



# SAN MATEO COUNTY HEALTH EMERGENCY MEDICAL SERVICES

POLICY NO:	COM 4
DATE ISSUED:	Apr. 2021

## BASE HOSPITAL COMMUNICATIONS

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### I. PURPOSE

This policy defines the role of the Base Hospital and procedures, including the circumstance that Base Hospital contact is required and communication with the Base Hospital is impossible.

### II. AUTHORITY

California Code of Regulations, Title 22, Division 9, §100128 and §100170

### I. DEFINITIONS

Advanced Life Support (“ALS”) Ambulance [or “Paramedic Ambulance”]: An ambulance authorized by LEMSA to provide ALS emergency services within San Mateo County.

Advanced Life Support (“ALS”) First Responder Unit (“FRU”): A fire department first responder authorized by LEMSA to provide ALS emergency services within San Mateo County.

Base Hospital: A hospital authorized by LEMSA to provide online physician medical control to prehospital providers. Base Hospitals are capable of providing basic and advanced life support medical direction.

Electronic Health Record (“EHR”): The official and legal patient care record completed by EMS personnel. Formally referred to as ePCR.

Emergency Medical Services Agency (“LEMSA”) [or “Agency”]: The San Mateo County EMS Agency.

### III. BASE HOSPITAL ROLE

A. LEMSA policies, protocols and field procedures 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 protocol;
2. Orders for care not outlined in protocol;
3. Patient destination concerns;

4. Determination of death or cessation of resuscitative efforts; and
  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.

#### **IV. DISRUPTED COMMUNICATIONS**

When a paramedic is directed by a protocol to contact the Base Hospital and she/ he is unable to establish or maintain contact with the Base Hospital and determines that a delay in treatment may jeopardize the patient, the paramedic may initiate indicated ALS care as specified in the protocol 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 enroute.

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 required EHR, documenting the ALS skills performed; and
  2. If the paramedic suspects that any associated radio or telecommunication problem was due to a situation other than geographical location in an area with known signal strength deficiency, notify Public Safety Communications and the on-call Agency Duty Officer of the communication problem.
- B. Within twenty-four (24) hours, prehospital providers shall 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 substantiate that the decision(s) made and treatment(s) rendered under the circumstances were appropriate.