SUBJECT: DIVERSION REQUEST
QUICK REFERENCE GUIDE

(EMT, PARAMEDIC, MICN) REFERENCE NO. 503.2

TYPE OF DIVERSION	REQUEST VIA / DURATION	RATIONALE
ED Saturation – ED ALS	Request via ReddiNet. Diversion will be for 2 hours. ReddiNet will automatically re-open hospital at the end of 2 hours	All ED treatment bays are full and 30% or greater of ED has patients are either in Resuscitative or Immediate/Emergent conditions.
ED Saturation – ED BLS	Request via telephone to the Medical Alert Center. Diversion will be up to 4 hours. ReddiNet will automatically re-open hospital at the end of 4 hours.	Implemented on a case-by- case basis during periods of extreme surge of patients (i.e., disease outbreak/ epidemic/pandemic). Hospital must have at least 3 ambulance patients (ALS/BLS) waiting for over 60 minutes to transfer patient to hospital equipment.
ED Saturation – Provider ED ALS	EMS Provider must contact the Medical Alert Center. Diversion will be for 2 hours. ReddiNet will automatically re-open hospital at the end of 2 hours.	Hospital must have at least 3 ambulance patients (ALS/BLS) waiting for over <u>30 minutes</u> to transfer patient to hospital equipment.
Computerized Tomography (CT) Scanner	Request via ReddiNet, duration will be based on the resolution of inability to perform CT scans.	Unable to provide essential diagnostic procedures due to lack of a functioning CT scanner.
Trauma	Request via ReddiNet, duration will be based on the resolution of the rational for diversion.	Unavailable Critical Equipment or Operating Room, or Trauma Team Encumbered
Pediatric Medical Center (PMC)	Request via ReddiNet, duration will be based on the resolution of the rational for diversion.	Unavailable critical equipment that is essential to definitive diagnosis or treatment of medical pediatric patients. Lack of available PICU beds alone is not sufficient cause to request PMC Diversion.
ST-Elevation Myocardial Infarction (STEMI) Receiving Center (SRC)	Request via ReddiNet, Diversion will be for 3 hours. ReddiNet will automatically re-open hospital at the end of 3 hours	Cardiac Catheterization laboratories (cath labs) are fully encumbered caring for STEMI patient or mechanical failure of critical cath lab equipment.
	Hospital must notify the EMS Agency SRC System Program Manager for mechanical failure/equipment issue that is expected to exceed 24 hours.	

REVISED: 07-01-25 PAGE 1 OF 2

SUBJECT: DIVERSION REQUEST
QUICK REFERENCE GUIDE

TYPE OF DIVERSION	REQUEST VIA / DURATION	RATIONALE
Primary Stroke Center (PSC)	Requested via ReddiNet, Diversion will be for 2 hours. Reddinet will automatically re-open hospital at the end of 2 hours.	Unable to perform diagnostic brain imaging (CT scan or MRI).
Comprehensive Stroke Center (CSC)	Requested via ReddiNet, Diversion will be for 2 hours. Reddinet will automatically re-open at the end of 2 hours.	Unavailable Critical Equipment or Interventional Radiological (IR) Room, or Stroke Team Encumbered
Extracorporeal Cardiopulmonary Resuscitation (ECPR)_	Request via ReddiNet, duration will be based on the resolution of the rational for diversion.	Unavailable critical equipment or qualified personnel to perform ECPR. <i>ECPR diversion does not divert patients in cardiac arrest.</i>
Internal Disaster	Hospital must notify the Medical Alert Center via telephone, duration will be based on resolution of the rational for internal disaster.	Power Outage Critical infrastructure or system failure impacting patient care Fire Bomb threat/explosion Flooding Water disruption/contamination HAZMAT in patient care areas Internal Disaster does not apply to work actions.