

Detroit East Medical Control Authority
System Protocols
ALS TO BLS TRANSFER OF CARE

February 2019

Section 8.8a

ALS to BLS Transfer of Care

Purpose

Patient needs or desires transport to a hospital and does not meet criteria for ALS interventions, may be transferred by a BLS transporting unit. Transporting units are defined as:

- A. **Basic Life Support** - (1) Emergency Medical Technician (EMT) and (1) Medical First Responder (MFR) now termed Emergency Medical Responder (EMR)
 - B. **Limited Advanced Life Support** - Minimum staffing will be one (1) Emergency Medical Technician Specialist/AEMT and one (1) Basic Emergency Medical Technician.
 - C. **Advanced Life Support** - Minimum staffing shall be one (1) Paramedic and one (1) Basic Emergency Medical Technician.
1. Criteria for transfer of care from ALS to BLS must include:
- a. Patent airway, maintained without assistance or adjuncts.
 - b. Patient appears hemodynamically stable with medical complaints or injuries that would be cared for at the BLS level.
 - c. No imminent changes are anticipated in the patient's present condition.
 - d. GCS \geq 14.
 - e. The EMT in attendance must be willing to accept the transfer of care in regards to the patient's condition.
 - f. No patient may be transferred to BLS once an ALS intervention has been initiated.
 - g. Notify Medical Control of ALS to BLS for authorization to transfer care prior to transport.

Transport by an ALS unit shall be considered if the transfer of care to the BLS staffed ambulance would incur a time delay greater than the projected transport time to the intended receiving facility.

Documentation

1. If care is transferred to BLS the following should be completed:
- a. The ALS Provider will complete a Patient Care Record (PCR) and submit the data electronically.
 - b. The ALS Provider will furnish the BLS transport unit with a record detailing the ALS assessment, a copy of which will be provided to the receiving hospital.
 - c. ALS transferring unit is identified on the BLS PCR.

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