

Pima Emergency Medical Services Council Patient Off-Load Plan

High Risk, Non-Ambulatory Patients

Require immediate off-load to ED team upon arrival

1. Any patient that was “Alerted” (Sepsis, STEMI, Stroke, Cardiac, Trauma), is in shock OR has significant respiratory distress.
2. Any patient with pregnancy, gestation greater than 20 weeks and pregnancy related medical emergencies should be transported to an OB receiving facility per SAEMS High Risk OB Triage Protocol.

Non-Ambulatory Patients OR Patients Unsafe for Waiting Room

The following patient group should be off-loaded or a plan to off-load patient within 15 minutes.

Goal time: Not to exceed 30 minutes

1. Requiring medication for an active or ongoing medical complaint
 - a. Received naloxone for a suspected narcotic overdose
 - b. Received dextrose for hypoglycemia
 - c. Received Epi for allergy/anaphylaxis
 - d. Received pre-hospital medication for pain, behavioral emergencies, or seizure control
2. Unable to sit in chair/wheelchair for reasons to include but not limited to
 - a. In Spinal Protection Precautions on LSB or SBD
 - b. FX's

Ambulatory, Waiting Room Patients

Transferred to waiting room IMMEDIATELY after a collaborative handoff from the ED Staff utilizing the PEMS Triage Hand-Off Form (to be used at each ED for consistency)

Goal time: No more than 15 minutes

1. Ambulatory or able to transfer and tolerate wheelchair
2. Do not require ongoing ALS interventions
3. An indwelling medical device required for any medical issue (foley, IV, PICC line or MID line, tracheostomy not on a ventilator, etc.)
4. Requiring nasal cannula O2
5. Active chest pain with normal EKG
6. Unaccompanied Minor/Dependent or Special Needs Adult (Location per ED discretion – lobby vs alternate space. ED to consider involvement of social worker to assist with safety plan until roomed)

PEMS Patient Off-Load Escalation Plan

If **30-minute goal time** is not possible and more than 2 ambulances from the same agency are unable to off-load patients at the same facility* OR if a **60-minute** patient off-load is not possible for 1 ambulance from an individual agency* the agency's EMS Supervisor will respond to the facility and discuss a plan for releasing 1 or more ambulances back to the field with the ED Charge Nurse (or designee). Any challenges with the PEMS Patient Off-Load Plan can be addressed with ED Charge Nurse (or designee) and Agency's EMS Supervisor per the escalation plan below:

1. Assist in a safe off-load of patient(s) while ensuring ambulance(s) returning back into service
2. Patient to the lobby per ED/EMS lobby/triage process (similar to Green above) OR
3. Off-load into a hallway chair/bed/ED front end (removal from EMS stretcher) and care transitioned to ED team
4. The EMS supervisor, upon arrival to the facility and after discussion with the ED Charge Nurse (or designee), may choose to have their transporting ambulance(s) leave the facility and leave the patient(s) with the facility if the ambulance(s) has been waiting to off-load for more than 60 minutes