
Purpose

To promote the consistent deployment of the appropriate air ambulance through the Eastern Shore of Virginia and decrease flight response times and overall travel times for seriously injured patients. Additionally this policy provides other needed information to field and 9-1-1 Center personnel relating to air ambulance requests and auto-launch guidelines for the ESVA 9-1-1 Center.

Auto-Launch Guideline

Three air ambulances primarily serve the Eastern Shore of Virginia – Maryland State Police (Trooper 4), Nightingale, and Life Evac III. “Auto-Launch” will be initiated by the Eastern Shore of Virginia 9-1-1 Center when meeting the criteria below (based on information received about the incident). Additionally field personnel will have the discretion to initiate a launch based on dispatch comments and patient information.

   - Vehicle accident with entrapment (significant injury).

1. While utilizing EMD (call processing techniques) and receiving information that the above criteria is met, the Eastern Shore 9-1-1 Center will contact the appropriate air ambulance and request an “auto-launch”. The appropriate air ambulance will be determined using per-determined response maps (based on response of the closest resource). This information (map) will be maintained at the Eastern Shore 9-1-1 Center.

2. The Eastern Shore 9-1-1 Center will give dispatch (for the air ambulance) an approximate location of the incident. Incident command and/or landing-zone groups will confirm the landing zone location as soon as they are established.

3. At this time, the air ambulance will check weather conditions, conditions of the aircraft and launch, if available. If not available, field personnel will be advised and an alternate air ambulance will be notified only if specifically requested. If dispatched, an ETA should attempt to be obtained.

4. The Eastern Shore 9-1-1 Center will advise responding units of the “automatic launch”. EXAMPLE – “All units responding to the MVA in Eastville, Nightingale has been auto-launched per protocol”.

5. Upon the arrival of a trained and qualified EMS provider or other appropriate field personnel, they will assess the situation and report a size-up of the scene to the responding units. If it is determined injuries are not life threatening, they will have the autonomy and responsibility to notify Eastern Shore 9-1-1 Center to cancel
the air ambulance response. If the air-ambulance auto-launch is later canceled the air-ambulance will return to its base without any questions or financial restitution. However, if the air ambulance is still requested, the Eastern Shore Center 9-1-1 Center will provide the air ambulance dispatcher with further detailed information provided by on-scene personnel. The Eastern Shore 9-1-1 Center will notify command that the air ambulance in enroute and provide an ETA. Once it has been determined the aircraft is needed and will continue response, aircraft operations and communications will continue as with other air ambulance missions.

Other Expectations (NOT SPECIFIC TO AUTO-LAUNCH INCIDENTS)

1. If any air-ambulance is unable to accept the mission due to weather conditions, all other agencies notified for a request must be provided this information. *EXAMPLE* – If Nightingale is unavailable due to weather conditions, then Trooper 4 or Life-Evac III should to be told of this when the request is made to them.

2. The ESVA 9-1-1 Center will verify the air-ambulance is launching from its normal launch location (if not responders will be advised and the request altered if needed).

3. If multiple air-ambulances are responding to an incident, all involved air-ambulance dispatch centers will be advised of the names of the air-ambulances responding to the incident. *EXAMPLE* – MVA where two air-ambulances are responding (because there are two patients entrapped with significant injuries) – Both air-ambulances need to be told the names of the other helicopters dispatched to the incident.

4. Communications between the 9-1-1 Center/field units and helicopter transports (air ambulances) will utilize Channel 11 (Tactical Operations 1) or Channel 12 (Tactical Operations 2). The dispatch channels will serve as a back-up/safe channel for communications. The appropriate channel information, including frequency and PL code will be provided to the HELO dispatch center upon notification. The Communication Officer shall track all helicopter resources in the CAD as other fire and EMS apparatus. When a helicopter is requested and a fire response is not already part of the incident then a fire response should be dispatched to handle the landing zone. If a request is made for a helicopter and a fire response is already part of the incident the Communications Officer should inquire from the incident commander if any additional dispatch is required to handle the landing zone. *Exception: Incidents at Shore Memorial Hospital (unless a specific request is made for additional resources).*

5. If the incorrect air-ambulance is requested (based on established response districts maintained in the 9-1-1 Center) by field personnel, the ESVA 9-1-1 Center will advise the individual of this and request direction. Ultimately, the requests of field personnel shall be honored.
General Guideline – Requesting Air-Ambulance Response

The following is the standard for information provided when a request to launch is made:

- Name and agency of the requestor, including contact number
- Location (address, cross-streets, or pre-designated landing zone) *
- County (including town or community the incident is located in)
- Location/address of landing zone and ground contact (for unit handling landing zone) * If appropriate, the closest reference point location will be provided
- Radio channel and frequency (including PL code) being used for communications (using channel 11 first and channel 12 as alternate) – Channel 11 – 154.220 with a PL code of 123.0 and Channel 12 – 155.355 with a PL code of 186.2 --- Rescue (dispatch) can be used as a last resort for communications, if needed
- Type of incident (nature) and patient information, if relevant and provided
- Total number of patients transported by air and patient weight, if relevant and provided

If all information is not available a dispatch should not be delayed, rather the ESVA 9-1-1 Center should provide the additional information when it is received (for example the landing zone information may not be known during the initial request).

* All three helicopter dispatch centers have indicated GPS coordinates will be accepted and are beneficial, although not required (some will verify any coordinates that are provided). Communications Officers should provide GPS coordinate information using formats in the CAD.

Other Air-Ambulance (HELO) Information

1. Response maps (for the three air ambulances) include Trooper 4 only being permitted to deploy thirty (30) miles from the Maryland state line (unless an extraordinary situation/incident exists).
2. In general, air-ambulances should not be placed on stand-by, rather requested to launch and respond. They can and shall be canceled if later determined to not be needed.
3. The ETA (estimated time of arrival) for the arrival of air-ambulances shall include the overall time (including preparation, launch, and fly time).
4. Other resources, such as the use of United States Coast Guard assets, will be requested and deployed as directed by the ESVA 9-1-1 Center and field personnel.