



**DEFINITIONS**



Unless the context or an individual policy or law otherwise requires, the definitions contained in this section shall govern the provisions of these OCEMS Policy and Procedures.

**"Acute"** means of short or intense course, not chronic, of recent or sudden onset.

**"Acute status"** means immediate need for definitive care other than CPR, vital signs dangerously abnormal, symptoms/complaints of medium severity.

**"Adjunct"** means equipment, special devices and drugs used by specially trained personnel to assist them in the performance of life support measures. Examples: airway, cardiac monitor, intravenous infusion, oxygen, lidocaine.

**"Advanced life support"** or **"ALS"** means special services designed to provide definitive prehospital emergency medical care, including but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the direct supervision of a base hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital, during interfacility transfer, and while in the emergency department of an acute care hospital until responsibility is assumed by the emergency or other medical staff of that hospital. (Health and Safety Code.

**"Advanced life support unit"** or **"ALS unit"** means an emergency vehicle, such as a van, engine company, truck company, squad, helicopter or other emergency vehicle that is specially equipped and staffed by certified emergency medical technician-paramedics to provide advanced life support to the sick and injured at a medical emergency.

**"Air ambulance"** means any aircraft specially constructed, modified or equipped, and used for the primary purposes of responding to emergency calls and transporting critically ill or injured patients whose medical flight crew has at a minimum two (2) attendants certified or licensed in advanced life support. (Title 22

**"Authority"** or **"EMS Authority"** means the Emergency Medical Services Authority, the State's lead agency established by the H&S Code, Divisions 2.5.

**"Automatic aid"** means a contract between two or more agencies agreeing to an exchange of emergency response units, such as fire apparatus, paramedic unit, etc., to a predetermined geographical area, regardless of political boundaries to deal with day to day emergencies. Also, see Mutual Aid.

**"Base hospital"** or **"BH"** means one of a limited number of hospitals which, upon designation by the local EMS agency and upon the completion of a written contractual agreement with the local EMS agency, is responsible for directing the advanced life support system or limited advanced life support system and prehospital care system assigned to it by the local EMS agency. (Health and Safety Code)

**"Base hospital physician"** or **"BHP"** means a physician and surgeon who is currently licensed in California, who is assigned to the emergency department of a base hospital, and who has been trained to issue advice and instructions to prehospital emergency medical care personnel consistent with statewide guidelines established by the Authority. (Health and Safety Code)

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Reformatted Date: March, 2004



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**"Basic life support" or "BLS"** means emergency first aid and cardiopulmonary resuscitation procedures which, as minimum, include recognizing respiratory and cardiac arrest and starting the proper application of cardiopulmonary resuscitation to maintain life without invasive techniques until the victim may be transported or until advanced life support is available. (Health and Safety Code)

**"Cardiopulmonary resuscitation (CPR)"** means opening and maintaining an airway, providing artificial ventilation by rescue breathing and providing artificial circulation by means of external cardiac compression, and as otherwise defined by the American Health Association and the American Red Cross.

**"Central treatment area"** means in the setting of an MVI, a specifically identified area to which patients designated as being either "Immediate" or "Delayed" are collected, treated and re-evaluated while awaiting transport. This method allows for efficient use of medical supplies and personnel.

**"Certificate"** means a specific document issued to an individual denoting competence in the named area of prehospital service. (Health and Safety Code)

**"Certifying examination" or "examination for certification"** means an examination designated by the Authority for a specific level of prehospital emergency medical care personnel that must be satisfactorily passed prior to certification or re-certification at the specific level and may include any examination or examinations designated by the Authority, including but not limited to, any of the following options determined appropriate by the Authority: (Health and Safety Code)

- a. An examination developed either by the EMS Authority or under the auspices of the Authority or approved by the Authority and administered by the Authority or any entity designated by the Authority to administer the examination.
- b. An examination developed and administered by the National Registry of Emergency Medical Technicians.
- c. An examination developed, administered, or approved by a certifying agency pursuant to standards adopted by the Authority for the certification examination.

**Closed: ED saturation** means the emergency department (ED) resources are fully committed and are not available for additional incoming critical (ALS) and/or seriously ill (above moderate) patients despite efforts by the hospital to accommodate peak loads.

**"Closed: Neuro"** (applies to neuro centers only) means the hospital is unable to provide appropriate neuro care due to the unavailability of a neurosurgeon or CT scanner.

**"Closed: Trauma"** (applies to trauma centers only) means the trauma team is unable to respond due to commitment to provide surgical care to another trauma patient.

