

DATE: March 1, 2006

TITLE: TRANSPORT DESTINATION/PATIENT CHOICE

TRANSPORT/PATIENT CHOICE POLICY

Patients in the SEHSC region will be transported to the hospital of their choice providing:

- 1) The hospital is a recognized receiving facility within a reasonable distance of the transport units home response area.¹
- 2) The patient is competent and has been informed of the potential consequences of his decision.
- 3) In the opinion of the medical command physician, this would not endanger the welfare of the patient.
- 4) Weather and road conditions permit lengthy transports.²

A patient's adult family member (over the age of 18) if competent and informed of the potential consequence of his decision may indicate such a preference if the patient is unable to do so. If the patient does not express a preference, transport from the scene of the incident to the nearest appropriate facility.

In matters of life or death or loss of limb, transport to the closest appropriate facility is indicated at all times. A patient or patient's family request to go to a more distant facility must be disregarded when faced with a deteriorating patient. Traumatic injury patients may be transported to a trauma center instead of the "closest facility". The trauma triage protocol shall be used to determine the closest appropriate facility in trauma situations. The determination of a patient's destination should be the responsibility of the on-line physician and EMS personnel providing the care to the patient.

If a patient is a minor or otherwise unable to make a determination and is stable, transport to the facility of the patient's family choice is appropriate. If the patient or patients' family has stated no preference, and there is no threat to life or limb, transport to the closest appropriate facility is indicated.

Medical command may direct transportation from the scene of the incident to the most appropriate receiving facility. If patient or the patient's adult family refuses transport to the facility suggested by medical command, transport the patient to the facility of their choice after notifying the command physician.

The rerouting of patients should be the responsibility of the on-line physician.

Documentation in the patient care report will include:

- 1) The facility suggested by the medical command physician.
- 2) The clinical symptoms on which such transport was based.
- 3) The patient's choice of facility.
- 4) Information provided to inform the patient or family member of the potential consequences of their refusal.
- 5) The signatures of the involved certified pre-hospital personnel and the patient or patient's adult family member.

¹ Reasonable transport distance is based on average transport times for this region. Reasonable will be defined as 30 minutes.

² Decisions concerning weather and road condition suitability for transport to other than the closest appropriate facility will be the responsibility of the ambulance crew and will be based on the safety considerations for the crew and patient.