

SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Policy Reference No: 5021
Effective: February 1, 2009
Review Date: February 1, 2011
Supersedes: August 1, 2008

TRAUMA CENTER BYPASS POLICY

I. PURPOSE

To describe Trauma Center bypass procedure for the optimal care of trauma patients if San Francisco General Hospital (SFGH) Trauma services are not available.

II. AUTHORITY

- Division 2.5, California Health and Safety Code, Sections 1797.198, 1798.160, 1798.162 (a), 1798.163, 1798.165
- California Code of Regulations, Title 22, Division 9, Chapter 7: Trauma Care Systems, Sections 100255 (a-c)
- City and County of San Francisco Trauma Care System Plan, Section VII, Objective III.A.

III. POLICY

- **Conditions under which the Trauma Center Bypass Policy shall be activated:**
 1. The Trauma Center Bypass policy shall be activated if the Trauma Center is incapable of receiving trauma patients as defined in the Trauma Triage Criteria # 5001.
- The Trauma Center will notify EMS Agency to activate either **“partial”** or **“total”** bypass.
 - **“Partial bypass”** means that the Trauma Center can only receive trauma patients approved for transport to SFGH by Base Hospital MD (for example, CT scan is unavailable, but all other equipment and services are functioning normally).
 - **“Total bypass”** means that the SFGH Trauma Center cannot receive any trauma patients (for example, a disruption in building structural integrity renders all the operating rooms non-functional).
- **SFGH Policy Development**
 - By August 1, 2009 SFGH shall develop and implement an internal policy and procedure to initiate the Trauma Center Bypass policy.
 - The SFGH internal policy and procedure will include a mechanism that is approved by the EMS Agency Medical Director for notifying the EMS Agency Duty Officer and the Department of Emergency Management, Division of Emergency Communication (DEC).

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IV. PROCEDURE

- **Initiation of Trauma Center Bypass Policy**
 - Prior to initiation of the Trauma Center Bypass policy, the SFGH hospital internal disaster plan shall be activated.

- **Notification of the EMS Agency Section Duty Officer**
 - SFGH Administrator on Duty (AOD) shall contact the EMS Duty Officer to consider activation of the Trauma Center Bypass Policy.
 - EMS Duty Officer pager # is 327-9114.

- **Activation of Trauma Center Bypass Policy**
 - The EMS Duty Officer shall verify that:
 - SFGH Trauma Center has a partial or total incapacity to receive trauma patients as defined in the Critical Trauma Patient Criteria and Triage Decision Scheme Policy # 5001.

 - SFGH has made every attempt to ensure that trauma services are available and has initiated the hospital internal disaster plan.

 - The EMS Duty Officer, in consultation with the SFGH AOD shall determine that the Trauma Center is on partial or total bypass, and shall activate the Trauma Center Bypass Policy.

 - The EMS Duty Officer shall advise DEC and contact the San Mateo Public Safety Communications at 650-363-4981 and request the EMS on call Administrator and the AMR Field Supervisor be notified. Communication shall include reference to the EMS Aircraft Utilization Policy # 4020 for consideration of direct transport of the trauma patients by air from field to regional trauma centers. The DEC shall notify regional Trauma Centers of policy activation.

 - DEC shall alert all hospital and pre-hospital providers of activation of the Trauma Center Bypass Policy via:
 - SFFD EMS 800 MHz radio
 - Hospital roll call on 800 MHz radio
 - EMResource and
 - Private ambulance dispatch center

 - SFGH shall indicate the beginning and end of Trauma Center Bypass on the EMResource screen.

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- During periods of activation of this policy, SFGH shall provide a Trauma Center status update to the DEC and the EMS Duty Officer 2 hours after activation, then on a regular 4-hour schedule until Trauma Center Bypass is ended.
- The EMS Agency Duty Officer may ask for a status update from SFGH at any time during periods of policy activation.
- When Trauma Center Bypass is no longer required, SFGH shall consult with EMS Duty officer, who will verify and notify the DEC and San Mateo Public Safety Communications.
- **Destination**
 - While this policy is activated, patients who meet Trauma Triage Criteria Policy # 5001 will be diverted from SFGH Trauma Center to local and regional hospitals. Whenever possible, transport will be by air. Destination decision will be based on the following:
 - During *partial* Trauma Center Bypass, Field providers will consult with the Base Hospital Physician to determine if SFGH can take a critical trauma patient. If SFGH cannot receive the patient, the patient will be transported to the most accessible regional trauma center.
 - In cases of airway compromise, impending arrest, cardiac resuscitation, or post resuscitation, patient will be transported to the nearest Receiving Hospital, which may include SFGH.
 - During *total* Trauma Center Bypass, the Trauma Triage Criteria Policy #5001 will be utilized as follows:
 - Patients meeting Mechanism-only trauma center transport criteria shall be transported by ground ambulance to the nearest open receiving hospital.
 - Patients meeting Anatomical and/or Physiologic trauma center transport criteria shall be transported by air or ground ambulance to the most accessible regional Trauma Center. Pediatric patients will be transported to Oakland Children's Hospital.
 - Air ambulances will transport to the most accessible regional Level I or II Trauma Center with air access, in accordance with EMS Aircraft Policy # 4020.

