



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.

"5150" means a patient who is held against his/her will for evaluation under the authority of Welfare & Institutions Code 5150 because the patient is a danger to him/herself, a danger to others, and/or is gravely disabled, e.g., unable to care for self. This written order may be placed by a law enforcement officer, County mental health worker, or an emergency physician certified by the County Mental Health Department to place an individual on a 5150 hold. (Pediatric equivalent is Welfare & Institutions Code 5585).

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

"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 Emergency Medical Technician" or "Advanced EMT" means a California certified EMT with additional training in limited advanced life support (LALS) according to the standards prescribed by law and who has a valid certificate issued pursuant to regulation. (*Health & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.82, Title 22, Div. 9, Ch. 3, Sec. 100103*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.52*)

"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 one or more OCEMS-accredited 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, Div. 9, Ch. 8, Sec. 100280*)

"AMA - Refusal of EMS Care and Transport Against Medical Advice" means a competent patient who is determined by an EMT/Paramedic or base hospital (BH) to have a medical problem which requires the immediate treatment and/or transportation capabilities of the EMS system, and who has been advised of his/her condition and the known and unknown risks and/or possible complications of refusing medical care, and who still declines medical care and transport.

"Ambulance" means a surface emergency transportation vehicle that is specifically constructed, modified, equipped, designed, used, and operated for transporting sick, injured, convalescing, infirm, or otherwise medically incapacitated persons in need of ambulance service. (*California Highway Patrol*)



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"Authority" or "EMS Authority" means the Emergency Medical Services Authority, the State's lead agency established by the *Health & Safety 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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.58*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.59*)

"Base hospital report" or "BHR" means documentation either on paper or via OC-MEDS by Base Hospital Personnel during base-contacted calls. If electronic, may also be referred to as "eBHR"

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.60*)

"Basic life support unit" or "BLS unit" means means an emergency vehicle, such as a van, engine company, truck company or other emergency vehicle that is specially equipped and staffed by one or more OCEMS-accredited EMTs to provide basic life support to the sick and injured at a medical emergency.

"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 Heart Association and the American Red Cross.

"Certificate" or "license" means a specific document issued to an individual denoting competence in the named area of prehospital service. (*Health & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.61(a).*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.63*)

- 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.



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- c. An examination developed, administered, or approved by a certifying agency pursuant to standards adopted by the Authority for the certification examination.

"Closed: Cardiac" (applies to CVRC Designated Facilities only) means the cardiovascular catheterization laboratory team is unable to respond due to commitment to provide invasive cardiovascular services to another CVRC patient.

"Closed: CT" means the emergency receiving center is unable to provide diagnostic computed tomography (CT Scan).

"Closed: ED saturation" means the emergency department (ED) resources are fully committed and it is unsafe to accept additional incoming patients.

"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.).

"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.

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.66*)

"Competent" means an Adult patient (or independent minor), has the capacity to understand the circumstances surrounding his/her illness or impairment, and the risks associated with refusing treatment or transport. The patient is alert, oriented and his/her judgment is not significantly impaired by illness and/or injury.

"Comprehensive Children's Emergency Receiving Center" or "CCERC" means a hospital designated by the OCEMS Agency as meeting all locally established criteria for receiving emergency and critically ill pediatric patients transported by the emergency medical services system. Each CCERC is also designated as a base hospital, providing standard medical direction as well as specialized oversight for the care of pediatric patients.

"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 Code, 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 & Safety Code, Div. 2.5, Ch.2, Sec. 1797.67*)



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"Disaster" means a perilous condition that 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 that 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 Code, Chapter 273*)

"Emancipated Minor" includes any of the following

- Active duty military
- Married or previously married
- ≥ 15 years old and living apart from parents and managing own finances
- ≥ 14 years old and declared an "Emancipated Minor" by a Superior Court

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.70*)

"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 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*)



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"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.72*)

"Emergency Medical Services (EMS)" means an agency, within the Health Care Agency (HCA) designated by the County of Orange, in accordance with Health & 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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.74*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.103*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.78*)

"Emergency medical technician" or "EMT" 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. (*Health & Safety Code, Div. 2, Ch. 2, Sec. 1797.80*)

"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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.84*)

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

"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 an emergency receiving center to a specialized receiving center.

