



Emergency Interfacility Transfer

A. Purpose

The *Emergency Interfacility Transfer* protocol is intended to clearly define when ambulance services may consider requests from sending facilities, for the interfacility transfer of a patient, to qualify as an “emergency” and thus be handled as would a 911 scene call and use the last ambulance in their coverage area.

B. Definitions

For the purpose of this protocol, an “Emergency Interfacility Transfer” is for patients who are deemed:

- hemodynamically unstable, or
- critically ill, or injured with an immediate life, limb or sight threatening condition
- *AND* requiring an immediate *time-dependent intervention* that is not available at the sending facility.

C. Policy

1. An emergent request meeting the established criteria shall be prioritized as an emergent response for the ambulance for the purpose of resource assignment. Ambulances will respond without the use of lights and sirens.
2. First responders shall not be sent unless specifically requested by the sending facility.
3. The ambulance personnel transporting the patient shall adhere to the Use of Emergency Lights and Siren during Transport protocol. The sending facility has no authority to define the mode of transport.
4. Any request for emergent transfer determined to be based upon non-factual information for the purposes of obtaining faster transfer service for a non-emergent patient shall result in notification of the Genesee County Medical Control Authority via written communication within 48 hours.
5. If an Emergency Interfacility Transfer is called to an ambulance service, and that ambulance service does not have the capacity to respond to the transfer in a timely manner, as they would an emergency call, then the sending facility will contact a different ambulance service until the resource can be secured.