

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
EMT – Basic, EMT – Paramedic**

SMO: Intercept Criteria

Overview: Although BLS care is at the heart of all emergency care, it is clear that there are patients that will also be in need of ILS/ALS care. It is in these instances that BLS Providers must consider and determine the availability of an ILS/ALS intercept.

INFORMATION NEEDED

- EMT's general impression of the patient
- vital signs and level of consciousness
- medical history/ history of present illness or event

OBJECTIVE FINDINGS—ALS care should be initiated according to the following guidelines

- Patient with abnormal vital signs—use assessment skills and common sense. The following guidelines for adults:
 - Pulse < 60 or > 130; or irregularity
 - Respirations <10 or > 28; or irregularity
 - Systolic BP < 90 or diastolic > 110A
- Any patient with a potentially life-threatening condition which exists or might develop during transport. Examples of situations in which ALS care is usually indicated include, but are not limited to:
 - Altered mental status and/or unconsciousness
 - Chest pain
 - Seizures
 - Neurologic deficit/ stroke
 - Syncope
 - Abdominal pain
 - Shortness of Breath
 - Signs of impending hypovolemic shock
 - Complication of pregnancy or emergency childbirth
 - GI bleeding
 - Trauma patient
 - Overdose/ Poisoning
 - Pulse oximeter reading < 90
 - any time patient's condition warrants advanced prehospital medical care
- Call for ILS/ALS intercept EARLY. NEVER discontinue ILS/ALS care once initiated.

PROCEDURE

- ___ Upon request of BLS ambulance for assistance, an ILS/ALS crew may board the BLS vehicle and begin care of the patient.
- ___ All ILS/ALS equipment must be transferred to the BLS ambulance to render a higher level of care.
- ___ The Paramedics will assume responsibility from the EMT's for the care and treatment of the patient.
- ___ EMT's should assist the Paramedics enroute and on the scene, and work together as a team to provide the best patient care possible.
- ___ The BLS ambulance will be approved by the Department to function as an ILS/ALS ambulance for the transport.
- ___ Report to Medical Control will be the responsibility of the Paramedic.

Documentation of adherence to protocol:

- ___ Supportive documentation leading to decision for the ILS/ALS intercept (see objective findings).
- ___ Name of ILS/ALS crew that responded.
- ___ Documentation of patient care rendered both before intercept (responsibility of the BLS Provider) and after the intercept (responsibility of the ILS/ALS Provider).
- ___ Unavailability of the ILS/ALS Provider for intercept, if applicable.

Medical Control Contact Criteria

___ Contact Medical Control if any question arise regarding the best treatment options for the patient.

PRECAUTIONS AND COMMENTS

- No request from the field for ILS/ALS intercept will be denied.
- Be familiar with local System procedure regarding calling for an ILS/ALS intercept (i.e. who contacts the ILS/ALS intercept, how connections are made regarding location of the patient/ BLS ambulance while enroute, etc.)