

AG16 Extraordinary Measures

Objectives:

- To maintain the life of a specific patient, it may be necessary, in rare situations, for the online physician to direct an ALS prehospital provider to render care not explicitly listed within the TEMS regional Medical Protocols

General Information:

- Extraordinary care is defined as any situation not covered by the TEMS Regional Medical Protocols
- If the prehospital provider receives a physician order for care, but does not feel comfortable with the order or does not agree that it is absolutely necessary to maintain the life of the patient, he/she must document the “inability to carry out a physician order” in the narrative section of the PPCR
- A TEMS Regional Trauma Triage or EMS Non-Trauma Quality Improvement form must be submitted by the receiving physician and the primary ALS provider immediately following the incident
- The agency medical director, specialty physician, attending physician, primary ALS provider and trauma attending physician (if applicable) must conduct a review of the incident for the purpose of quality improvement



Warnings/Alerts:

- All of the following essential criteria must be met:
 - a) The online physician and the provider must agree that the procedure is not addressed elsewhere in the protocols and that the procedure is absolutely necessary to maintain life of the patient
 - b) The provider must feel capable, based on the direction given by the online physician, of correctly performing the procedure
 - c) The prehospital provider must inform the consulting and receiving physician (s) of the effect of the treatment upon arrival at the receiving hospital

OMD Notes:

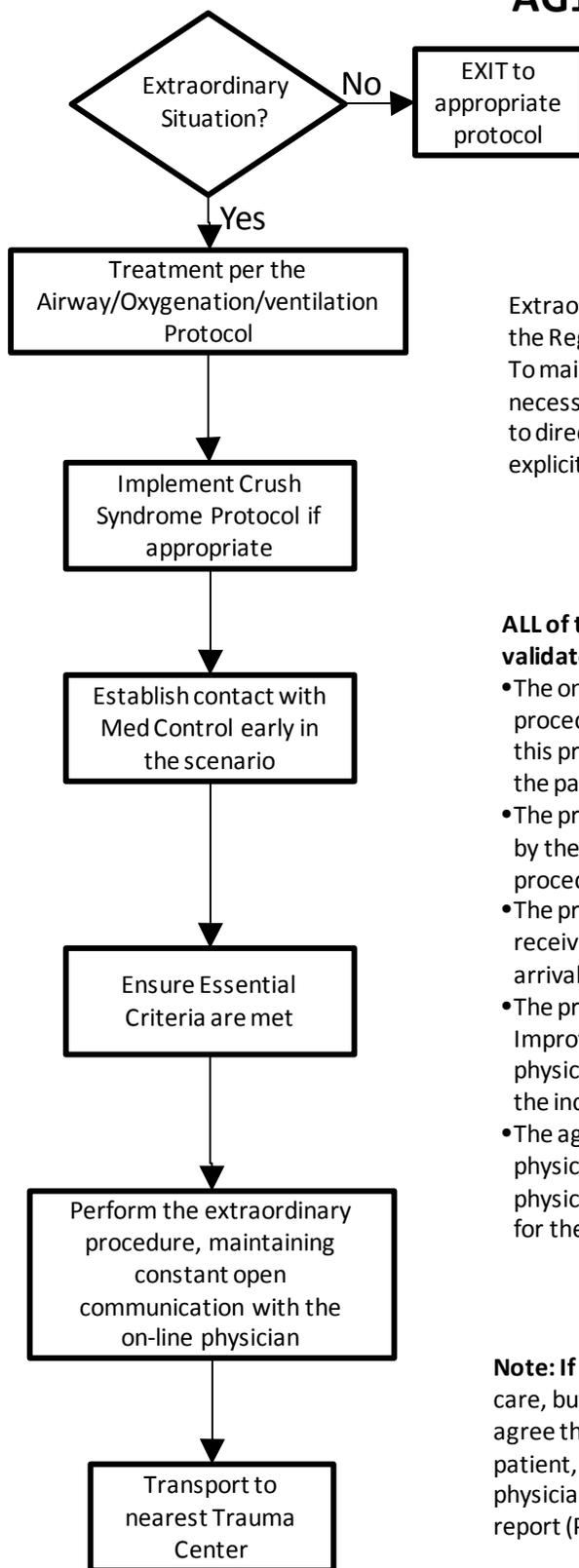
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References:

Performance Indicators:

Onset of Injury (Physician Name)	Condition of Airway Procedure Performed	Patient Packaging Patient Response	Online Medical Control Scene Time
Transport to Appropriate Facility			

AG16--Extraordinary Measures



Extraordinary care is defined as any situation not covered by the Regional Medical Protocols.

To maintain the life of a specific patient, it may be necessary, in rare situations, for the on-line physician to direct an ALS pre-hospital provider to render care not explicitly listed within the Regional Medical Protocols.

ALL of the following ESSENTIAL CRITERIA MUST BE MET to validate this protocol:

- The on-line physician and the provider must agree that the procedure is not addressed elsewhere in the protocols and this procedure is absolutely necessary to maintain the life of the patient.
- The provider must feel capable, based on the direction given by the on-line physician, of correctly performing the procedure.
- The pre-hospital provider must inform the consulting and receiving physician(s) of the effect of the treatment upon arrival at the receiving hospital.
- The proper Trauma Triage or EMS Non-Trauma Quality Improvement (QI) form must be submitted by the receiving physician and the primary ALS provider immediately following the incident.
- The agency medical director, specialty physician, attending physician, primary ALS provider and trauma attending physician (if applicable) must conduct a review of the incident for the purpose of quality improvement.

Note: If the pre-hospital provider receives a physician order for care, but does not feel comfortable with the order or does not agree that it is absolutely necessary to maintain the life of the patient, he/she must document the "inability to carry out a physician order" in the narrative of the pre-hospital patient care report (PPCR).