

Docket No. SA-530

Exhibit No. 6A

NATIONAL TRANSPORTATION SAFETY BOARD

Washington, D.C.

Patient Transport Request
Fairfax County Fire and Rescue Department
EMS Manual – Air Medical Transport Protocol

(3 Pages)

Fairfax County Fire and Rescue Department- EMS Manual

Air Medical Transport

Providers should use Air Medical Transportation when it will benefit the patient (either by providing expanded prehospital care and/or by providing rapid transport for a life-threatening condition) and after a risk/benefit analysis has been completed.

The routine use of Air Medical Transport based *solely* on Mechanism of Injury (MOI) should be discouraged.

The decision to transport by air must take into account a number of factors.

1. Logistical factors - access and time/distance variables.
 - Proximity to the receiving facility
 - Traffic congestion
 - Topographical factors limiting patient access by ground or water transport units
 - Availability of and proximity to an acceptable landing zone
 - Weather conditions
2. Patient factors

Trauma – MOI significant enough to require transport to a trauma center <u>plus</u> one of the following anatomic/physiologic abnormalities	
1. Compromised airway, cannot be maintained or managed	
2. Respiratory distress/failure	
3. Signs/symptoms of hypoperfusion/shock	
4. GCS of 10 or less; GCS decreasing 2 points from 1st and 2nd assessment	
5. Loss of consciousness more than 5 minutes	
6. Major amputations (arms/legs)	
7. Neurological signs/symptoms suggestive of spinal cord injury	
8. Evidence of pelvic instability or hip dislocation	
9. Two or more long bone fractures/deformities	
Medical/Surgical (suspicion of the following)	
Acute ST elevation MI with S/S of shock or severe CHF	May allow transport to facility capable of interventional catheterization.
Ruptured Abdominal Aortic Aneurysm (abdominal pain/back pain and hypotension)	May allow timely transport for surgical or interventional management.
Aortic Dissection	May allow timely transport for surgical management.
Acute ischemic CVA (stroke) less than 3 hours from symptom onset	May allow therapeutic interventions within the therapeutic window.

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Contraindications to Air Medical Transport

Contraindications for Air-Medical transport include:

- Patient has no obtainable vital signs upon initial assessment and remains without vital signs during the course of the resuscitation effort.
- Patient is contaminated with a hazardous material.
- Patient's condition requires multiple caregivers and/or space to provide CPR,
- Patient size (consideration).
- Patient's injuries (grossly angulated fractures).

Air Medical Transport Resources

The following resources are available within Fairfax County with an anticipated response of 20 minutes or less:

- Fairfax County Police Department (based at Fair Oaks, VA)
- PHI-Air Medical of VA/AirCare (based at Leesburg, Manassas, and Fredericksburg)
- MEDSTAR (based at Indian Head, MD)
- LIFE EVAC (based at Stafford, VA)
- United States Park Police (based in Washington D.C.)
- Maryland State Police (based at Andrews AFB and Montgomery Co)

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Trauma Triage and Transport Decision Tree

