### EMS Agency Facility Details

Are there established guidelines, developed in partnership with acute care hospital administrators, physicians, and nurses, that identify patients who should be considered for transfer to facilities of higher capability?  
☐ Yes  ☐ No

Is there collaboration with acute care hospital administrators, physicians, and nurses to establish transfer agreements for patients who should be considered for transfer to facilities of higher capability?  
☐ Yes  ☐ No

Is there a process to ensure that all base hospital personnel who provide medical direction to prehospital personnel are knowledgeable about LEMSA policies and procedures and have training in radio communications techniques?  
☐ Yes  ☐ No

Is there a process to ensure that all alternative base station personnel who provide medical direction to prehospital personnel are knowledgeable about the EMS Agency’s policies and procedures?  
☐ Yes  ☐ No

a) Do the base station personnel have training in radio communications?  
☐ Yes  ☐ No

### EMS Agency Facility Statistics

**Emergency Departments**

Total number of emergency departments:  

Total number of comprehensive emergency services:  

Total number of basic emergency services:  

Total number of standby emergency services:  

**Hospitals with Written Agreements**

Total number of receiving hospitals:  

Total number of base hospitals:  

**Alternative Receiving Facilities**

Do you have designated alternative receiving facilities?  
☐ Yes  ☐ No

Number of alternate receiving facilities:  

- Psychiatric:  
- Sobering Centers:  
- Rural Area:  

**Specialty Care System**

Do you have a trauma system?  
☐ Yes  ☐ No

Do you have a ST-Elevation Myocardial Infarction (STEMI) system?  
☐ Yes  ☐ No
**EMS Agency Facility Statistics (cont.)**

Do you have a stroke system?  □ Yes  □ No

Do you have an EMS for children system?  □ Yes  □ No

**EMS Agency Specialty Care System Capabilities**

Number of *trauma* centers:
- Level I ______  Level II ______  Level III ______  Level IV ______

Number of pediatric trauma centers:
- Level I ______  Level II ______

Number of EMS patients meeting trauma triage criteria: ______
- a) Transported to a trauma center by ambulance: ______
- b) Not transported to a trauma center: ______

Number of trauma patients transferred to a trauma center for a higher level of care: ______
- a) From a non-trauma facility: ______
- b) From a lower level trauma center: ______

Number of *STEMI* centers/hospitals designated by EMS Agency: ______
- Receiving: ______  Referring: ______

Number of *stroke* centers/hospitals (third party accreditation only):
- Comprehensive: ______  Thrombectomy Capable: ______
- Primary: ______  Acute Stroke Ready: ______

Number of *pediatric* receiving centers:
- Comprehensive: ______  General: ______  Advanced: ______  Basic: ______
### TABLE 5: ASSESSMENT OF HOSPITALS AND CRITICAL CARE CENTERS

**Provider Resource**

<table>
<thead>
<tr>
<th>County:</th>
<th>Contracts with Facilities in Neighboring Jurisdictions:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility:</td>
<td>(Designated within EMS Agency’s Jurisdiction)</td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Phone No.:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Written Contract:</th>
<th>Service:</th>
<th>Base Hospital:</th>
<th>Receiving Hospital:</th>
<th>Burn Center:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Referral Emergency ☐ Basic Emergency ☐ Standby Emergency ☐ Comprehensive Emergency</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

#### Specialty Care System

<table>
<thead>
<tr>
<th>Trauma Center:</th>
<th>Adult:</th>
<th>Pediatrics:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ I ☐ II ☐ III ☐ IV</td>
<td>☐ I ☐ II</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STEMI Center:</th>
<th>Service:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Receiving Center ☐ Referring Hospital</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Stroke Center:</th>
<th>Service:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Comprehensive ☐ Primary ☐ Thrombectomy Capable ☐ Acute Stroke Ready</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pediatric Receiving Center:</th>
<th>Level:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Comprehensive ☐ General ☐ Advanced ☐ Basic</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pediatric Critical Care Center:</th>
<th>Emerg. Depts. Approved for Pediatrics:</th>
<th>Pediatric Intensive Care Unit:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

(09/2019)