

# Calhoun County Medical Control Authority System Protocol


Initial Date: April 23, 24

8.7

## **ALS to BLS Transfer of Care**

### **Purpose:**

Patients who need or desire transport to a hospital and do NOT meet criteria for ALS interventions, may have care transferred from an ALS licensed provider to a BLS licensed provider if all criteria are met.

- I. Criteria for transfer of care from ALS licensed provider to BLS licensed provider must include:
  - a. Patient assessed by on scene paramedic and deemed appropriate for BLS care.
  - b. Patient's airway is patent, maintained without assistance or adjuncts.
  - c. Patient is hemodynamically stable with medical complaints or injuries that would be cared for at the BLS level.
  - d. No imminent changes are anticipated in the patient's present condition.
  - e. Patient presents at baseline mentation and GCS or if unknown, GCS  $\geq$  14.
  - f. The EMT in attendance must be willing to accept the transfer of care given the patient's condition.
  - g. ALS may consider transfer to BLS for the patients who have meet the above criteria and have had the following ALS interventions:
    - i. IV placement with saline lock
    - ii. Dextrose administration with return to baseline mental status
    - iii. Naloxone administration with return to baseline mental status and without respiratory complaints
    - iv. Analgesia administration, with no other excluding criteria and not requiring additional doses during transport.
    - v. Patient has stable vital signs, (pulse between 50 and 110, RR >12/<20, SBP >100/<200, SpO2 >92% without acute respiratory distress) and is alert and oriented
  - h.  For any other patients with ALS interventions performed, contact medical control prior to ALS to BLS transfer of care.

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### II. Handoff Process

- a. ALS personnel are required to provide BLS personnel with a complete hand-off including complete medical history, pertinent physical exam findings, vital signs, and treatment provided and response.

### III. ALS Responsibilities

- a. Provide assessment and care consistent with protocols
- b. Assure patient meets criteria above
- c. Provide verbal hand-off to BLS personnel
- d. Remain with patient until transfer of care to BLS personnel

### IV. BLS Responsibilities

- a. Assure that patient meets clinical criteria
- b. Receive verbal or written handoff from ALS personnel and obtain any additional information needed to provide patient care prior to transport
- c. Provide continued BLS care consistent with CCMCA protocols
- d. Document patient care handoff encounter, including a summary of the care provided by ALS prior to transfer of care to BLS clinician.

### V. Examples of patients appropriate for BLS transport

- a. Minor trauma without concerning mechanism of injury or special trauma considerations (e.g., pregnant, blood thinners), and not needing ALS medications (e.g., analgesia)
- b. Opioid overdose with successful reversal with naloxone and with stable vital signs and normal level of consciousness
- c. Suspected alcohol intoxication with stable vital signs, alert, normal blood glucose, alert, no recent seizure, no evidence of trauma, no concern for co-toxins
- d. Behavioral health condition with patient with stable vital signs, alert, and fully cooperative who have not required (or anticipated to need) physical or pharmacologic restraint
- b. Patient was found hypoglycemic, has received ALS care resulting in normal level of consciousness, and not taking oral or long-acting anti-hyperglycemic medications
- c. Patients who have received analgesia (e.g., fentanyl IV/IN) and otherwise meet criteria

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### **Procedure & Documentation**

1. ALS personnel are required to provide BLS personnel with a complete hand-off report including medical history, pertinent physical exam findings, vital signs, treatment provided and response to treatment.
2. Documentation by BLS provider should include patient care handoff encounter, including a summary of the care provided by ALS prior to transfer of care to BLS clinician

### **Quality Improvement/Quality Assurance (QA/QI)**

1. The MCA shall establish a QA/QI process for review of ALS to BLS transfers of care.

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System Protocol  
ALS TO BLS TRANSFER OF CARE

MCA Name:  
MCA Board  
Approval Date: MCA  
Implementation  
Date: MDHHS  
Approval: