



EMERGENCY SERVICES
BOROUGH of MOOSIC



STANDARD OPERATING GUIDELINE

TOPIC: EMS Operations	SOP# 1.8
Approved by: Chuck Molinaro, Chief	Revised: Approved: 09/07

I. PURPOSE

- a. To provide a guideline for safe and efficient operations for Ambulance personnel at the scene of an emergency call.

II. POLICY

- a. All personnel shall adhere to general scene safety procedures at all times. Refer to the PA State BLS Protocols provided in the EMS Reference Manual.
- b. All personnel shall adhere to Body Substance Isolation procedures as outlined in the State BLS Protocols provided in the EMS Reference Manual.

III. PROCEDURE

- a. Ambulance Placement
 - i. The driver shall position the ambulance so as to provide the shortest, easiest, and safest access to the patient.
 - ii. The driver shall position the ambulance so as to avoid the possibility of being blocked in by other vehicles.
 - iii. If possible, the driver shall position the ambulance so as not to block vehicular traffic or public roadways. **** See Fire SOG/SOP for additional guidelines.**
- b. On Scene Operations
 - i. Driver
 1. Positions the ambulance appropriately
 2. Assists AIC with jump bag/oxygen bag
 3. Develops a plan for the removal of the patient
 - a. Determines the equipment needed
 - b. Determines the best route
 4. Confers with the AIC to determine the need for additional resources
 5. Assists the AIC with patient care as needed
 - ii. Attendant-in-Charge (AIC)
 1. Obtains patient report from first responder or bystanders on scene (if applicable)
 2. Establishes patient contact
 3. Formulates a treatment plan
 - a. Communicates the need for additional resources to the driver
 4. Initiates patient care/treatment as necessary and according to protocol
 - a. Delegates tasks to driver/attendant/fire department personnel as necessary

- b. Transfers care to ALS paramedic (if applicable)
- 5. Insures complete documentation of the call

(Page 2 SOP 1.8)

c. At the Hospital

i. Driver

1. Positions the ambulance as appropriate for the unloading of the patient
2. Directs the unloading of the patient
3. After the patient care has been transferred to hospital staff
 - a. Disinfects the cot/equipment as necessary
 - b. Dresses the cot using clean linens
 - c. Cleans/decontaminates the patient compartment of the ambulance and returns all equipment to its proper locations
 - d. Replaces the cot in the ambulance
4. Replaces any disposable equipment used during the call (cervical collars, oxygen delivery devices, dressings, etc....)
5. Notifies Lacka. County 911 if the ambulance will be out of service (OOS) for an extended period of time, i.e. Decontamination
6. Returns the unit to service with Lacka. County 911

ii. AIC

1. Transfers patient care to hospital staff
2. Gives report to facility staff
3. Ensures that the patient is registered and all appropriate information is given to staff and signatures obtained for billing/HIPAA purposes
4. Provides a HIPAA pamphlet to the patient or family
5. Ensures that all patient possessions and medications are delivered to the appropriate personnel
6. Assists the driver as needed

d. Return to Station

i. Driver

1. Refuel ambulance as needed
2. Rinse/wash ambulance as needed
3. Help AIC as needed

ii. AIC

1. Decontaminates any OOS equipment retrieved from hospital
2. Document what equipment is OOS and at where located
3. Restock any items not replaced at hospital or by ALS unit
4. Document what stock items are low in inventory and need replenishment (as needed, i.e. Oxygen cylinders, sterile water, glucose, gloves, ...)
5. Ensures ambulance is ready for service
6. Completes documentation and trip sheet accordingly (*NOTE: Trip sheets are to be completed in a timely fashion and within 24 hours of dispatch as per EMS of NEPA guidelines*)