



STANDARD OPERATING GUIDELINE
SAN JUAN ISLAND EMERGENCY MEDICAL SERVICES
SAN JUAN COUNTY PUBLIC HOSPITAL DISTRICT NO.1

Island Air Ambulance Operations

SOG #
120-11

APPROVED: Chief Jim Cole

ISSUED
05/20/2009
10/19/09
1/25/2011

PURPOSE: This guideline addresses the various steps and roles needed to complete a fixed wing Island Air Ambulance call.

Call made to Dispatch with Request from in county healthcare organization:

- 1) Request for Island Air Ambulance activation to dispatch made via phone or radio.
- 2) Dispatch contacts on-call medic with request and contact numbers.
 - a) IAA All Call Pager at 360-336-1356 or daytime 378-3090.
- 3) Medic contacts and verifies patient status from originating agency.
- 4) Medic contacts on-call pilot via cell phone for weather go, no-go (will re-contact to activate).
- 5) Medic contacts mainland ambulance for ETA.
- 6) GO, NO-GO DECISION MADE.
- 7) Recontacts originating agency and IAA pilot with approximate ETA, and confirmation of Go, NO-GO.
- 8) If GO, page goes out for Air Ambulance transport.
- 9) Medic updates all agencies if any delay or change in status.

Medic to communicate to Island Air:

1. Patient ambulatory or requires stretcher.
2. Patient height/weight.
3. Destination.
4. Medical crew configuration including number of EMTs/paramedics and accompanying family.

Responding EMT's:

1. On call medic to inform dispatch to BEGIN NEW CALL and go enroute and arrive at airport.
2. Flight EMT must be certified to accompany patient and have no less than 1-2 years of experience as an EMT with our agency to fly. A less experienced EMT may be the second or third medical crew member, but may NOT be the only flying EMT.
3. All EMT's to respond to IIMC, ICC, SJHCA (or other) in ambulance.
4. NO family members allowed at Island Air. If family member to ride, they are to be aboard ambulance from patient pick up location only. May accompany patient if authorized to do so by Island Air.
 - a. Accompanying EMT to then proceed to airport POV.
 - b. AA stretcher to remain at Island Air with patient being transferred from EMS ambulance gurney to AA stretcher using same procedure as with Airlift NW patients.
 - i. (5) Island Air O2 bottles: 3 compact jumbo D in a stand and one in a flight bag, plus 1 C cylinder in a flight bag
 - c. Monitor with stethoscope and head lamp stored at Island Air
 - d. Radio stored at Island Air
 - e. Flight EMS badge
 - f. BLS medical flight bag stored at Island Air
 - g. Run Reports pad and clip board with pen stored at Island Air
 - h. Verify all equipment in bag stored at Island Air
 - i. Name and location of airport
 - j. Receiving ambulance company name/contact information/dispatch
 - k. Extension belts for on board stretcher
 - l. BVM
 - m. Pneumatic Patient Circuit
 - n. Outer island response equipment:
 - i. Foldable backboard with foam pad
 - ii. Burrito with sheets, space blanket and mega mover
 - iii. Spider, noodles, head bed, tape
5. Pertinent patient information:

- a. Confirm patient needs and crew configuration.
- b. Original Run Report if previously transported that day.
- c. X-rays or other medical reports from transferring facility. Admitting hospital and/or doctor's name/ER

At Island Air:

1. On call paramedic to accompany patient and EMT(s) to Island Air and assure that everything is in order before takeoff
2. If ANY doubt exists as to patient stability, flight should be deemed an ALS flight and have a minimum of one paramedic and one experienced EMT aboard with full ALS complement.
3. Approach from right rear with ambulance when possible
4. Utilize ambulance scene lighting as necessary
5. Get PIC (pilot in command) briefing; to include weather enroute and at destination.
6. PIC to orchestrate loading and off-loading of patient and all equipment
7. Do not touch aircraft as only Island Air personnel are permitted to do so.
8. PIC to put ramp in place.
9. Upload patient taking care not to get between the stretcher and aircraft doors
10. PIC to brief all passengers
11. EMT to brief patient as to what to expect during flight.

Enroute to destination:

1. Notify dispatch "Air Ambulance 1 with Med36 aboard lifting off for x destination, ETA approximately x minutes."
2. Monitor patient as needed and record in-flight vital signs (at least twice) on Run Report. Complete PCR in a legible and accurate manner.
3. Address any patient concerns during flight.
4. In case of in-flight emergency or emergency landing, prepare yourself and the patient, taking care to secure all gear. (IA to supply emergency procedures).

Destination Airport:

1. ***Call dispatch via cell phone on arrival.***
2. Note time of arrival on flight run report (PCR).

3. Wait for PIC to open doors upon arrival.
4. Offload patient with assistance from PIC.
5. Transfer to receiving ambulance's gurney.
6. Leave no equipment unless absolutely necessary. (e.g. backboard)
7. Give completed patient report to ambulance crew and hand over patient medical reports/records and pink copies of Run Reports.
8. PIC to secure equipment for take-off.
9. ***Call dispatch via cell phone just prior to departure with ETA and destination.***

Back at Island Air:

1. Notify dispatch "Air Ambulance 1" back on island
2. Wait for PIC to open doors upon arrival.
3. PIC to remove AA stretcher and store at IA
4. EMT to decontaminate interior of aircraft.
5. EMT to sign Form 13 for IA before departing
6. EMT to store radio, Propaq and other equipment in designated area at Island Air
7. EMT to take used O2 bottle back to the EMS bay, refill it and return it to Island Air.
8. EMT to replace any supplies used and inform Flight Officer if any other equipment needs to be replaced.
9. Call dispatch when call is finished so they may close out the call and fax over the times.

EMS Bay:

1. Dispose of biohazard bags per SOG's
2. Decontaminate equipment per SOG's
3. Restock supplies as needed
4. Complete and file report and complete paperwork
5. Contact on-call medic to debrief flight and give final report
6. File all pertinent paperwork in the run report drawer in the bay.

On Call Paramedic:

1. Review all forms and documentation with returning crew, especially if only one EMT was on flight.
2. Correct and enter any information and file addendum if necessary.