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- In cases of airway compromise, impending arrest, cardiac resuscitation, or post resuscitation, patient will be transported to the nearest Receiving Hospital.

- If transporting by ground to a regional trauma center, San Francisco paramedics will notify the intended destination of their ETA and patient status through the DEC. DEC will use the standard “Field Report” form in Attachment C and fax this to regional trauma center receiving the patient, as well as to the EMS Agency.

- During periods of activation of this policy, the Trauma Center will not invoke “Trauma Center Override”.

- **Quality Assurance**
 - Within 3 working days of any activation of the Trauma Center Bypass Policy, SFGH Trauma Center will issue a report to the EMS Agency(see Attachment A).

 - Activation of the Trauma Center Bypass Policy is a sentinel event and will be reviewed by the San Francisco Trauma System Audit Committee.

 - Activation of the Trauma Center Bypass Policy is a standard reporting item for Health Commission review.

**ATTACHMENT A
TRAUMA CENTER BYPASS POLICY
ACTIVATION REPORT**

To be completed by the SFGH Trauma Center within 3 working days of an incident that results in activation of the Trauma Center Bypass Policy. Please fax to EMS Agency # 415-552-0194.

Please provide the following information:

Date and Time Bypass Activated: Date _____ Time: _____
Date and Time Bypass Terminated: Date _____ Time: _____

What was the nature of the incident that prompted activation? Please describe the circumstances (example: what equipment/physical plant failure?)

How was the problem resolved?

- Did SFGH initiate internal disaster plan prior to Trauma Bypass activation? ___yes ___no
- Was SFGH on Diversion at the time of the Trauma Bypass activation? ___yes ___no
- Date and Time Diversion had been activated: Date: _____ Time: _____
- Was SFGH on Trauma Override at the time of Trauma Bypass activation? ___yes ___no
- Date and Time Trauma Override had been activated: Date: _____ Time: _____

Number of patients triaged to alternate destinations:

Name of Hospital _____ Number of patients _____

Name of Hospital _____ Number of patients _____

Your recommendations/comments about this policy: did the Trauma Bypass procedure work? Did the notification and triage procedures facilitate optimal patient care? Please include additional pages if needed.

Completed by:
Name: _____ phone# _____

SFGH Title: _____ date: _____

ATTACHMENT B

**REGIONAL TRAUMA CENTERS
Contact Information and Flight Time Intervals**

TRAUMA CENTER	PHONE CONTACT	FLIGHT TIME INTERVAL from central San Francisco
Highland Alameda County Hospital	ED: 510-437-4559	NO HELIPAD; GROUND TRANSPORT ONLY
Oakland Childrens (Level II pediatric)	ED: 510-428-3240	5 min.
Eden Hospital (Level II) (Castro Valley)	ED: 510-889-5015	10 min.
John Muir Hospital (Level II) (Walnut Creek)	ED: 925-939-5800	10 min.
Stanford Health Care (Level I)	ED: 650-723-7337	12 min.
San Jose Hospital (Level II)	ED: 408-977-4684	20 min.
Santa Clara Valley Medical Center (San Jose) (Level I)	ED: 408-885-6912	20 min.
Santa Rosa Memorial (Level II)	ED: 707-525-5207	25 min.
UC Davis (Level I adult & pediatric)	ED: 916-734-3790	35 min.

**ATTACHMENT C
FIELD REPORT FORM**

To be used by DEC to report patient information to destination Trauma Centers.

Date _____ **Time** _____ **Ambulance Unit** _____

DEC Call Taker _____ **Run Number** _____

Chief Complaint _____ **AMPDS code** _____

PATIENT INFORMATION

AGE _____ **SEX** _____

M**ECHANISM OF**
I**NJURY** _____

T**Y****E OF**
I**NJURY/INJURIES** _____

V**I****T****A****L** **S****I****G****N****S**:

B**L****O****O****D** **P****R****E****S****S****U****R****E** _____ **P****U****L****S****E** _____ **R****E****S****P****I****R****A****T****O****R****Y** **R****A****T****E** _____

T**R****E****A****T****M****E****N****T**: c-spine IV intubated (nasal/oral)
_____ medications (if applicable)

D**E****S****T****I****N****A****T****I****O****N** **T****R****A****U****M****A** **C****E****N****T****E****R** _____

E**T****A** _____

H**o****s****p****i****t****a****l** **N****o****t****i****f****i****c****a****t****i****o****n**:

T**I****M****E**: _____ **H****O****S****P****I****T****A****L** **C****A****L****L** **T****A****K****E****R**: _____

Please fax completed form to EMS Agency # 415-552-0194 and to Regional Trauma Centers.