



ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

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To: 911 Ambulance Providers
Emergency Department Managers and Liaisons
Prehospital Personnel
Receiving Hospital Administrators

From: Karl A Sporer, EMS Medical Director

Re: Transfer of Patient Care to Receiving Hospital Emergency Departments

Alameda County has tracked Ambulance Patient Offload Delays (APOD) at receiving hospitals in our county over the last few years. These delays remain prevalent in our system and have a negative impact on the availability of ambulances for emergency responses. Research evidence also indicates that these delays adversely affect patient care and outcomes. It is incumbent on receiving hospitals and ambulance providers to minimize the time required to transfer patient care following arrival at the hospital and return ambulances to service.

It has been our expectation that within 15-30 minutes of arrival, hospitals will promptly accept report, and move the patient to an emergency department bed or have the patient seated in a hallway chair or waiting room, if appropriate. Our prehospital personnel should work cooperatively with receiving hospital staff to ensure the timely and appropriate transfer of patient care and act to minimize offload delays.

Upon arrival in the emergency department, any patient, excluding patients on a legal psychiatric hold, who meet ALL the following criteria may be placed in the emergency department waiting room or other appropriate location:

- Normal vital signs
 - A. Heart rate 60 - 100 /Min.
 - B. Respiratory rate 10 - 20 /Min.
 - C. Systolic BP 100 - 180 mmHg
 - D. Diastolic BP 60 - 100 mmHg
 - E. Room air pulse oximetry >94%
 - F. Alert and oriented to person, place, time and situation
- No parenteral medications were administered by prehospital personnel with the exception of an anti-emetic.
- In the judgment of the Paramedic/EMT-P, the patient does not require continuous cardiac monitoring.
- The patient does not require a saline lock or intravenous (IV) line. If a saline lock or IV line was placed in the prehospital setting, it can be removed by the paramedics.
No patient with IV access should be placed in an ED waiting room.
- The patient can maintain a sitting position without adverse impact on their medical condition, dignity or obvious risk of fall.
- A verbal report and PCR is provided to a charge nurse or their designee prior to leaving the patient at the hospital.
- Document this triage in your PCR

Our overarching goal is to provide excellent, appropriate and respectful medical care for our patients and appropriate 911 ambulance coverage for our community. Thank you for working with us to improve the quality of care that we provide to the residents and visitors of Alameda County.

- Trip
- Patient
- Subjective
- Objective
- Vital Signs
- Interventions
- Outcome**
- Review

- Outcome**
- Tab Not Used
- Signatures

Pt. Position	
Transport Priority	
Patient Acuity	
Berkeley Fire Tran...	
Transport Delay	<None>
Transport Agency	Paramedic...
Transport Type	
Transport Unit Level	
Transport Unit Num...	
Drop Off	
Destination Reason	
Destination Triage	
Facility Name	Alameda C...
Department	
Address 1	1411 EAST...
Address 2	

Patient Triage To: (23 of 37)

N/A
Triage to Chair or Waiting Room
Triage to Gurney



Unselect

- Inbox
- Complete PCR
- Help
- Options
- Attach
- Previous
- Next