I. PURPOSE: To define criteria for patient transport via helicopter.

II. POLICY: Patients shall be transported to hospitals via ground ambulance unless such transport is unavailable or if ground transport is significantly longer than air transport (and this difference in time may negatively impact the patient's condition).

III. PROCEDURE:
A. Helicopter transportation of patients should be considered for cases that meet ALL the following criteria. Transport decisions will be determined jointly by the BH (if BH contact is established), and on-scene personnel.
   1. A minimum of 15 minutes ground travel time to the appropriate hospital, and
   2. the helicopter can deliver the patient to the hospital in a shorter time than the ground unit, based on the time that the patient is ready for transport. This decision should be based on the following formula:
      \[
      \frac{X \text{ minutes ETA to scene} + X \text{ minutes air transport time to hospital} + 10 \text{ minutes loading/unloading/transfer to ED}}{\text{ETA to hospital for the helicopter}}
      \]
   AND
   3. Any one or more of the following patient conditions:
      a. Patients with potentially critical traumatic injuries.
      b. Hypotension/shock.
      c. Spinal cord injuries with neurologic dysfunction.
      d. Vascular compromise in a limb or amputation.
      e. Snake bite with signs of significant evenomation.
      f. Unstable near drowning.
      g. Status epilepticus refractory to medications.
      h. Cardiovascular instability (chest pain with dysrhythmias or post-resuscitation).
i. Critical burns.
j. Critical respiratory patients.
k. Barotrauma (watch altitude).
l. Uncontrolled hemorrhage.
m. Any other injuries or medical problems in areas inaccessible to (or with prolonged ETA times for) ground units.
n. Other conditions subject to the approval of the base hospital physician or the highest medical authority on scene.

B. Contraindications to transport
   1. Patients contaminated with hazardous materials.
   2. Potentially violent patients or those with behavioral emergencies.
   3. Stable patients (except in back country areas inaccessible to ground units).
   4. When ground transport time is equal to or shorter than air transport time.

C. Relative contraindications to transport
   1. Patients in cardiac arrest.
   2. Transports from heavily populated areas.
   3. Transports for which, prior to departing the scene, conditions exist such that helicopter arrival at the intended destination is uncertain.
   4. Other safety conditions as determined by pilot and/or crew.

D. Information about the patient(s) condition, level of medical personnel staffing the helicopter, and ambulance staffing is reviewed by medical and public safety personnel.

E. Base Hospital (BH) contact should be attempted for information to BH or for medical control. If Advanced Life Support personnel are unable to establish BH contact, Communication Failure Protocols should be followed.

F. Provider agencies which utilize medical flight crew members who have an expanded scope of practice (physicians/RNS) beyond Paramedic scope of practice may utilize specific treatments/procedures only upon prior written approval by the VC EMS Agency. In such cases, notification to the receiving hospital shall be made and base hospital medical direction is not required.

G. Staffing decision for transport will be determined jointly by the BH (if BH contact is established and on-scene personnel.
   1. A paramedic must accompany the patient if ALS procedures are initiated and no physician is present.
   2. If ALS procedures are begun on scene, at least one ALS responder will accompany the patient to the hospital.
3. In a multi-casualty incident situation, a patient who has had an IV started that does not contain any additives may be transported by an EMT-I. If helicopter personnel are not certified to the EMT-I level, an EMT-I must accompany the patient on the helicopter if air transport is needed.

4. Destination will be determined by the BH, on-scene physician, EMS personnel, and pilot, taking into consideration the patient’s condition, flight conditions, and any other factors necessary.

H. Patients with traumatic injuries who are to be transported by air shall be triaged prior to transport, and according to VCEMSA Policy 1405, Field Triage Decision Scheme.

1. Patients with traumatic injuries that meet Steps 1-3 of the Field Triage Decision Scheme and require helicopter transport **SHELL** be transported to a trauma center. Helicopter personnel may determine on a case-by-case basis which trauma center is the closest and most appropriate destination. Base hospital contact with the destination trauma center shall be initiated by the caregiver(s) staffing the helicopter. Although for occasional incidents the most appropriate destination hospital may be outside the county, it is preferred that trauma patients involved in incidents within Ventura County are transported to a Ventura County trauma center.

2. For patients whose traumatic injuries meet Step 4 “Special Considerations,” of the Field Triage Decision Scheme, an on-scene paramedic shall contact the base hospital in whose catchment area the incident occurred. Destination will be determined by the base hospital MICN or ED physician. If the patient is directed other than to the regular catchment base hospital, the MICN will notify the receiving hospital or trauma center of an inbound patient and relay paramedic report.

3. If a helicopter is transporting an injured patient to a trauma center and is unable to complete the transport due to weather, mechanical or safety issues, or any other factor that was impossible to predict prior to the helicopter lifting from the scene, the helicopter will notify FCC as soon as safely possible to arrange an alternate LZ and for a ground ambulance rendezvous with the helicopter. When a hospital’s helipad is used strictly as an emergency rendezvous point and the hospital is not the intended recipient hospital, unless a request is made by EMS personnel, hospital personnel shall not respond to the helicopter for the purpose of performing a medical screening exam or providing care. Medical personnel staffing the helicopter shall retain responsibility for patient care until transfer of care to ground ambulance personnel is accomplished. The ground ambulance shall then transport the patient to the trauma center.