

**Medical Control Guideline: ONLINE MEDICAL DIRECTION AND  
RECEIVING HOSPITAL NOTIFICATION**

**DEFINITIONS:**

1. Online Medical Direction is provided to prehospital provider(s) via voice communication from qualified Base hospital personnel (MICN or Base Physician) for the purposes of real-time patient care.
2. Receiving hospital notification is communication of patient information by prehospital provider(s) or Base hospital personnel for the purpose of preparing the receiving hospital staff for patient arrival.

**PRINCIPLES:**

1. Online medical direction occurs when Base hospital contact is established by paramedics in order to obtain guidance on patient care from a designated paramedic Base hospital.
2. In general, for situations requiring base hospital contact, the time when Base hospital contact is established will be based on paramedic judgement unless otherwise specified.
3. The paramedic who provides direct patient care during transport shall have a means to establish communication with the Base hospital at all times.
4. Once Base hospital contact is made for medical direction, the overall authority for patient's medical care lies with the Base. The treatment plan based on Provider Impression should be developed collaboratively by prehospital providers and Base personnel.
5. Treatments outlined in the applicable protocol may be administered by prehospital providers and communicated to the Base hospital.
6. Communication shall be maintained until the Base hospital ends the call.
7. If Base hospital contact is made, the Base hospital is responsible for notifying the receiving hospital.

**GUIDELINES:**

1. Paramedics shall establish Base hospital contact for online medical direction on all patients who meet Base hospital contact criteria as specified in [Ref. 1200.1, Treatment Protocol General Instructions](#) and when directed by the Treatment Protocols.
2. Utilize radios, the VMED28 radio frequency, or telephone to establish Base hospital contact.
3. Paramedics shall clearly indicate the reason for the contact:
  - a. "Base Contact for online medical direction" or may simply state "Base Contact"
  - b. "Providing notification of patient transport to your facility" or may simply state

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“Notification”

4. When requesting online medical direction, paramedics shall report their field assessment to Base hospital personnel. Their report should include the following information:
  - a. Sequence number
  - b. Provider Code/Unit number
  - c. Provider Impression
  - d. Treatment Protocol name and number
  - e. Patient age and gender
  - f. For pediatric patients: Weight (kg) and Color Code from length-based resuscitation tape
  - g. Pertinent patient assessment findings based on primary and secondary assessments
  - h. Past medical history, medications and allergies
  - i. Treatment provided prior to Base hospital contact
  - j. Response to treatment or patient re-assessment
  - k. Proposed hospital destination and estimated time of arrival
  - l. Any further information pertinent to the field care of the patient
5. Paramedics shall repeat all Base hospital orders, especially complete medication orders (name of drug, dose and route) to confirm receipt of orders to decrease errors.
6. Maintain or re-establish online communications as directed by the Base hospital for critical or hemodynamically unstable patients.
7. If a patient refuses treatment and/or transport and meets Base hospital contact criteria, paramedics should establish Base hospital contact prior to having the patient sign out against medical advice.
8. Receiving hospital notification shall include but is not limited to the following:
  - a. Sequence number
  - b. Provider Code/Unit number
  - c. Provider Impression
  - d. Patient age and gender
  - e. For pediatric patients: Weight (kg) and Color Code from length-based resuscitation tape
  - f. Critical information that is needed for the receiving hospital to prepare for the patient
  - g. Estimated time of arrival