

| | |
|---|---|
| EMERGENCY SERVICES DIVISION BROOKHAVEN NATIONAL LABORATORY | Procedure No: FR-EMS-3.0.0 Revision No: 4 Page 1 of 7 |
|---|---|

Title: EMERGENCY MEDICAL SERVICES PROGRAM

- 1.0 **PURPOSE**
 1.1 The purpose of this procedure is to describe the Brookhaven National Laboratory Emergency Medical Services (EMS) Program.
- 2.0 **RESPONSIBILITIES**
 2.1 The Fire Chief or designee is responsible for overall implementation of the EMS Program at BNL.
- 2.2 The Fire/Rescue Incident Commander is in command of the Fire/Rescue Group at medical incidents under the authority of the Laboratory Emergency Supervisor and with the advice of the designated EMT on medical matters.
- 2.3 A Firefighter/EMT will provide direct medical care of patient(s). under the authority of the Duty Captain.
- 2.3.1 In the event a BNL physician is at the scene of the incident, medical care is under the direction of the physician. In the absence of a BNL physician at the scene, the EMT determines the appropriate care for the patient and disposition of the case.
- 2.4 Firefighter/EMTs at BNL are trained to the level of EMT-D and must comply with New York State and Suffolk County protocols and guidelines.

| | | |
|--|--|--|
| PREPARED BY: K. Licata _____ Author/Date Filing Code: FR20SR.02 | REVIEWED BY: M. Carroll _____ Chief/Date J. Vaz _____ Division QAO/Date J. Searing _____ Operations Manager/Date | APPROVED BY: F. Marotta _____ Division Manager/Date EFFECTIVE DATE: <u>9/1/02</u> REVIEW CYCLE: 3 years |
|--|--|--|

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 2 of 7 |

3.0 DEFINITIONS

3.1 Emergency Medical Service incidents fall into one of the following three categories:

3.1.1 Life Threatening: A physiological upset that threatens life requiring immediate qualified medical intervention. Examples:

First Priority*

- a. Respiratory arrest, airway obstruction, and severe breathing difficulties
- b. Cardiac arrest
- c. Uncontrolled severe bleeding
- d. Severe head injuries
- e. Open chest wounds
- f. Open abdominal wounds
- g. Severe shock
- h. Burns involving the respiratory tract
- i. Severe medical problems (including heart attack, stroke, heatstroke, poisoning, and abnormal childbirth)
- j. Unconsciousness

Second Priority*

- a. Severe burns
- b. Injuries to the spine (including cervical spine)
- c. Moderate bleeding
- d. Conscious patients with head injuries
- e. Multiple fractures

3.1.2 Urgent. An illness or injury that is not immediately life threatening, but does require early medical attention. Examples:

Lowest Priority*

- a. Minor bleeding
- b. Minor fractures and minor soft tissue injuries
- c. Moderate burns

3.1.3 Non-emergency medical incidents are disorders which can normally be addressed by medical personnel at a later (scheduled) time. Non-emergency medical incidents do not require professional EMT services in attendance. Examples:

- a. Ingrown toenail
- b. Discomfort of common illness
- c. Subcutaneous cyst
- d. Minor non-bleeding laceration
- e. Minor burns

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 3 of 7 |

* *Priorities are as identified in Emergency Care, Current Edition, by Harvey D. Grant, Robert H. Murray, Jr., and J. David Bergeron. Robert J Brady Co., Bowie, MD.*

4.0 **PREREQUISITES**

None

5.0 **PRECAUTIONS**

None

6.0 **PROCEDURES**

6.1 Emergency Medical Services Program:

The Fire Rescue Group of the Emergency Services Division operates a New York State Certified Ambulance for the purposes of providing medical care to the population of Brookhaven National Laboratory to reduce the risk of morbidity and mortality. This service operates as a basic life support (BLS) unit.

As such, the Fire Rescue Group adheres to Part 800 of the NYS EMS Code. Elements of this code requires an emergency medical technician in attendance on all calls that Fire Rescue responds to. Other important elements of the program include EMS job qualifications/descriptions; and physical and immunization requirements.

6.1.1 Job Qualifications

6.1.1.1 The emergency responders at BNL are firefighter/EMTs. They are trained to the level of EMT-D and comply with NYS and Suffolk County protocols and guidelines. They must hold current NYS DOH Certification as an Emergency Medical Technician-Defibrillation and must be approved to participate in the Automated External Defibrillation Program by the EMS System Medical Director. The EMT must provide basic life support within the scope of his/her training and certification consistent with policies, protocols and procedures established by the New York State Department of Health, the Suffolk Regional Emergency Medical Advisory Committee and/or the EMS System Medical Director.

