



Carroll County Department of Fire & EMS Standard Operating Procedure

DOCUMENT DETAILS

Standard Operating Procedure: 3.30	Effective Date: June 8, 2024
Subject: Hospital Alert Status	Section: Emergency Medical Services
Authorized: Eric Zaney, Assistant Chief	Revision Date: April 3, 2026

Applicability: Volunteer Career

I. PURPOSE

The hospital alert system was developed to prevent extended wait times for transfer of patient care therefore reducing the delay in definitive patient care

II. DEFINITIONS

N/A

III. PROCEDURES

A. MIEMSS provides an overview of the state's EMS system by providing a real time census of the capacity of each hospital's Emergency Department.

- 1. Advisory 1 Level (0-75% of ED capacity):** The Emergency Department is operating within parameters of operating function and patient influx density. Normal transportation of priority 1, 2, and 3 patients acceptable.
- 2. Advisory 2 Level (76-100% of ED capacity):** The Emergency Department is experiencing heightened numbers of patients, at a large fraction of capacity. Normal transportation of priority 1, 2, and 3 patients acceptable, with anticipated longer off-load times.
- 3. Advisory 3 Level (101-130% of ED capacity):** The Emergency Department has exceeded capacity for patients, with longer-than-normal offload times anticipated. Utilize judgement of transportation destination for priority 3 patients and priority 2 patients not receiving continuous cardiac monitoring. If possible, explain to

patient/patient representative of Emergency Department inundation, and consider alternative destination.

4. **Advisory 4 Level (131% or more of ED capacity):** The Emergency Department is grossly exceeding the capacity for patients. Providers should consider the transport of priority 2 and 3 patients to alternative destinations. If appropriate, patients should be educated on this concept, and an informed decision by patients to alternative destination should be made.
 5. **Code Black:** The Emergency Department is out of commission due to an unprecedented event, and no patients should be transported to the respective hospital. All patients shall be transported to the next closest appropriate facility.
 6. **Re-route:** The Emergency Department is suffering from a significant volume of patient influx, and all patients who are prioritized as two or three should be transported to the next closest Emergency Department. Patients should make informed decisions to receive transport to a further facility and may refuse transport destination if unwilling.
 - a. The decision to being placed on this status must be made by Assistant Chief of EMS, Shift Commander, or their designee.
 7. **Trauma Bypass:** The Trauma Center in reference has exceeded their capabilities to care for trauma activations, and the patient should be transported to the next appropriate trauma facility.
- B. Blue Alert-** When a jurisdictional EMS system is temporarily taxed to its limits in providing prehospital care and ambulance transportation due to extraordinary situations, the individual EMS jurisdiction may request to be placed on "Blue Alert Status."
1. Declaration of a Blue Alert will allow for the temporary suspension of the red and yellow alert status by jurisdictional EMS systems due to temporary, extraordinary situations such as heavy snow, icing conditions, flooding, and other significant inclement circumstances that contribute to a notably high demand for ambulance services.
 2. While on Blue Alert, ALL PATIENTS will be transported to the closest appropriate hospital, regardless of the patients' priority status or hospital alert status
 3. The decision to request being placed on this status must be made by the Assistant Chief of EMS, Shift Commander, or their designee.

IV. RECISSION

This Standard Operating Procedure rescinds all directives regarding Hospital Alert Status or similar content previously issued for personnel of the Carroll County Department of Fire & EMS.

V. RELATED STANDARD OPERATING PROCEDURES / DOCUMENTS

VI. ATTACHMENTS