



ET3 - EMERGENCY TRIAGE, TREAT, AND TRANSPORT MODEL
Phase Two: Telemedicine Consultation
Practice Guideline

WAFD-Specific Practice Guideline

ET3 Model will support EMS innovation by transporting Medicare FFS beneficiaries to covered destinations or alternative destinations and by providing treatment in place with a qualified health care practitioner on site or via telehealth.
Phase Two: Telemedicine Consultation

Patient Care Goals

1. Provide person-centered care with increased potential for patients to remain in their home
2. Provide increased access to physician level services for patients
3. Increase efficiency in the EMS system

Patient Presentation:

Inclusion Criteria

Pt with Medicare insurance
 Adult pt with decision-making capacity free of impairment from alcohol or drugs, no evidence of intentional self-harm
 Isolated hypoglycemia without need for emergent transport to the ED

Exclusion criteria

Adult pt without decision-making capacity
 Abnormal vital signs with symptoms of distress

Potential indications for non-transport

Repeat glucose is > 80 mg/dL
 Patient returns to normal mental status, with no focal neurologic signs/symptoms after receiving glucose/dextrose
 Patient can promptly eat a carbohydrate meal in front of EMS
 A reliable adult will be staying with patient
 No major co-morbid symptoms exist, like chest pain, shortness of breath, seizures, intoxication, or naloxone administered

EMS Provider judgment should include assessing for other high risk conditions or indications, as well as other more appropriate guidelines to follow.

Unstable patients should be transported by the closest available MED unit regardless of ET3 status

*****While you can offer guidance and alternative options to transport, you CAN NOT refuse transport for any patient**

Definitions

Telemedicine remote diagnosis and treatment of patients by means of telecommunication technology

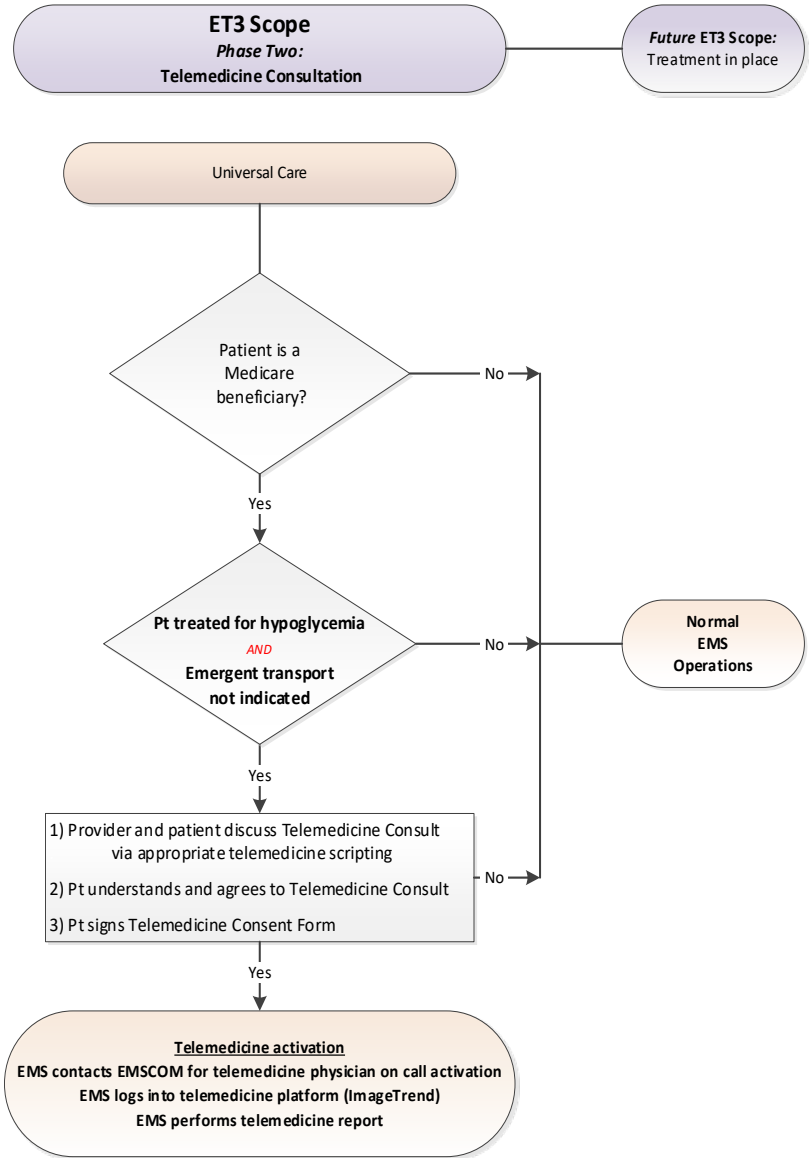
Decision-Making Capacity indicates an individual who is alert and oriented, has the capacity to understand the circumstances surrounding his/her illness or impairment as well as the possible risks associated with refusing treatment and/or transport, and can communicate their decision.

Documentation:

Medical decision-making
 Medicare documentation
 Telemedicine documentation

Quality Assurance:

Pt agrees to telemedicine consultation
 Telemedicine platform functions well
 ET3 Telemedicine inclusion criteria indicated



TELEMEDICINE SCRIPTING:

Sir/Ma'am, you meet the criteria for a telemedicine consult with a physician at this time. We would like to initiate that telemedicine consult while we are here with you. Is that o.k.?

Initiated: 04/15/2023
 Reviewed/Revised:
 Revision:

Approved: Benjamin Weston, MD, MPH Medical Director
 Approved: Dan Pojar, BSEMS, FP-C, NRP EMS Division Director
 WI DHS EMS Approval: xx/xx/xxxx



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WAFD TELEMEDICINE REPORT

Hello Doc # _____

This is Med _____

Our Incident number is _____

We have "Patient name" and he/she/they is/are "Patient age" years old

The patient's past medical history includes _____

We were called to the scene for _____

On arrival the pt presented with _____

Initial vital signs were _____

Initial physical exam was _____

Initial blood glucose was _____

Treatment included _____

The patient's response to treatment was _____ over _____ minutes

Current vital signs include _____

Current physical exam includes _____

Current Situation is (including current blood sugar if applicable) _____

We are consulting you because the patient meets the telemedicine criteria of _____

Do you have any questions for us prior to speaking with the patient?

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