**"Closed: Internal disruption"** means the paramedic receiving center cannot receive any patients because of a physical plant shutdown, (e.g., fire, bomb threat, power outage, etc.).

**"Competency based curriculum"** means a curriculum in which specific objectives are defined for each of the separate skills taught in training programs with integrated didactic and practical instruction and successful completion of an examination demonstrating mastery of every skill. (Health and Safety Code)

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Reformatted Date: March, 2004



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**"Critical trauma victim" or "CTV"** means a victim of blunt or penetrating trauma which results in any of the following alterations in vital signs and/or mechanism of injury:

- Resp < 12 or > 30
- Pulse < 50 or > 130
- Systolic BP < 80 or
- Penetrating wounds to the neck, chest or abdomen.

**"Deceased (patient)"** means fourth (last) priority in patient treatment according to the S.T.A.R.T. triage system.

**"Delayed (patient)"** means second priority in patient treatment according to the S.T.A.R.T. triage system. These patients require aid, but injuries are less severe or pose no immediate threat to life. A hospitalized patient may be categorized from "guarded" to "serious"; a patient requiring at least minimal hospital services.

**"Definitive care"** means a level of therapeutic intervention capable of providing comprehensive health care services for a specific condition.

**"Dependent adult abuse"** means any adult, 18 years of age or older, dependent on others for care, who is subject to physical abuse, fiduciary abuse, abandonment or neglect. (Health & Welfare, Chapter 273)

**"Designated facility"** means a hospital which has been designated by the local EMS Agency to perform specified emergency medical services system functions pursuant to guidelines established by the Authority. (Health and Safety Code)

**"Disaster"** means a perilous condition which exceeds a jurisdiction's capability to control it with immediately available resources.

**"Disaster medical assistance team" or "DMAT"** means an organized group of volunteers chartered by the National Disaster Medical System for activation and response to disasters within or outside the U.S. for the purpose of carrying out a medical mission.

**"Disaster medical services"** means those medical services provided to disaster victims which minimize morbidity and mortality.

**"Discharged alive"** means a patient discharged from a hospital alive regardless of his/her neurologic status.

**"Do-not-resuscitate (DNR)"** means a physician order to withhold the following medical treatments in the event of cardiac and/or respiratory arrest: chest compressions, defibrillation, assisted ventilation, intubation, and advanced life support "cardiotonic" medications.

**"Elder abuse"** means physical abuse, fiduciary abuse, abandonment or neglect of an adult 65 years or older. (Health Welfare, Chapter 273)

**"Emergency" or "emergent"** means a condition or situation in which an individual has a need for immediate medical attention, or where the potential for such need is perceived by emergency medical personnel or a public safety agency. (Health and Safety Code)

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**"Emergency ground ambulance"** means a surface transportation vehicle that is specially designed, constructed, maintained, supplied, equipped, and intended for exclusive use in emergency transport of the sick and injured. (State EMS Guidelines)

**"Emergency ambulance service"** means an emergency medical transport provider operating within an organized EMS system for the purpose of assuring twenty-four (24) hour availability of such services, including communications, and supportive business management mechanisms. This pertains to all ground, air or water emergency medical transport. (State EMS Guidelines)

**"Emergency department"** or **"ED"** means the area of a general acute care facility that is licensed to receive patients in need of emergency medical evaluation and/or care.

**"Emergency medical condition"** means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in any of the following: (PH & W Code 42)

- Placing the patient's health in serious jeopardy.
- Serious impairment to bodily functions.
- Serious dysfunction of any bodily organ or part.
- Endanger the health of a woman and her unborn child.

**"Emergency medical dispatcher"** or **"EMD"** means any person employed by an agency providing emergency medical dispatch service who has completed the local Emergency Medical Services Agency approved EMD training program consistent with the guidelines. (State EMS Authority EMD Training Guidelines)

**"Emergency medical dispatch system"** means a specialized communications system responsible for consumer access to emergency medical services, the centralized dispatch and coordination of EMS resources, the designation of nearest appropriate EMS responders, and the coordination of EMS resources with other public safety services. (State EMS Authority EMD Training Guidelines)

**"Emergency medical dispatcher training program"** means the local Agency approved program which meets the required course content and structure specifications of the State EMS Authority EMD Training Guidelines for training emergency medical dispatchers. (State EMS Authority EMD Training Guidelines)

**"Emergency medical services"** means the services utilized in responding to a medical emergency. (Health and Safety Code)

**"Emergency Medical Services (EMS)"** means an agency, within the Health Care Agency (HCA) designated by the County of Orange, in accordance with Health and Safety Code Section 1797.200, to administrate the Emergency Medical Services System.

