Ventura County
Emergency Medical Services Agency

SPRING EMS UPDATE INFORMATION

Spring EMS Update was cancelled due to the small amount of information from PSC, however, there are a few policies that will be effective December 1st that you are required to be aware of. This Training Bulletin is being created for that purpose. Please read carefully.

VCEMS Policy 606 Withholding or Termination of Resuscitation and Determination of Death—patients with traumatic etiology, who appear to be dead, and are younger than 18 years old will be transported to the closest trauma center. Times for both BLS and ALS trauma cases should be estimated using time to nearest trauma center, and not to nearest hospital.

VCEMS Policy 705.08, Cardiac Arrest—VF/VT 705.09, Chest Pain 705.25 Ventricular Tachycardia—Amiodarone will replace Lidocaine in all these policies, refer to training module.

VCEMS Policy 705.15 Nausea/Vomiting—Ondansatron may be given prior to administration of Morphine Sulfate when the patient has a known history of nausea and vomiting secondary to narcotics.

VCEMS Policy 732 Use of Restraints—New policy.
Purpose: To provide guidelines for the use of physical and chemical restraints during the course of emergency medical treatment or during an inter-facility transport (IFT) for patients who are violent or potentially violent to themselves or others.

PLEASE SEE ATTACHED POLICY

VCEMS Policy 1000 Documentation of Prehospital Care—Language change: VCePCR (Ventura County Electronic Patient Care Record) There will be a VCePCR generated on every “incident” defined as: any event in which there is an actual victim, or the potential for a victim, regardless of whether the responding unit was cancelled enroute or not. A patient contact is defined as any encounter involving Ventura County pre-hospital personnel. Outlined in this document are:
• Procedure for documentation defined
• Appropriate level of call (ALS BLS) document
• Transfer of care
• AMA
• Scoring
• Posting to server
• ECG data downloads
• Minimum data set requirements
• Time requirements for posting
• Printing events

PLEASE SEE ATTACHED POLICY
VCEMS Policy 1404, Guidelines for Inter-facility Transfer of Patient to a Trauma Center—
Clarifies guidelines for transfer of trauma patient to trauma center, to include Grade IV, V, or VI liver injuries, Grade III, IV, or V spleen injuries, and fractures or dislocations with neurovascular compromise. The Level II Trauma centers will publish phone number that may be used to request consultation with trauma surgeon as well as to accept transfer of patients.

Center, VCEMS 1407 “Code Trauma” emergency transfer of Patient with Critical Trauma to Trauma Center—NEW Policy.
Purpose: To define the “Code Trauma” and “Trauma Call Continuation” process by which patients at a community hospital that emergently require the specialty services of a designated trauma center are transferred.
This policy:
• Defines Code Trauma, Trauma Call Continuation, Life-or Limb threatening injuries.
• Describes the responsibilities of trauma system participants, FCC, ambulance companies and Trauma Centers.
• Describes the procedure for transferring from community hospital to trauma center.
• Defines Trauma Call Continuation and documentation required for these instances.

PLEASE SEE ATTACHED POLICY

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These policies can be found on the VCEMS Web Site: