



ET3 - EMERGENCY TRIAGE, TREAT, AND TRANSPORT MODEL
Phase One: Transport to Alternative Destination
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 One: Alternative Destinations

Patient Care Goals

1. Provide person-centered care with increased potential for patients to remain within their medical home
2. Encourage appropriate utilization of services
3. Increase efficiency in the EMS system

Patient Presentation:

Inclusion Criteria

Dispatch codes 21A, 21B: Hemorrhage/Lacerations
 Pt with Medicare insurance

Adult pt with decision-making capacity free of impairment from alcohol or drugs, no evidence of intentional self-harm

Isolated laceration without other needed ED/trauma/burn center eval OR non-traumatic nosebleeds

Exclusion criteria

Adult pt without decision-making capacity

Abnormal vital signs with symptoms of distress

Any pt meeting transport criteria for Level I/II Trauma Center

Laceration exclusions:

- Infectious: Bite wounds or other signs of infection
- Bone: Suspicion of fracture or crush injuries
- Deep: Exposed tendon, muscle, or bone
- Neuro: Loss of sensation, strength, or movement
- Bleeding: Uncontrolled or pulsatile bleeding
- Complex: Face, neck, ears, fingernails, genitals, or other sensitive structures

Additional non-trauma epistaxis exclusions:

- Uncontrolled bleeding or bleeding down the back of the throat
- Anticoagulation or full dose antiplatelet therapy

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

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

Alternative Destination: ET3 Approved alternative to an emergency department (see list p.2)

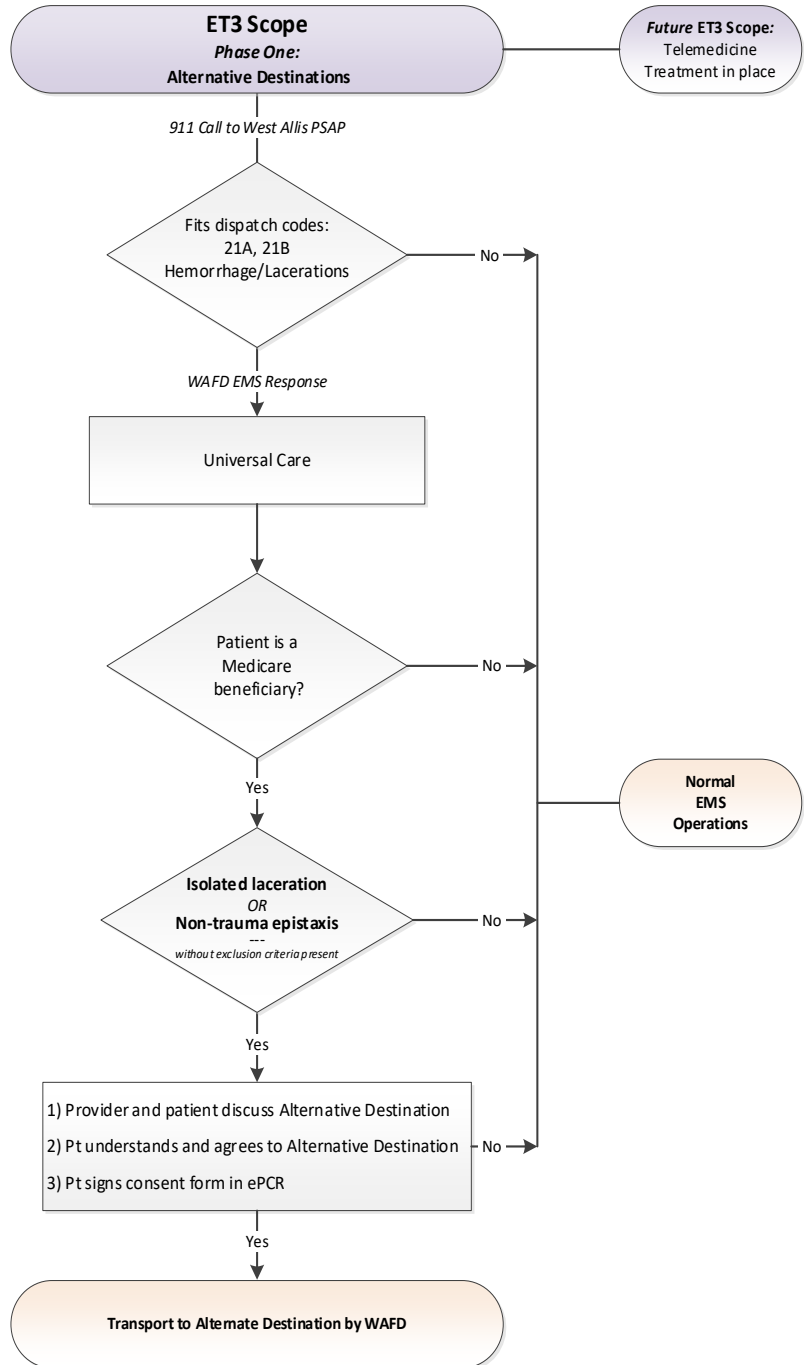
Decision-Making Capacity indicates an individual who is alert and oriented, has the capacity to understand the circumstances surrounding his/her illness or impairment as well as the possible risks associated with refusing treatment and/or transport, and can communicate their decision.

Documentation:

- Medical decision-making
- Medicare documentation

Quality Assurance:

- Alternate Destination alerts FD if patient later transferred to ED
- FD ePCR to capture pt's medical home
- ET3 Response inclusion criteria



Initiated: 04/15/2021
 Reviewed/Revised: 1
 Revision: 09/18/2021

Approved: Benjamin Weston, MD, MPH Medical Director
 Approved: Dan Pojar, BSEMS, FP-C, NRP EMS Division Director
 WI DHS EMS Approval: 06/03/2021



ET3 - EMERGENCY TRIAGE, TREAT, AND TRANSPORT MODEL
Phase One: Transport to Alternative Destination
Practice Guideline

ABNORMAL VITAL SIGNS FOR SYMPTOMS OF DISTRESS

ADULT	Heart Rate	Respiratory Rate	BP mm/Hg	Capillary Refill Time	Pulse Ox
Adult (>40 Kg or 14 years of age)	< 50 or > 110	< 12 or > 16	< 90 or > 220	> 3 seconds	< 94%

APPROVED ALTERNATE TRANSPORT DESTINATIONS FOR ET3

(Note: Expect regular updating)

Advocate Aurora Health

Aurora UC – West Allis ('Six Points')	6609 W Greenfield Ave	West Allis	53214

Froedtert & Medical College of Wisconsin

Moorland Reserve Health Center UC	4805 S Moorland Rd	New Berlin	53151
Tosa Health Center UC	1155 N Mayfair Rd	Wauwatosa	53226

Ascension Health

Ascension SE Wisconsin Mayfair Rd UC	201 N Mayfair Rd	Wauwatosa	53226

Initiated: 04/15/2021
 Reviewed/Revised: 1
 Revision: 09/18/2021

Approved: Benjamin Weston, MD, MPH Medical Director
 Approved: Dan Pojar, BSEMS, FP-C, NRP EMS Division Director
 WI DHS EMS Approval: 06/03/2021

Pg 2 of 2