**"Emergency medical services area"** or **"EMS area"** means the geographical area within the jurisdiction of the designated local EMS agency. (Health and Safety Code)

**"Emergency medical services plan"** means a plan for the delivery of emergency medical services consistent with State Guidelines addressing the components listed in Division 2.5 of the Health and Safety Code, Section 1797.103 (Health and Safety Code)

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**DEFINITIONS**



**"Emergency medical services system" or "system"** means a specially organized arrangement which provides for the personnel, facilities, and equipment for the effective and coordinated delivery in an EMS area of medical care services under emergency conditions. (Health and Safety Code)

**"Emergency medical technician-D" or "emergency medical technician defibrillator"**, means an emergency medical technician-I accredited to perform defibrillation.

**"Emergency medical technician-I" or "EMT-I"** means an individual trained in all facets of basic life support according to standards prescribed by State law and who has a valid certificate issued pursuant to the State law. This definition shall include, but not be limited to, EMT-INA and EMT-IA. (Health and Safety Code)

**"Emergency medical technician-paramedic," EMT-P" or "paramedic"** means an individual whose scope of practice to provide advanced life support is according to standards prescribed by the law and who has a valid certificate issued pursuant to the law (Health and Safety Code)

**"Emergency operations center" or "EOC"** means a secured location where disaster/emergency mitigation and recovery efforts may be directed and coordinated by those designated authorities.

**"Emergency response"** means a vehicle response to the scene of an incident that threatens lives or property that requires the use of emergency warning devices in accordance with California Vehicle Code Section 21806.

**"Emergency transfer"** means transport of an emergency patient from a paramedic receiving center to a specialized receiving center.

**"Escorted patient"** means a patient transported and escorted by an emergency medical technician-paramedic from the scene of an emergency to a receiving center.

**"Extreme casualty event" or "XCE"** means a suddenly occurring event which injures many individuals and presents conditions which overwhelm the County's entire medical response system.

**"First responder"** means the first person (unit) dispatched to the scene of a medical emergency to provide patient care. At minimum, a first responder must be certified as a first responder by the State Fire Marshall and trained in cardiopulmonary resuscitation.

**"First responder-defibrillator"** means first responder personnel who are trained and accredited to utilize automatic and/or semi-automatic cardiac defibrillators. (Title - 22)

**"Health Care Agency - County of Orange"** means the local government (county) agency which is designated to develop, issue and regulate policy in areas of public health and welfare.

**"Hospital emergency administrative radio" or "H.E.A.R."** means the voice component radio which is part of the ReddiNet<sup>®</sup>/H.E.A.R. system designed with the purpose of assisting acute care hospital communication in time of crisis. The ReddiNet<sup>®</sup>/H.E.A.R. is also used by Orange County EMS to assess hospital operational/resource status following a disaster.

**"Hospital emergency incident command system" or "HEICS"** means a generic medical response template developed by Orange County EMS to provide health care facilities with an incident command based standardized emergency response plan.

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**"Hospital disaster support communication system" or "HDSCS"** means a volunteer organization of amateur radio operators who respond to hospitals in time of crisis to make available additional communication resources.

**"Immediate (patient)"** means first level of patient priority according to the S.T.A.R.T. triage system. A patient who requires rapid assessment and medical intervention in order to increase chances of survival. A hospitalized patient who may be classified from "serious" to "critical" condition requiring constant nursing care.

**"Immediately" or immediately available"** means (a) unencumbered by conflicting duties or responsibilities; (b) responding without delay when notified; and (c) being within the specified area of the trauma center when the patient is delivered in accordance with the local EMS Agency policies and procedures.

**"Incident commander"** means the individual who holds overall responsibility for incident response and management.

**"Incident command system" or "ICS"** means a management system that is based on the F.I.R.E. S.C.O.P.E. system of controlling resources at the scene of an emergency. The ICS defines roles, relationships and functions of the different individuals responding to an emergency situation.

**"Interval"** means the time interval between measured times:

**"Call response interval"** means the period from the time of receipt of call by 9-1-1 (PSAP) to the moment the emergency response vehicle stops moving.

**"9-1-1-call-to-service provider dispatch center interval"** means the time from receipt of the call for assistance at the 9-1-1 until the call is transferred to the service provider dispatch center.

**"Call to defibrillation interval"** means the interval from receipt of the call at the 9-1-1 center until the patient receives the first shock.

**"Provider agency dispatch interval"** means the time from transfer of the call for assistance to the provider agency from 9-1-1 to the alarm at the time provider agency responder.

**"9-1-1-call-to-responder alarm interval"** means the time from receipt of the call for assistance until the alarm sounds in the provider station.

**"Provider agency vehicle activation interval"** means the time from the dispatch alarm sounding to the time the response vehicle begins moving.

**"Vehicle-dispatch-to-scene interval"** means the interval from when the emergency vehicle departs for the scene until the time the EMS responders indicate the vehicle has stopped at the scene or address.

**"Vehicle-at-scene-to-patient-access interval"** means the interval from when the emergency response vehicle stops moving at the scene or address until EMS responders are at the side of the patient.

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**"Intubation attempt"** means insertion of the laryngoscope blade into the mouth looking for cords (attempting to visualize). Exception: an attempt made solely to facilitate the use of the Magill forceps to clear an airway obstruction. (State of California EMT-P Skills Examination Manual)

**"Local EMS agency"** means the agency, department or office having primary responsibility for administration of emergency medical services in a county and which is designated by the County pursuant to Chapter 4 (Health and Safety Code).

**"Mass casualty event"** or **"MCE"** means an event which occurs suddenly injuring many individuals and which overwhelms one or more of the medical response system within the County; thus causing medical mutual aid to be requested from sources outside of Orange County.

**"Mass casualty incident"** or **"MCI"** means an emergency incident in which the incident commander determines that the number and extent of casualties exceeds the communication capabilities of the day-to-day advanced life support system. A MCI event also exceeds the local responder's ability to manage casualties utilizing the Orange County Multiple Victim Incident Plan.

**"Medical aid station"** or **"MAS"** means a neighborhood disaster medical resource center; which is organized under a three-way partnership; 1) a sponsoring city, 2) host medical site, and 3) community volunteers. The MAS is organized to provide the most advanced level of immediate medical care available to a local population following a medical crisis.

**"Medical aid station incident command system"** or **"MASICS"** means a generic medical response template developed by Orange County EMS to provide a system for organized emergency care from a neighborhood resource/site in the event of a medical disaster.

**"Medical communications coordinator"** or **"MedCom"** means an individual designated by the Incident Commander to establish and maintain medical communications with the assigned Base Hospital, to select modes of transportation and patient destination based upon information communicated from the base.

**"Medical control"** means the medical management of the emergency medical services system pursuant to the provisions of Chapter 5, of the Health and Safety Code. (Health and Safety Code)

**"Medical director"** means the licensed physician and surgeon, having substantial experience in the practice of emergency medicine, designated by the County to provide medical control and assure medical accountability throughout the planning, implementation and evaluation of the EMS system. (Health and Safety Code)

**"Mild status"** means minor injury, vital signs within normal limits, minimal patient distress.

**"Minor (patient)"** means third priority of patient in the S.T.A.R.T. triage system. A patient requiring only simple, rudimentary first-aid. These patients are considered ambulatory. A hospitalized patient may be considered minor if they are in "stable" condition and capable of being treated and/or discharged.

**"Mobile intensive care nurse,"** or **"MICN"** means a registered nurse who is functioning pursuant to Section 2725 of the Business and Professions Code and who has been authorized by the medical director of the local EMS agency as qualified to provide prehospital advanced life support or to issue instructions to prehospital emergency medical care personnel within an EMS system according to standardized procedures developed by the local EMS agency consistent with statewide guidelines established by the authority. (Health and Safety Code)

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**"Moderate status"** means definitive care needed, vital signs deviate from normal, symptoms/complaints of medium severity.

**"Moderate trauma victim"** or **"MTV"** means a non-critical victim of multiple trauma. Parameters for consideration of MTV designation include:

- Mechanism of injury
- Unable to follow commands
- Abnormal capillary refill
- Age < 5 or > 65 years old
- Prolonged extrication
- Fatalities involved in the event
- Glasgow coma score (GCS) 10 or less

**"Mutual aid plan"** means the Orange County Mutual Aid Plan; a written contract between all agencies in Orange County wherein they agree to assist each other when an emergency occurs that exceeds the capabilities of any one agency. The Mutual Aid Plan is a countywide plan that can result in any one agency receiving assistance from any or all the other agencies in the County. Mutual aid extends to the regional area and to a statewide plan. (Also see automatic aid.)

**"Multiple victim incident"** or **"M.V.I."** means a multiple victim incident which has more patients involved in the incident than first available medical aid resources can handle. It will usually involve the use of multiple first responder units, ALS units and ambulances. An MVI is larger than the normal day-to-day incident, but is smaller than a disaster. A disaster typically involves the use of the H.E.A.R. network, but an MVI still uses the paramedic/coordinated communications system.

**"No contact call"** means a response to a request for emergency prehospital care in which ALS unit treatment is provided without base hospital contact.

**"Non-ambulatory (patients)"** means a treated patient who is NOT able to ambulant (walk) and requires the use of a hospital bed; is incapable of sitting up for extended periods of time; however, does not require intensive nursing care. Terminology utilized when transferring previously hospitalized (or institutionalized) patients from one location to another, i.e.: evacuation of a facility.

**"Orange County Communications"** or **"OCC"** mean a division within the County of Orange General Services Agency which has the responsibility for coordination of biomedical communications and communication frequencies. The "OCC" call sign is used within the Paramedic Coordinated Communications System.

**"Orange County Emergency Medical Services"** or **"OCEMS"** means the OCEMS System or Agency designated by the Board of Supervisors.

**"Operational control"** means the day-to-day supervision of employed personnel who are assigned different tasks and responsibilities in a provider agency. Operational control includes, but is not limited to, the areas of scheduling, workload allocations, task distribution, disciplining, and the setting of priorities for personnel that are hired and work for the provider agency.

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**"Paramedic assessment unit" or "PAU"** means an OCEMS approved fire company response vehicle which is staffed by a minimum of one (1) certified and Orange County accredited EMT-P and which meets OCEMS criteria as defined in policy.

**"Paramedic assessment unit EMT-P"** means a currently certified EMT-P accredited to practice in Orange County, and with a minimum of one year experience on an ALS unit, assigned to a PA unit.

**"Paramedic neurosurgical receiving center" or "PNRC"** means a hospital designated by the OCEMS Agency as meeting all locally established criteria for receiving base hospital designated neurosurgical patients.

**"Paramedic receiving center" or "PRC"** means a hospital designated by the OCEMS Agency as meeting all locally established criteria for receiving EMT-P escorted patients.

**"Paramedic trauma receiving center" or "PTRC"** means a hospital designated by the OCEMS Agency as meeting all the state and local criteria for receiving base hospital designated trauma patients.

**"Patient care capacity inventory"** means the number of "Immediate" and "Delayed" patients which a hospital has defined that it may care for at any given time as a result of a MVI or MCI.

**"Patient contact"** means any patient who is seen (visualized) by an EMT as there is an implied duty of the EMT to act (includes a patient released at scene or dead at scene).

**"Patient response"** means any time an EMS unit is dispatched to a call for a medical emergency to provide care (includes cancelled enroute, and false alarm).

**"Pediatric patient"** means a patient  $\leq 12$  year old or  $\leq 40$  kg in weight. The primary purpose for identifying these patients is to identify appropriate candidates for certain prehospital care procedures.

**"Physical abuse"** means any action with intent for bodily harm or any act which results in a non-accidental injury. (California Penal Code, Art 2.4)

**"Physical neglect"** means the negligent treatment or maltreatment of a dependent adult by a parent or caretaker under circumstances indicating harm or threatened harm to the dependent adult's health or welfare. The term includes both acts and omissions on the part of the responsible person. (California Penal Code, Art. 2.5 and Health & Welfare, Atr. 273)

**"Proficiency test"** means a practical examination designed to measure the performance of skills.

**"Promptly available"** means a period of time that is medically prudent and proportionate to the patient's condition and such that any interval of time between arrival of the patient at the facility and the arrival of the health care personnel at the facility should not be deleterious to the patient. (American College of Surgeons)

**"Quality improvement" or "QI"** means a method of monitoring and evaluating measurable components of the EMS system services which will establish statistical profiles for quality improvement actions.

**"Radio amateur civil emergency services" or "RACES"** provides for amateur radio operation for emergency communications purposes only during periods of local, regional, or national emergencies. Members of RACES organizations make their volunteer services available to municipal county and state governments; additionally, RACES will provide services wherever there is a need for life saving and property preserving assistance.

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"**Rapid emergency digital data information network**" or "**ReddiNet<sup>®</sup>**" means the data radio component which is part of the ReddiNet<sup>®</sup>/H.E.A.R. system designed with the purpose of assisting acute care hospital communication in time of crisis. The ReddiNet<sup>®</sup>/H.E.A.R. is also used by Orange County EMS to assess hospital operational/resource status following a disaster.

"**Receiving hospital**" means a licensed general acute care hospital with a special permit for basic or comprehensive emergency service, which has been formally assigned a role in the trauma care system by the local EMS Agency. (Health and Safety Code)

"**ReddiNet<sup>®</sup>/H.E.A.R. control point**" means a facility with communication capabilities (e.g. ReddiNet<sup>®</sup>/H.E.A.R.) which enable it to network with hospitals for the purpose of appropriate distribution of casualties following an MCI; and collect damage/resource data during a XCE.

"**Rescue aircraft**" means an aircraft whose usual function is not prehospital emergency patient transport but which may be utilized, in compliance with local EMS policy, for prehospital emergency patient transport when use of an air or ground ambulance is inappropriate or unavailable. Rescue aircraft includes ALS rescue aircraft, BLS rescue aircraft and auxiliary rescue aircraft. (Title 22)

"**Reserve ALS unit**" means a fully equipped emergency response vehicle that is capable of being activated by the provider agency as periodically deemed necessary for a short period of time (e.q. special event).

"**Service provider agency**" means an OCEMS approved organization that provides defined prehospital ALS services.

"**Specialty receiving center**" means a specific hospital designated by the Orange County EMS to provide a specialized and agreed upon level of service. Such specialties shall include, but are not limited to trauma, burn, and neurosurgical.

"**Standard of care**" means the acceptable level of treatment to be rendered to patients.

"**Standing orders**" means to expedite patient care, unless indicated as a BH order in the OCEMS Agency Treatment Guidelines, all treatments may be performed by the EMT-paramedic as a standing order.

"**Supportive patient care**" means all basic or advanced life support measures designed to relieve patient suffering or adverse symptoms other than the ones specifically listed in the definition of Do-Not-Resuscitate Order.

"**START**" means Simple Triage and Rapid Treatment. The START program describes a rapid method of triaging large numbers of patients at an MVI or MCI.

"**Therapeutic care**" means measures taken to relieve or cure bodily dysfunctions resulting from injury or illness.

"**Time**" means the start or ending point to determine measured times:

"**Time first CPR attempt**" means the time when CPR is first attempted whether by bystanders or by emergency personnel.

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**"Time first emergency response vehicle is mobile"** means the moment when the emergency response vehicle begins to move.

**"Time intubation achieved"** means the time of endotracheal or esophageal intubation.

**"Time of arrival at patient's side"** means the moment rescuers arrive at the patient's side.

**"Time of call receipt"** means the time a call for assistance is received by the first public safety operator (e.g., PSAP, 9-1-1).

**"Time of collapse"** means the time a patient with cardiac arrest is seen or heard to collapse.

**"Time of collapse recognition"** means the time when a victim of witnessed cardiac arrest is determined to need assistance by a witness or the time of discovery of un-witnessed cardiac arrest.

**"Time of first defibrillatory shock"** means the time the first defibrillatory shock is delivered to the patient. This could be either lay person defibrillation, first responder defibrillation, or advanced life support.

**"Time of return of spontaneous circulation (ROSC)"** means time of return of spontaneous circulation, the time when any spontaneous pulse is palpated by a rescuer.

**"Time vehicle stops"** means the time the emergency response vehicle stops moving, at a location as close as possible to the patient.

**"Transfer plan"** means a plan between health facilities providing reasonable assurance that transfer of a patient will be effected between the health facilities whenever such transfer is medically appropriate, as determined by the attending and receiving physicians.

**"Transported patient"** means a patient transported by ambulance from the scene of a medical emergency to a receiving center.

**"Trauma patient"** or **"major trauma patient"** or **"critically injured patient"** means a person who has sustained acute injury and by means of standardized field triage criteria is judged to be at significant risk of mortality or major morbidity. (Title - 22).

**"Triage"** means the process of sorting the sick and injured on the basis of type and urgency of condition present, to effect transport to the medical facility appropriately equipped for the specific care required.

**"Triage Categories"**

**"Immediate"** means first priority category for patient treatment. These patients required rapid assessment and medical intervention for survival.

**"Delayed"** means second priority category for patient treatment. These people require aid, but injuries are less severe.

**"Minor"** means third priority category for patient treatment. These people require aid, but injuries are the least severe.

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**"Urgent"** means a situation in which there is a real or perceived need for immediate action, attention, or decision making to reduce morbidity but where no life threatening situation appears to exist (EMS System guidelines).

**"Witnessed arrest"** means the patient's collapse was seen or heard by a bystander or emergency personnel.

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