

KENT COUNTY EMERGENCY MEDICAL SERVICES

EMERGENCY MEDICAL HELICOPTER POLICY

Number: IV.Q.
Date: 4/10/03
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- M B S P** **I. Background Information**
- A. If unsure of the need, place the service on standby status to decrease response time if required.
 - B. **In summoning the helicopter resources, the EMS Provider must weigh patient care needs and the timeliness of response and delivery of the patient to the hospital by helicopter or ground ambulance.**
 - C. Patients may still be transported by ground ambulance at the flight physician's discretion.
 - D. The patient will be transported to the appropriate medical facility.
 - E. The flight team will strive for ground time of less than 15 minutes. Pre-packaging of the patient will minimize ground time.
 - F. **All requests for helicopter resources shall be directed to Aero Med/Flight Com. If Aero Med is not available, Flight Com shall arrange for an alternative helicopter service to be activated, if indicated after consultation with the requesting agency.**
- M B S P** **II. Indications for Use - in the presence of one or any combination of the following:**
- Note:** These **guidelines are offered as examples** of patients who might benefit from helicopter transport. Additional considerations would include the physical exam, additional contributing factors such as age, mechanism of injury and the level of care available in the area.
- A. Trauma Patients
 - 1. Priority I patient
 - a. Long transport times
 - b. Poor road conditions
 - c. Entrapment with prolonged extrication
 - 2. MCI
 - B. Medical Patients
 - 1. Priority I- in rare circumstances if in the estimation of paramedic that the use of helicopter resources would be beneficial to patient outcome.
- M B S P** **III. Placement of Helicopter Resources on Standby Status**
- A. Standby Status
 - 1. **Public Safety Agencies may place the helicopter on Standby.**
 - 2. Place the helicopter resources on standby status as soon as the possibility that helicopter resources will be needed is determined.
 - B. Request helicopter resources to be placed on standby:
 - 1. UHF telemetry - contact MEDCOM on Channel 9.
 - 2. VHF (HERN) - Contact Aero Med/Flight Com direct.
 - 3. Telephone - 1-800-862-0921 or 391-5330.
 - C. Transmission of essential information:
 - 1. Requesting EMS Provider.
 - 2. Incident location.
 - 3. Identify radio frequency that helicopter can utilize to contact designated Landing Zone Specialist.
 - 4. Trauma or medical.
 - D. Aero Med/Flight Com will acknowledge and either:
 - 1. Confirm standby.
 - 2. Delayed response - approximate time of availability.
 - 3. Unable to respond due to weather, busy or out of service.
 - 4. If Aero Med is not available, Flight Com shall arrange for an alternative helicopter service to be placed on Standby.

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- M B S P** **IV. Request for Service**
- A. Request helicopter resources to be placed into service.
1. Non-ALS First Responder/Public Safety Agencies and/or responding ALS agencies may activate the helicopter service.
 2. UHF telemetry - contact MEDCOM on Channel 9.
 3. VHF (HERN) - Contact Aero Med/Flight Com direct.
 4. Telephone - 1-800-862-0921 or 391-5330.
- M B S P** B. Transmission of essential information:
1. Requesting On-scene EMS Provider.
 2. Incident location.
 3. Identify radio frequency that helicopter can utilize to contact designated landing Zone Specialist.
 4. Confirm Request for service.
 5. Trauma or medical.
 6. Identify any special needs.
- C. Aero Med/Flight Com with acknowledge and either:
1. Confirm flight activated, ETA, location.
 2. Delayed response - Give ETA (continue or cancel).
 3. Unable to respond due to weather, busy or out of service.
 4. If Aero Med is not available, Flight Com shall provide the requesting on-scene EMS Provider to determine the availability and ETA for an alternate helicopter service. The on-scene EMS provider will determine the need to request, through Flight-Com, that helicopter resource.
- P** **V. Cancellation**
- A. A helicopter resources request initiated by a BLS or Public Safety Agency can be canceled by the responding ALS agency **only after an appropriate patient assessment has been conducted.**
- B. A helicopter request initiated by an ALS agency may be canceled only by the agency initiating the request.
- C. If Aero Med cancels a flight, the pilot/flight team or Flight Com will contact the requesting ALS agency to notify of cancellation.
- D. Aero Med Flight Physician may elect to send patient by ground.
- M B S P** **VI. Patient/Scene Preparation**
- A. Landing Zone
1. When notified of the helicopter's activation, the Medical Scene Coordinator will delegate the helicopter landing specialist functions to a certified landing zone specialist. The Landing Zone Specialist will coordinate his/her actions with the Medical Scene Coordinator and must be available to communicate by radio with pilot or Flight Com by phone.
 2. Helicopter landing specialist insures adequate landing area
 - a. 120' x 120' (minimum)
 - b. Area is free of wires or obstructions.
 - c. Uses chemical lights to mark site and wind direction.
 - d. Maintains crowd at a safe distance.
 - e. Lights obstructions, not helicopter.
 - f. Communicates with pilot.
 3. Landing Zone Specialist is responsible for coordinating communications between the EMS Providers and the helicopter.
 - a. Utilize HERN frequency or Aero-Med frequency, if available. This will allow communications with Flight Com.
 - b. Landing Zone Specialist updates the EMS Providers of ETA of helicopter.

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- B. Patient packaging
 - 1. Essential procedures
 - a. Secured airway.
 - b. Immobilization - avoid splints that overhang backboard (Sager or MAST preferred).
 - c. Needle decompression of tension pneumothorax.
 - 2. Procedures dependent upon ETA of helicopter
 - a. IV's - use blood administration set.
 - b. MAST inflation.

P VII. Helicopter on Scene

- A. The Scene Medical Commander will coordinate activities between the flight team and the on-scene EMS Providers involved with patient care
 - 1. Identifies the patient(s) that need flight team.
 - 2. Briefs the flight team on status of other patients.
- B. Flight physician assumes medical control at scene (in accordance with the KCEMS On Scene Physician Intervention Policy) and directs which patients are to be transported by helicopter, if any, which by ground and any further treatment required at scene.
- C. Flight physician may declare patient dead at scene, noting time of pronouncement on EMS Run Form, directing appropriate personnel to secure the body and notify medical examiner.
- D. Flight physician relinquishes scene control to the Scene Medical Commander at scene for remaining patients and departs with flight team.

VIII. Departure

- A. Helicopter landing zone specialist works with pilot to ensure safe departure from scene.
- B. Flight team contacts receiving hospital with a status report and ETA.

IX. Documentation

- A. EMS Providers shall complete a KCEMS EMS Run Form to document care given to patient prior to intervention by the Flight Team.
- B. The helicopter Flight Team shall provide KCEMS with a copy of the temporary medical record for all scene flights in Kent County and Wright-Tallmadge and Chester Townships in Ottawa County.

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