


<b>Title: On-line Medical Control Back-up Procedures – Primary Care Paramedics</b>	<input checked="" type="checkbox"/> Policy <input checked="" type="checkbox"/> Procedure <input type="checkbox"/> SOP
<b>Category:</b> Medical Control <b>Dept/Prog/Service:</b> Base Hospital Program	<b>Distribution:</b> NW Region Ambulance Operators & Paramedics, Thunder Bay CACC, Kenora CACC, TBRHSC Emergency Department, Base Hospital Physicians
<b>Approved:</b> Program Medical Director & Program Manager	<b>Approval Date:</b> Nov 2005 <b>Reviewed/Revised Date:</b> May 2017
<b>Signature:</b> 	

**CROSS REFERENCES:** On-line Medical Control PCP (MC-100); On-Line Medical Control ACP (MC-100B); On-line Medical Control (MC-100D)

## 1. PURPOSE

The purpose of this policy is to clarify the back-up procedure for the Primary Care Paramedic when contacting the Base Hospital Physician, after initial contact procedures have been unsuccessful and there is immediate access to a tele/cell phone.

Armstrong is not included in this policy. On-line Medical Control for Armstrong may be found within Policy MC 100D ARMSTRONG On-line Medical Control.

## 2. POLICY STATEMENT

The paramedic must use good judgment when choosing to use the back-up procedures for contacting the BHP. The paramedic will need to consider the necessity of BHP contact and time to ED versus delaying transport of unstable or traumatized patients. Guidelines:

- i. Do not delay transport for with any trauma patient – VSA or otherwise. Trauma patients require life saving intervention which only the hospital can provide.
- ii. Do not delay transport if your radio is “out of range” vs. out of service/broken/failed:  
+Remember – you may not have the opportunity to contact a BHP en-route if your equipment has failed. How will this impact your patient?  
+If range is the issue for the radio failure, begin your protocol and/or rapid transport and contact the BHP while en-route.
- iii. Field pronouncements are considered a reasonable situation for when a delay in transport might occur to obtain a patch.

A request for the BHP may be required as in the medical directive/standing order, or it may be as requested by the Paramedic at anytime they feel it is necessary. It must be clear that the existence of a medical directive/ standing order does not prohibit the Paramedic and BHP consultation prior to, or after, instituting a procedure.

Controlled medical acts may only be performed if they are: WITHIN YOUR SCOPE OF PRACTICE and DIRECTED BY A CERTIFIED BASE HOSPITAL PHYSICIAN.

## 3. DEFINITIONS

- i. Ambulance Call Report (ACR): is either a written or electronic and contains all the required documentation and information as per the Ontario Ambulance Documentation Standards
- ii. Controlled Act: as set out in subsection 27 (2) of the Regulated Health Professions Act, 1991
- iii. Paramedic: as defined in subsection 1(1) of the Ambulation Act Ontario Regulation 257/00

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- iv. Primary Care Paramedic (PCP): as defined in subsection 8 (1) of the Ambulation Act Ontario Regulation 257/00
- v. Advanced Care Paramedics (ACP): defined in subsection 8 (2) of the Ambulation Act Ontario Regulation 257/00

#### 4. PROCEDURE

##### REQUESTING A PATCH:

KENORA DISTRICT

RAINY RIVER DISTRICT

- a. **Dial 1-800- 463-7502 outside of the City of Kenora (no charges will apply)**
- b. **Dial 468-4598 within the City of Kenora**
- c. This number will connect you directly to Kenora CACC. Advise the person answering the phone that you were unable to get through to them by radio and you require a Base Hospital Physician patch by telephone.
- d. The program Medical Director, or designate, will be paged.
- e. Wait for further direction from CACC.

THUNDER BAY DISTRICT - EASTERN REGION

- a. **Dial 1- 800- 348-5019 the “in watts line” (no charges will apply)**
- b. This number will connect you directly to Thunder Bay CACC. Advise the person answering the phone that you were unable to get through to them by radio and you require a Base Hospital Physician patch by telephone.
- c. The program Medical Director, or designate, will be paged.
- d. Wait for further direction from CACC.

CITY OF THUNDER BAY

SHUNIAH, CONMEE AND UPSALA

- a. **Dial 475-3531**
- b. This number will connect you directly to Thunder Bay CACC. Advise the person answering the phone that you were unable to get through to them by radio and you require a Base Hospital Physician patch by telephone.
- c. The program Medical Director, or designate, will be paged.
- d. Wait for further direction from CACC.

##### DELIVERING THE PATCH:

- I. Confirm the connection is adequate and then identify yourself.
- II. Identification to the BHP will include:
  - i. your name
  - ii. level of training (PCP)
  - iii. vehicle number
  - iv. location ( Ignace, Marathon or Red Lake for example)
- III. Proceed with the patch
- IV. Include the ETA to your destination at the end of your patch

## DOCUMENTING THE PATCH:

- I. Document the patch information onto the ACR after the call.
- II. Documentation of each patch made will include:
  - i. time of patch request (incl. unsuccessful attempts\*)
  - ii. time patch received
  - iii. order(s) given
  - iv. Physician who gave the order(s)
  - v. attach the BHP Log Form to the ACR, if possible

**NOTE:** You must document any unsuccessful attempts to contact the BHP onto the ACR and include the time each attempt was made. When there are failed attempts to contact the BHP \* A *CONTROLLED MEDICAL ACT INCIDENT REPORT MUST BE SUBMITTED TO BASE HOSPITAL WITH THE ACR*. This will confirm your attempts to contact the BHP, and it will allow Base Hospital to correct any deficiencies with the on-line medical control process. There are copies of this form in the paramedic documentation room in Thunder Bay RHSC and at each COTB Ambulance Base. It is also available on the Base Hospital website.

**NOTE:** The Physician who gave you the order(s) is responsible to fill out the Base Hospital Physician Log Form. This form can be found at the physicians' desk in C Area. When completed this form will verify any order(s) you were given. It is part of your legal ACR documentation, however, it will be collected and attached to the ACR by a Base Hospital Staff Member.

Should the transport of the patient not end at the TBRHSC, such as would occur when in Kenora or Longlac, Base Hospital staff will attempt to locate the BHP Log Form and match it with the ACR you submit.

## **5. RELATED PRACTICES AND/OR LEGISLATIONS**

- i. *Ambulance Act (Ontario) and Ontario Regulation 257/00*
- ii. *Emergency Health Services Branch (EHSB), Ontario Ministry of Health and Long-term care (MOHLTC) and Thunder Bay Regional Health Sciences Centre (TBRHSC) Performance Agreement (PA), 2008*

## **6. REFERENCES**

- i. *Current EHSB MOHLTC Basic Life Saving (BLS) & Advanced Life Saving (ALS) Patient Care Standards(PCS)*
- ii. *Current EHSB MOHLTC Ontario Ambulance Documentation Standards*