


Name of Policy: EMS Bypass Policy Number: 3364-100-01-12 Approving Officer: Chief Executive Officer, Chief of Staff Responsible Agent: Medical Director, Emergency Department Scope: University of Toledo Medical Center and its Medical Staff		 Effective date: Original effective date: 11/3/1994	
Key words: EMS, Bypass, Guidelines, Volume, Patient Flow			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

The hospital will provide guidelines for situational decision-making during unexpected periods of time when patient volumes and/or conditions exceed the institution's ability to provide required care and/or services.

(B) Purpose of Policy

To maintain safe levels of care for patients arriving via the **Emergency Medical System** (EMS) at all times.

(C) Procedure

When **Emergency Department** (ED) patient volume or hospital census/bed availability and equipment and staffing resources nears capacity levels, the high census and patient flow protocols need to be implemented by the House Supervisor in order to avoid progression to EMS Bypass Status.

1. When ED volume/patient activity is approaching a point at which additional patient arrivals would exceed the ability of physicians and/or staff to safely care for patients, the charge nurse will notify the Nursing Director of the Emergency Department and the House Supervisor to develop an appropriate patient placement. EMS Bypass can only be initiated by the mutual agreement of the Medical Director of the Emergency Department **or designee**, the Medical Director of Trauma Services or designee and the Administrator on Call.
2. Upon determination for the need to initiate EMS bypass the entry will be placed in EMS system by Emergency Department charge nurse or house supervisor. Once the EMS Bypass has been

initiated, the House Supervisor, along with the ED attending and Charge Nurse, will reassess the status for continued EMS Bypass every hour.

When ED attending determines that EMS Bypass is no longer necessary the RD charge nurse or house supervisor will immediately make the necessary entry into the EMS computer system reversing the bypass order.

<p>Approved by:</p> <hr/> <p>Daniel Barbee Chief Executive Officer</p> <hr/> <p>Date</p> <hr/> <p>Puneet Sindhvani, MD Chief of Staff</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Medical Director, Emergency Department</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none"> • 7-1-12 <p>Initial effective date: 11/3/1994</p> <p>Review/Revision Date:</p> <p>9/11/96 4/14/99 10/10/01 11/10/04 4/23/08 8/25/2011 8/1/2014 6/1/2020 6/1/2023</p> <p>Next review date:</p>
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