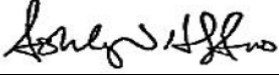


Methodist Health Services Corporation UnityPoint Health- Proctor EMS	Page # 1 of 3	Section:	Policy #: 19
	Approved by: 		Date: 02/2019 Review by: 2/2020
	Supersedes: Date Revised: 6/2017, 2/2019		
	Primary Responsible Parties: Dr. Ashley N. Huff Secondary Responsible Parties:		
	Joint Commission Standard:		
SUBJECT: PATIENT DESTINATION			

I. POLICY:

Patient Destination

II. PURPOSE AND STANDARD:

Patients should be transported to the closest appropriate hospital. A patient (or the patient's *Power of Attorney for Healthcare*) does have the right to make an informed decision to be transported to a hospital of choice. This decision should be respected unless the risk of transporting to a more distant hospital outweighs the medical benefits of transporting to the closest hospital. Ultimately the patient has the right to refuse transport to the closest facility and request transport to a more distant facility. *A trauma patient may benefit from transport directly to the closest appropriate **Trauma Center** rather than the closest geographically located hospital.*

III. POLICY SCOPE: Departmental

IV. GENERAL INFORMATION:

A. **Patient Hospital Preference Guidelines**

Bypassing the nearest hospital to respect the patient's hospital choice is a decision based on medical benefits and associated risks and should be made in accordance with:

1. Urgency of care and risk factors based on:
  - a. Mechanism of injury (physiologic factors)
  - b. Perfusion status and assessment findings (anatomical factors)
  - c. Transport distance and time (environmental factors)
2. Medical Control consultation
3. Capacity of the nearest facility or facility of choice
4. Available resources of the transporting agency

5. Traffic and weather conditions

- B. The patient's hospital preference may be honored if:**
- A. There are no identifiable risk factors.
  - B. The patient has a secure airway.
  - C. The patient is hemodynamically stable.
  - D. The patient has been advised of the closer hospital.
  - E. Medical Control approves.
  - F. Ultimately, a conscious, coherent patient capable of understanding the risks of transport to a more distant facility may refuse transport to the closest facility and request transport to a more distant hospital.
- C. The EMS provider will explain the benefits versus the risks of transport to a more distant hospital and contact Medical Control for approval. The patient (or representative) must sign a UnityPoint Health EMS System *Refusal of Services Form* documenting that the patient understands the risks. **No transporting service shall bypass a hospital in order to meet an ALS intercept (including Life Flight) unless approved by Medical Control.**
- D. Patients may be transported to the hospital of choice within the city limits of Peoria without contacting Medical Control for approval as differences in transport times are negligible.
- E. Trauma Patient Guidelines
1. All **trauma patients** fall under *Field Triage Procedures and Protocols* as well as the American College of Surgeons *Triage Decision Scheme*. Any trauma patient who meets the ACS Field Triage Guidelines should be transported to the Level 1 Trauma Center unless otherwise directed by Medical Control.
    - a. If a patient is unconscious and meets ACS Field Triage Guidelines for trauma, the patient will be taken to the highest level trauma center available.
    - b. If a patient has an altered level of consciousness and meets ACS Field Triage Guidelines for trauma, the patient will be taken to the highest level trauma center available.
    - c. If a patient is alert and oriented to person, place & time with stable vital signs, the patient may be taken to the hospital of his/her choice in accordance with *Patient Hospital Preference Guidelines*.
    - d. Ultimately, a conscious, coherent patient capable of understanding the risks of transport to a more distant facility may refuse transport to the Level I Trauma Center and request transport to a different hospital.

- e. If a family member or any other person is at the scene of an emergency and can readily prove *Durable Power of Attorney for Healthcare*, he/she can request that the patient be transported to a specific hospital in accordance with *Patient Hospital Preference Guidelines*.
- f. If a parent requests that a child (less than 18 years of age) who meets ACS Field Triage Guidelines be taken to a specific hospital, Medical Control must be contacted to discuss the options with the consenting parent.