EMTALA Policy/Response to Potential Emergency Situations Occurring Outside of the Dedicated Emergency Department but on Hospital Property Policy

Purpose: To provide a quick response to patient care emergencies in and about the hospital, to address life threatening emergencies in a timely manner, and to move the patient to an environment where further care and/or treatment can be given.

Policy

- 1. Dedicated Emergency Department personnel will be called and respond to all Code Blue and other patient care emergencies:
 - a. Within the main hospital building; and
 - b. Any area that is outside of the main hospital building but is defined as Hospital Property (See Administrative Policy EMTALA).
- 2. Obstetrics Department personnel will be responsible for management of patient care emergencies which present to that department.
- 3. Primary responsibility for responding to emergencies outside of the main hospital building will be the responsibility of Emergency Medical Services (EMS) personnel who will be activated by the 911 dispatch system.
 - a. Personnel encountering an injured or ill person outside the main hospital should immediately summons another person or go to the nearest telephone and dial 9-911 on a hospital line or 911 on a non-hospital line. After dialing 9-911 or 911, the main hospital emergency response team can be notified by dialing the hospital operator. The hospital operator will notify the Emergency Department of the situation.
- 4. Hospital staff will respond as follows:
 - a. A nurse from the Dedicated Emergency Department will respond to the location of the emergency with an emergency kit and 2-way radio;

- b. The House Supervisor or his/her designee will be paged to respond to the Emergency Department as necessary to assure existing Emergency Department patients receive appropriate and timely care;
- c. The Emergency Department nurse will assess the emergency and request additional supplies or personnel if needed;
- d. The following personnel may also respond to the site of the emergency when they are available to safely leave their patient care area(s):
 - 1. The Emergency Department Physician;
 - 2. Respiratory Therapist; and,
 - 3. Other personnel as available and/or appropriate;
- e. In the absence of EMS personnel, emergency care by the hospital staff will be limited to the level of training of the responding hospital staff and the equipment available; and,
- f. When EMS personnel arrive at the site of the illness or injury, there will be an orderly transition of care from the hospital staff to the EMS personnel, who will continue care and treatment as on any other ambulance run and transport the patient to the appropriate Emergency Department as ordered by the Emergency Department Physician.
- 5. Each situation will be assessed as it develops and this policy will be flexible at the discretion of the House Supervisor on duty. The House Supervisor must take into account the safety of staff and patients he/she is responsible for inside the main hospital when responding to emergency situations outside of the main hospital.

When non-EMS hospital personnel respond to a medical situation outside of the main hospital, the patient will be treated as an Emergency Department patient. Emergency Department policies, procedures and protocols will be followed.

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Approval:	Director, Emergency Services:
	Vice President Medical Affairs:
	President: