

WEST MICHIGAN REGIONAL PROTOCOL

RADIO COMMUNICATIONS PROCEDURE

Number: III.J.
Date: 7/22/98
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Purpose: To outline the content and sequence of radio transmissions between EMS personnel and the emergency department. It is important that all radio transmissions are kept short and their information concise.

B S P

I. Sequence for Communication to Hospital

- A. If utilizing a MedCom system:
 1. Alert County MedCom (or hospital direct if no MEDCOM)
 - a. "_____ County MedCom (or _____ hospital)", then identify unit calling
 - 1) Provide information of:
 - a) Destination
 - b) From location of _____
 - c) Patient Chief Complaint
 - d) Patient Priority Status
- B. If utilizing the HERN radio system:
 1. Dial or alert the appropriate frequency
- C. Communication to Hospital (after connection is complete):
 1. Identify hospital being called first, then unit calling (e.g.: Jones Hospital from Alpha 555).
 2. PRIORITY 1 and 2 PATIENTS:
 - a. EMT/Paramedic
 - 1) First Statement:
 - a) Age and Sex
 - b) Priority Status
 - c) ETA
 - d) Chief Complaint (3-5 words)
 - e) Vital Signs - BP, P, R, LOC
 - 2) Second Statement:
 - a) History relating to chief complaint.
 - b) Significant physical findings relating to chief complaint
 - c) ECG
 - 3) Third Statement:
 - a) Intervention/treatment
 - b) Requests for further orders
 - b. Medical Control:
 - 1) Acknowledge
 - 2) Further questions
 - 3) Orders
 - c. EMT/Paramedic:
 - 1) Acknowledge
 - 2) Repeat orders
 - 3) Further questions
 3. PRIORITY 3 PATIENTS:
 - a. EMT/Paramedic:
 - 1) Unit identification
 - 2) "Priority 3 patient report"
 - 3) Age and Sex
 - 4) Chief Complaint (3-5 words)
 - 5) Laceration present?
 - 6) ETA
 - b. Medical Control:
 - 1) Acknowledge
 - 2) Further questions
 - 3) Orders
 - c. EMT/Paramedic:
 - 1) Acknowledge

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- 2) Repeat orders
- 3) Further questions

Note: (In some systems, the above Priority III information may be relayed through MEDCOM to the Emergency Department)

II. Hospital Notification of Priority I Patients

- A. Early preliminary (alert) notification to hospital of Priority I patient is strongly encouraged.
 1. Transporting personnel are to contact MedCom or dispatch for hospital notification of more than one Priority trauma patient (or contact hospital directly if no MEDCOM).
 2. Agency dispatch personnel may be utilized to relay alert for one Priority I patient, although utilizing MedCom is strongly encouraged when available.

III. Special Considerations

- A. All patient-report communication to hospitals, including cellular or landline telephone use, should be handled through MedCom system when available.
- B. Generally, the transport priority (e.g.: emergency or non-emergency) will coincide with patient priority except with rare extenuating circumstances.

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