



Fire Chiefs' Association of Broward County Standard Operating Guideline

Number: 303

Issue Date:

Revision Date: N/A

Total Pages: 2

Subject: Medical Communications

Issued By: FCABC Board

I. Procedure:

Hospital prenotification of all BLS or ALS (Non-Interfacility) transported patients is recommended. On initial contact by the paramedic with the supervising emergency physician, the following information should be communicated in this sequence:

1. Priority code and receiving facility
2. Rescue number/paramedic's name
3. Patient's age/sex
4. Patient complaint or major problem/time of onset
5. Assessment: mental status, ROM, pupils, skin, BBS, BP, P, R, ECG, hemodynamic condition
6. Glasgow Coma Scale (GCS) score
7. Mechanism of injury
8. History of illness, medications used, allergies
9. Treatment given
10. Estimated time of arrival

II. MEDCOM PRIORITIES

Priority I: Critical

Used only for patients who present with an immediately life-threatening illness or critical injury.

As outlined in Trauma Alert Protocol.

Priority II: Serious

Used for those patients who present with an illness or injury requiring immediate medical intervention and that has the potential for becoming life-threatening if not treated promptly.

Priority III: Stable

Used for those patients who present with an illness or injury not requiring immediate medical intervention or that is so easily managed that medical direction is not required. Also used for notification of impending patient arrival to the receiving facility.

Priority IV: Administrative Traffic (Optional)

Used for all transmissions not involving care of a patient, such as radio checks, calibration test, and administrative traffic.

III. MEDCOM CLASSIFICATIONS: Adult or Pediatric, Cardiac, Medical, OB, Trauma

IV. TRAUMA PRE-ALERTS

A Trauma Pre-alert is communicated via Fire Dispatch after initial patient contact (a second contact must be made via MedCom enroute to the hospital) and must include the following information:

1. Rescue number/paramedic's name calling the alert.
2. Name of receiving trauma center.
3. Category (adult, pediatric, or obstetrical).
4. Trauma alert criteria.
5. Patient's sex.
6. Number of patients.
7. Estimated time of arrival to the receiving facility, via ground or air.

See the County Uniform Trauma Telemetry (CUTT) on-line

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