

**Los Angeles County EMS Agency**  
**Ref. No. 808.1 - BASE HOSPITAL CONTACT AND TRANSPORT CRITERIA**  
**Field Reference**

**PRINCIPLES:**

- ❶ Contact assigned base whenever possible.
- ❷ Clinical judgment should be exercised in situations not described in this policy.
- ❸ Children under three years of age require base hospital contact and/or transport in accordance with this policy.
- ❹ Thorough documentation is essential, especially if contact/transport is not performed in accordance with this policy (\* **EXCEPTION, See SECTION III**).
- ❺ Circumstances may dictate immediate transport with base contact enroute.
- ❻ EMT-Is shall not cancel a paramedic response if a patient meets any criteria in Section I; an ALS Unit shall be requested if one has not been dispatched.
- ❼ In life threatening situations, consider BLS transport if ALS arrival is longer than transport time.
- ❽ Contact shall be made with the area's trauma center, when it is also a base hospital, on all injured patients meeting Trauma Criteria and/or Guidelines.

**SECTION I – BASE CONTACT REQUIRED**

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| <ul style="list-style-type: none"> <li>▪ Signs or symptoms of shock</li> <li>▪ Cardiopulmonary arrest (excluding those meeting Ref. No. 814, 815 &amp; 821)</li> <li>▪ Chest pain or discomfort</li> <li>▪ Shortness of breath/ tachypnea</li> <li>▪ PMC/PTC Criteria/Guidelines (Ref. No. 510)</li> <li>▪ 5 or more patients requiring transport (contacting MAC constitutes base contact)</li> <li>▪ Altered level of consciousness as defined in the Medical Control Guidelines</li> <li>▪ Suspected ingestion of poisonous substance</li> <li>▪ Exposure to hazardous materials with a medical complaint</li> </ul> | <ul style="list-style-type: none"> <li>▪ Abdominal pain pregnancy or suspected pregnancy</li> <li>▪ Childbirth or signs of labor</li> <li>▪ Suspected fractures of pelvis or femur</li> <li>▪ Facial, neck, electrical, or extensive burns:<br/>20% or &gt; in adults<br/>15% or &gt; in children<br/>10% or &gt; in infants</li> <li>▪ Trauma Criteria/Guidelines (Ref. No. 506)</li> <li>▪ Traumatic crush syndrome</li> <li>▪ Syncope, loss of consciousness, acute neurological symptoms</li> <li>▪ Refusal of transport (AMA), if meeting any criteria in Section I</li> </ul> |
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**SECTION II – TRANSPORT REQUIRED**

- Abdominal pain
- Suspected isolated fractures of spine, skull or hip
- Abnormal vaginal bleeding
- Suspected allergic reaction
- Asymptomatic exposure to haz-mat (If known to have delayed symptoms)
- GI bleeding
- Near drowning
- Patients who are gravely disabled or a danger to themselves or others

**SECTION III – PEDIATRIC PATIENTS**

- Infants  $\leq 12$  months of age shall be transported, regardless of chief complaint and/or mechanism of injury
- EXCEPTION: Infants  $\leq 12$  months of age who meet Ref. No. 814, Determination/Pronouncement of Death in the Field, Section I.**
- Children 13-36 months of age require base hospital contact and/or transport except isolated minor extremity injury
  - If a parent or legal guardian refuses transport (AMA), base contact is required prior to leaving the scene
- EXCEPTION: Ref. No. 808, Principle 4 does not apply to patients  $\leq 36$  months of age.**

**SECTION IV – REQUIRED BASE CONTACT CRITERIA FOR SFTPs**

- If indicated in the SFTPs
- For any criteria listed in Section I which is not addressed by SFTPs
- Whenever consultation with the base hospital is Indicated