
Emergency Medicine and Transport Services**EMTS.P.AIR.12.023**

SUBJECT/TITLE: AUTOMATIC ACCEPTANCE

PURPOSE:

1. To expedite transfer of critically ill patients from referring facilities to UIHC for advanced level intervention and/or stabilization.
2. To limit the time outside clinicians spend on the phone by having pre-defined automatic acceptance protocols.
3. To initiate lift-off of AirCare as soon as possible, thus expediting patient transport and optimizing definitive patient management. To capitalize on the mutual familiarity that AirCare has with the University of Iowa Hospitals and Clinics system and vice versa, leading to better continuity of patient care.

AirCare adult and pediatric patients

SCOPE:**DEFINITIONS:** None**POLICY:**

A. Criteria:

1. AirCare automatic acceptance uses the AirCare Medical Director as the accepting physician and is therefore limited to transports by AirCare.
2. The automatic acceptance protocol relieves the transferring facility of the EMTALA requirement that the patient have an accepting physician prior to the patient departing from the sending facility, but not the other EMTALA requirements.
3. The protocol pertains to Emergency Department patients at outside facilities only and excludes inpatients.

B. Patient Criteria

4. Suspected or known severity of illness warranting helicopter transport including:
 - a. Severe trauma
 - b. STEMI
 - c. Known or suspected life-threatening intracranial hemorrhage
 - d. Acute neurological deficit less than 24 hours with concern for stroke
 - e. Critically ill children (29 days to 17.999 years old) meeting one or more of the following criteria:
 - i. Intubated *

- ii. Noninvasive Positive Pressure Ventilation (NIPPV) requirement (CPAP and BIPAP * (excluding high high flow nasal cannula and nasal cannula based NIPPV)
- iii. Status asthmaticus requiring continuous bronchodilators *
- iv. Vasopressor requirement *
- v. Acute trauma ^ (refer to trauma center)
- vi. Failed airway^
 - * Triage to PICU
 - ^ Triage to ED

All trauma patients or patients requiring acute surgical intervention, meeting any of the above criteria will be triaged to the ED.

C. Exclusion Criteria. The following patients are not eligible for automatic acceptance

- 1. Isolated hand and wrist/forearm injury
- 2. Aortic dissection or aneurysms
- 3. Isolated Psychiatric Illness
- 4. Burn injuries

PROCEDURE:

- 1. Call AirCare Dispatch at 1-800-272-6440.
- 2. Notify dispatch that you have an automatic acceptance patient for University of Iowa AirCare. Dr. Sven Steen will be listed as the accepting physician.
- 3. AirCare will arrive at the referring facility, initiate patient care, and may depart with the patient enroute to UIHC.
- 4. As soon able, the referring physician will contact the Admission and Transfer Center 1-866-890-5969 to relay patient information. This must be done prior to the patient arriving at the University of Iowa
- 5. In some cases, the Emergency Medicine physician may have referring physician speak with a specialty physician or surgeon.
- 6. For pediatric patients, meeting criteria in 4.d the default destination for the patient will be the Emergency Department (ED) until the PICU has received handoff. If PICU has an available bed patients meeting criteria 4. D. i, ii, iii or v will be triaged to the PICU. Patients meeting criteria 4. D. v, vi will be triaged to ED.
- 7. All pediatric trauma patients or patients requiring acute surgical intervention meeting any of the above criteria will be triaged to the ED.

Source: AirCare

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