"EMT Certifying Authority" means the medical director of the local emergency medical services agency.

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

"First Responder" means any public safety member who has completed state approved first responder training and who may respond to a medical emergency in the course of their employment.



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"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®/H.E.A.R. system designed with the purpose of assisting acute care hospital communication in time of crisis. The ReddiNet®/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.

"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. This is a patient who requires rapid assessment and medical intervention in order to increase chances of survival. This may also be a hospitalized patient who is 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.

"Offload Interval" means the time interval between ED arrival time to an ERC by ALS or BLS patients and the time the crew transfers care to the ED staff and is clear for another call.

"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.



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"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.

"Limited Advanced Life Support" or **"LALS"** means special service designed to provide prehospital emergency medical care limited to techniques and procedures that exceed basic life support but are less than advanced life support and are those procedures specified pursuant to *Section 1797.171 of Health & Safety Code, Div. 2.5, Chapter 5*

"Local EMS agency" or **"LEMSA"** 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 *Health and Safety Code, Division 2.5, Chapter 4*

"Mass casualty incident" or **"MCI"** means an incident with sufficient casualty or medical victims such that additional resources are required and command (Incident Command System) is established. (Refer OCEMS Policy 900.00)

"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 & Safety Code, Div. 2.5,*

"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 & Safety Code, Div. 2.5, Ch. 4, Sec. 1799.202*)

"Minor (patient)" means third priority of patient in the S.T.A.R.T. triage system. This category of patients requires 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 & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.56*)

"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.)



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"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 ambulate (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.

"Orange County Medical Emergency Data System" or **"OC-MEDS"** means an electronic data system for documentation by prehospital providers, base hospital personnel (MICNs) as well as the OCEMS licensing and accreditation system. OC-MEDS includes hospital dashboards, patient registries and agency reporting systems.

"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.

"Paramedic" – see EMT-P

"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 paramedic and which meets OCEMS criteria as defined in policy.

"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", for prehospital care purposes, is someone who meets any one of the following criteria:

- Has a chief complaint;
- A witness/someone with personal knowledge of the person states the person has a chief complaint, or makes a request for examination or treatment on the person's behalf;
- Has an obvious symptom or signs of injury or illness
- Has been involved in an event with significant mechanism that the average First Responder would believe could cause injury
- Appears to be disoriented or to have impaired psychiatric function
- Has evidence of suicidal intent
- Is dead

"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).



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"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 less than 15 years-old. The primary purpose for identifying these patients is to identify appropriate medication doses and field procedures. Subcategories of pediatric aged patients include:

- Neonate: birth through 30 days of age
- Infant: 31 days through 12 months of age
- Child: 13 months through 12 years of age

"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*)

"Prehospital Care Report" or "PCR" means a Patient Care Record, documentation done by prehospital providers either on paper or via OC-MEDS or equivalent electronic documentation system. If electronic, may also be referred to as "ePCR"

"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.

"Rapid emergency digital data information network" or "ReddiNet®" means the data radio component which is part of the ReddiNet®/H.E.A.R. system designed with the purpose of assisting acute care hospital communication in time of crisis. The ReddiNet®/H.E.A.R. is also used by Orange County EMS to assess hospital operational/resource status following a disaster. It refers to a web-based communication application for hospital status and MCI coordination.

"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 prehospital and trauma care system by the local EMS Agency. (*Health & Safety Code, Div. 2.5, Ch. 2, Sec. 1797.88*)

"ReddiNet®/H.E.A.R. control point" means a facility with communication capabilities (e.g. ReddiNet®/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 MCI events

"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.



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"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.g. special event).

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

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

"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 or 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.

"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.

"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.



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"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 **"trauma victim"** 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, Div. 9, Ch. 7*)

"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.

"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.

Approved:

Carl H. Schultz, MD
OCEMS Medical Director

Tammi McConnell, MSN, RN
OCEMS Administrator

Original Date: 05/1993
Reviewed Date(s): 4/1/2014; 4/1/2015; 08/20/2019
Revised Dates(s): 4/1/2014; 4/1/2015; 08/20/2019
Effective Date: 10/1/2019