

General Policy and Procedure

Air Ambulance Field Operation

- A. Major trauma patients need to be delivered to a comprehensive trauma hospital as soon as possible. These guidelines are designed to minimize the elapsed time until the patient arrives at a comprehensive trauma hospital. Stable patients who are accessible to ground vehicles are ordinarily best transported by ground. The following guidelines indicate which patients are likely to benefit from helicopter air ambulance transport.
- B. A helicopter air ambulance should be used for patients who meet the trauma inclusion criteria (as listed in Adult Trauma Triage and Pediatric Trauma Triage, protocols 1-29 and 1-30) and one of the following.
 - 1. Patient evaluation/preparation and transport time to a comprehensive trauma hospital is more than 25 minutes or transport time alone is greater than 15 minutes.
 - 2. Patient transport will be delayed over 15 minutes and ground transport time is greater than 10 minutes.
 - 3. Special circumstance which require the services of the helicopter or its crew, such as chest tube insertion, transfusion, or spinal cord injury.

An MCA approved responder may activate a helicopter air ambulance while en route to a scene if they feel the above criteria exist. If the ALS unit arrives on the scene and the helicopter is not needed, or if the patient will arrive in the Emergency Department faster by ground than by air, the helicopter should be cancelled.

- C. Ground transport may be used whenever deemed appropriate by ALS personnel. External circumstances including weather and helicopter availability may preclude use of helicopter air ambulance.

Procedure:

- A. Request for helicopter service response will be made through either Livingston County or Washtenaw County Central Dispatch. Medical Control will be notified of the request for the helicopter.
- B. Central Dispatch will specify to the helicopter service whether "request for availability", "stand-by" or "active response" is requested.
 - 1. Request for availability - to inquire if helicopter service is able to respond.
 - 2. Stand-by status - Helicopter service has been notified to be ready to respond (i.e. flight crew at helipad, everything ready for immediate response).
 - 3. Activated - Helicopter has been notified to respond.

(For "request for availability" and "stand-by" status Central Dispatch will update the helicopter service every 10 minutes regarding the run status).

- 4. Medical Control approval of helicopter activation is implied under this protocol and direct communication is not required. On line medical direction is available when desired.
- C. Patient should be prepared for transport by air in the following manner:
 - 1. Patient should be stabilized and immobilized with ground ambulance equipment per existing protocol.
 - 2. Ground ambulance personnel will stay with the patient until released by the helicopter personnel.

Air Ambulance Field Operations

3. Helicopter personnel may request to accompany the patient during ground transport to provide continuing medical care if air transport is not practical or possible.

D. Communications

1. Dispatch phone numbers are:
Midwest MEDFLIGHT 1-800-922-3050
Survival Flight 1-800-822-2233
2. Communication with the helicopter dispatch should include information regarding location, identifying marks or vehicles and landing sites.
3. Helicopter dispatch will request pertinent medical information to relay to the flight crew.
4. Communications between the helicopter and ground ambulance may be on the following radio channels:

HVA Ambulance - 155.280 or 155.400 (carrier squelch).
Livingston County EMS - 154.010 (carrier squelch).

E. Landing Site:

1. Locate a level, 100 x 100 area clear of obstacles (i.e. wires, trees).
2. Mark landing zone with a marker at each corner and one upwind.
3. Public safety vehicles should leave on flashers to assist in identifying site from the air.
4. Identify obstacles close to the landing zone and communicate all pertinent information about the landing zone to the flight crew.
5. Landing zone personnel will communicate by radio with the flight crew.

F. Safety:

1. Under no circumstances should the helicopter be approached unless signaled to do so by the pilot or flight crew.
2. Always approach the helicopter from the front. Under no circumstances should the helicopter be approached from the rear due to the extreme danger of the tail rotor.
3. Loading and unloading of the patient is done at the direction of the flight crew.
4. Crews should crouch down when in the vicinity of the main rotor blades.

G. Patient Destination:

1. Patient will be transported to a comprehensive trauma hospital.
2. Patient or family requests will be honored when appropriate, provided the requested destination is a comprehensive trauma hospital.
3. Patients may be transported to other facilities when indicated.

H. Quality Assurance

Helicopter services will forward copies of their run sheets to the Medical Control office for each scene call. The EMS Medical Director will review all helicopter activations for appropriateness.