



CENTRAL DUPAGE HOSPITAL
EMERGENCY MEDICAL SERVICES SYSTEM
POLICY & PROCEDURES

TITLE: PATIENT DESTINATION – IMMEDIATE / URGENT CARE FACILITY

SECTION: FIELD OPERATIONS

POLICY NUMBER: B-12

APPROVED BY: DR. STEVE GRAHAM EMS MEDICAL DIRECTOR

EFFECTIVE DATE: 01 JANUARY 2024

NUMBER OF PAGES: 2

PURPOSE:

To ensure that patients who meet the requirements of this policy, and desire to obtain non-Emergency Department access to medical care at Immediate / Urgent Care Facilities are able to be transported to alternate destinations.

POLICY:

1. Central DuPage Hospital Emergency Medical Services System (CDHEMSS) Ambulance Providers, may transport to the following CDHEMSS approved Immediate / Urgent Care Facilities:
 - a. N/A
2. CDHEMSS Ambulance Providers may consider utilizing the above listed location under the following conditions:
 - a. The patient desires to be transported to a non-Emergency Department destination for treatment of conditions that are not immediate life threats.
 - b. Illness and/or injury does not meet the initiation of Advanced Life Support (ALS) care as specified within the Region 8 Standing Medical Orders (SMOs). Including, but not limited to:
 - i. Altered mental status
 - ii. Unconsciousness
 - iii. Chest pain
 - iv. Palpitations
 - v. Seizures
 - vi. Neurologic deficit / stroke
 - vii. Syncope or near syncope
 - viii. Abdominal pain
 - ix. Shortness of breath / difficulty breathing
 - x. Vaginal bleeding (non-menses)
 - xi. Complication of pregnancy or emergency childbirth
 - xii. GI bleeding
 - xiii. Overdose poisoning
 - c. Is ≥ 18 years of age
 - i. Birthday must be provided by patient
 - d. Has no suicidal or homicidal ideations
 - e. Is non-combative
 - f. Is not exhibiting sign of intoxicating substances including but not limited to no:
 - i. Unsteady gait

- ii. Slurred words
- iii. Abnormal vital signs
- iv. Mental status changes
- v. Behavioral changes
- vi. Combativeness
- g. Has vital signs that are normal for age
 - i. GCS of 15
 - ii. Respiratory rate >10 and < 30 breaths per minute
 - iii. SBP > 120 and < 160 mmHg
 - iv. Pulse > 60 and < 120
 - v. Blood Glucose (if history of diabetes) > 60
- h. Will sign a refusal of transport to Emergency Department
- 3. If all the above conditions are met, Medical Control shall be contacted for approval. Medical Control will review the above listed information and give final approval / denial for Non-ED transport.
 - a. Immediate / Urgent Care Facility approved
 - i. Ambulance Crews
 - 1. Shall document the name of the MD who authorized the approval in their Patient Care Report (PCR)
 - 2. Contact the Immediate / Urgent Facility Non-Emergency Department prior to departing the scene to ensure staffing and room is available.
 - a. If no room or staff available, crews shall transport to the nearest Emergency Department
 - ii. Medical Control
 - 1. Complete electronic ECRN form
 - b. Immediate / Urgent Care Facility denied
 - i. Ambulance Crews
 - 1. Transport the patient to the nearest Emergency Department

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