 2. Any available AMP(s) that best meets the needs of the patient may be utilized.

**Other considerations**: patients meeting criteria for AMP dispatch should be transported to the nearest appropriate facility.

#### **AMP Selection Considerations.**

Each AMP that provides service in the SETTRAC region Trauma Service Area (TSA) should:

- 1. Meet the minimum participation standards as established by SETTRAC; and
- 2. Participate as requested in SETTRAC performance improvement activities;

The AMP utilized for patient treatment and transport should be the AMP that best meets the patient's care and transport needs, including:

- X Performance criteria (dispatch + response time + scene time + transport time)
- X Clinical capabilities

- X Operational interface and safety. AMP should demonstrate safe operations at all times. Safe operations standards include safety standards such as those endorsed by the Federal Aviation Administration, the National EMS Pilots Association, Helicopter Association International, Association of Air Medical Services, Commission on Accreditation of Medical Transport Systems, the Air and Surface Transport Nurses Association, the National Flight Paramedics Association and Air Medical Physicians Association..
- X Clinical and operational performance improvement (PI) practices.

## **Dispatch Guidelines.**

When requesting an AMP the ground EMS provider should provide the following information:

- $\exists$  Name of agency
- ∃ Location of incident (Key Map and/or GPS)
- $\exists$  Ground contact name and radio frequency
- $\exists$  Number of patients
- $\exists$  Nature of call
- $\exists$  Other AMPs, if any, that have been activated

If the need for an AMP or any of the above change the ground EMS provider should notify the AMP as soon as possible.

When responding to a ground EMS provider's request the AMP should provide the following information:

- $\exists$  Unit responding
- $\exists$  Location from where unit is responding
- $\exists$  Estimated time of arrival from time flight is accepted until expected arrival at scene
- ∃ Special circumstances (fuel stop, turn-around, etc.)

If any of the above change the AMP should notify the ground EMS provider and/or the ground contact as soon as possible.

**NOTE:** Each EMS ground provider should work with all first responder organizations (fire departments, law enforcement agencies, etc.) in it's primary service area regarding AMP activation. The EMS ground providers and the first responders should work together to develop guidelines for AMP activation. In the event that a first responder organization activates an AMP

the ground EMS provider should be notified as quickly as possible."

## SETTRAC AIR MEDICAL PROVIDERS STAND-BY PROCEDURES

### CRITICAL AIR

- 1. Aircraft is committed to requesting agency till released. (If 2nd flight in area comes in we will call requesting agency for an update)
- 2. Crew will check weather and determine probable destination hospital.
- 3. Crew will go out to aircraft and preflight then program GPS etc., with preliminary coordinates if available.(we get these from our CAD software)
- 4. Wait for launch or stand down.
- 5. If stand by is greater than approximately 10 minutes we will ask requesting agency for an update.

### MEMORIAL HERMANN LIFE FLIGHT

- ∃ Life Dispatcher will obtain caller's name, requesting agency's name, call back numbers, nature of incident and number of patients, physical location, key map location and document.
- ∃ Flight crews are notified via pager of the standby status and will respond to the aircraft. Medical crews will stay with the aircraft until the mission is dispatched or disregarded.
- $\exists$  Communications officer will use key map or computer map in attempt to locate scene and obtain latitude and longitude.
- ∃ Pilot will check weather if necessary and also attempt to obtain additional information about scene location via key map or computer map.
- $\exists$  Should the helicopter placed on standby be the only available aircraft, and another call is received the helicopter will respond to the actual call and will go off standby status.
- $\exists$  Should the helicopter respond to another call, Life Flight Dispatch will call the requesting agency and notify them that the helicopter is responding to another emergency request.

#### SKYMED

- $\exists$  The pilot can check weather prior to a launch request
- $\exists$  The crew can be at the helicopter, ready to respond
- $\exists$  GPS coordinates and street locations can be checked
- $\exists$  Depending on the distance to the scene, frequency of stand-downs, familiarity with the scene area, and the initial stand-by information, the decision to do an airborne standby may be

made. This can greatly reduce response times to the scene.