6.1.1.2 All drivers must possess a current and valid driver's license issued by the State of New York. The driver shall operate the vehicle in compliance with all applicable provisions of the Vehicle and Traffic Laws of the State of New York and in compliance with rules and regulations established by BNL.

6.2 Physicals and Immunization Requirements

Records for all members of Brookhaven National Laboratory Fire Rescue pertaining to their individual physicals and immunization records are maintained and updated on a yearly basis by the BNL Occupational Medical Clinic.

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 4 of 7 |

All physicals are conducted on a yearly basis and comply with the NYS Physical Examinations and Health Requirements for EMS Agency Employee/Member Guidelines. See Attachment 9.1 for additional details.

6.3 Requests for and response to Emergency Medical Service

- 6.3.1 Requests for emergency medical assistance may be received from various sources such as the BNL Emergency Phone Line, direct call from the clinic, or from County FireCom.
- 6.3.2 Standard response to an EMS call is Car 1 and the Ambulance 5-20-16 staffed by the designated EMT and two additional firefighters.
- 6.3.3 For EMS calls at NSLS, AGS, or any industrial accident, the rescue truck (5-20-4) shall also respond.
- 6.3.4 The Duty Captain may alter response based on information obtained about the incident before the Fire Rescue Group responds. A few extra seconds of conversation may greatly clarify the situation, allowing a more tailored and useful response without significantly increasing the response time. Information such as call back number, building, name of caller, and extent of injury are important.
- 6.3.5 When the Duty Captain is not immediately available, the Lieutenant or the House Watch is to initiate the standard response in 6.3.2 or 6.3.3.
- 6.3.6 Whenever information is ambiguous as to whether or not the incident is a medical emergency, the incident is to be treated as an emergency until otherwise determined. All requests for service originating from the Occupational Medicine Clinic (OMC) are to be considered EMS incidents unless specifically indicated otherwise by the attending physician or nurse.
- 6.3.7 Unless directed otherwise by a physician, New York State and Suffolk County EMS basic life support protocols are to be followed in the handling of all EMS incidents. If a BNL physician directs a procedure that may be contrary to Suffolk County EMS basic life support protocols, the designated EMT shall inform the physician and contact medical control.
- 6.3.8 Routine health care services are only available from the Clinic during regular working hours (Monday through Friday, 0830 to 1700, except holidays). Requests for medical assistance from employees, guests, visitors and on-site residents after these hours are handled through the Fire/Rescue Group. Except for emergency medical services and first aid care, the Fire/Rescue Group does not provide patient treatment.
 - 6.3.8.1 Employees, guests, visitors, and on-site residents seeking non-emergency medical services from the Fire/Rescue Group should be referred to the OMC during regular working hours and to off-site health care facilities after regular working hours.
 - 6.3.8.2 The Fire/Rescue Group does not provide non-emergency transportation during regular working hours and only under unusual circumstances after regular working hours.

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 5 of 7 |

6.3.8.3 Providing non-emergency medical services is normally not justified when this would result in a reduction of on-site staffing to less than five firefighters, or the termination of work by other Laboratory groups for which the Fire/Rescue Group is committed to provide work details. Termination of work only affecting the Fire/Rescue Group to provide non-emergency medical services is normally justified.

6.4 Case Disposition/Transportation

- 6.4.1 All emergency medical cases shall be transported to a local hospital emergency room. The BNL OMC is not an emergency care facility, and emergency cases shall not be transported to that location. Within these guidelines, patients should be consulted as to which hospital they prefer to be taken.
- 6.4.1.1 Life threatening cases are to be transported to either Brookhaven Memorial Hospital or Central Suffolk Hospital.
- 6.4.1.2 Urgent cases may be transported to any one of the following hospitals: Brookhaven Memorial, Central Suffolk, St. Charles, Mather Memorial, or Stony Brook University.
- 6.4.1.3 Radiation Contamination cases with injury are to be transported to Stony Brook University Hospital.
- 6.4.1.4 Hazardous Materials Contamination cases may be transported to either Brookhaven Memorial or Stony Brook University Hospital.
- 6.4.2 A BNL Clinic physician may direct that a patient be transported to another hospital than those listed above because of specific special care facilities not available at these hospitals.
- 6.4.2.1 The Employee Assistance Program (EAP) Manager may recommend special destinations regarding employees in need of mental health care apart from hospitals mentioned in 6.1 due to availability of beds or a need for special care.
- 6.4.2.2 The EAP Manager or the Clinic Physician may also request that special BNL personnel or others, in addition to the EMT's, should accompany the employee (e.g., security, family member) if this is in the employee's best interest or if there is a question of safety or security. Extra persons may accompany the employee if there is sufficient room in the ambulance.
- 6.4.2.3 BNL Security personnel should not be requested to provide primary transportation for persons with mental health difficulties. Transportation for such persons should be requested from the Fire/Rescue Group, although security may be requested to accompany the EMT's for the reasons cited above.
- 6.4.3 The Fire/Rescue Group has not obligation to either wait for patients at a hospital or provide return transportation to the Laboratory site. Within the limits of maintaining the Fire/Rescue Group ability to provide emergency services, common courtesy should prevail.

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 6 of 7 |

- 6.4.4 In all instances, the case disposition is to be recorded on the NYS Pre-Hospital Care Report (PCR), as well as any instructions given to the patient. In the case of a transported case, the signature of a responsible person receiving authority is to be obtained. Where no transportation occurs, the signature of the patient (or other responsible person) is to be obtained if possible.
- 6.4.5 Where a patient refuses to be transported contrary to the advice and encouragement of the designated EMT, Medical Control is to be contacted and this information is to be indicated on the EMS Pre-Hospital Care Report. The signature of the patient and witness should be obtained if possible.

6.5 Ambulance out-of-service/mutual aid

- 6.5.1 Any time the Ambulance is placed out of service, the Duty Captain is to notify the Police Central Alarm Station that the BNL Ambulance is not available. If the Ambulance is to be out of service for more than a 24 hour period, the following agencies are to be notified: The Department of Fire/Rescue and Emergency Services, Yaphank, NY 11980 (631) 852-4818 or (631) 852-4815; and NYS Emergency Management Office, Jane Hill EMS Supervisor Creek Rd., Poughkeepsie, NY 12601-1088 1-914 632-3701. If no answer, leave message on recorder. The above agencies are to be notified when the Ambulance comes back in service.
- 6.5.2 The Rescue truck is equipped with backup EMS equipment. Car #1 and Rescue Unit are to respond to all EMS incidents when the Ambulance is out-of-service.
- 6.5.3 As soon as possible after the Fire/Rescue Group has responded and completed their initial evaluation, the Duty Captain is to determine whether mutual aid (normally the Ridge Fire Department) is required. He is to initiate an appropriate response to the Laboratory site through Suffolk County Medical Control. The Police Group will dispatch a Patrol Officer or other person to the main gate to direct the mutual aid ambulance to the incident scene. The Duty Captain should confirm that this action has been taken.

6.6 Notifications

- 6.6.1 The Police CAS is to be kept informed of the status of all medical assistance responses (emergency and non-emergency). The House Watch is responsible for immediately communicating (or confirming if received on Ext. 2222) with the CAS (normally by intercom) the location and nature of all medical assistance responses.
- 6.6.2 The Manager of Emergency Services and the Fire Chief are to be specifically informed whenever on-site Fire/Rescue Group staffing is reduced to less than five firefighters, whenever mutual aid ambulance service is initiated, or whenever patients are transported off site as an emergency. The Duty Captain is responsible for assuring these notifications. These are typically done via the paging system.

7.0 IMPLEMENTATION AND TRAINING
None

| | | |
|---|----------------------------|-------------------------------|
| EMERGENCY SERVICES DIVISION PROCEDURE BROOKHAVEN NATIONAL LABORATORY | | Procedure No. FR-EMS-3.0.0 |
| | | Revision No. 4 |
| Procedure Title: | Emergency Medical Services | Page 7 of 7 |

8.0 **REFERENCES**

8.1 Part 800, NYS EMS Code

9.0 **ATTACHMENTS**

9.1 NYS Physical Examinations and Health Requirements for EMS Agency Employees/members

**EMERGENCY SERVICES DIVISION PROCEDURE
BROOKHAVEN NATIONAL LABORATORY**

Procedure No.
FR-EMS-3.0.0

Revision No. 4

Procedure Title:

Emergency Medical Services

Page 8 of 7