

## **OVERVIEW**

Amerimed will provide transport of psychiatric patients who have been classified as “10-13” “CON”, or “20- 13” or other state involuntary admissions. These are patients who have been placed into “protective custody” by a medical doctor and have been ordered to be admitted to a psychiatric treatment facility and should be transported as requested by originating facility.

## **SECTION A**

Patient Classifications are as follows:

### **Classification**

- Any appropriate involuntary designated status

### **Potential Condition Symptoms**

- Alzheimer’s, Psychiatric Issues, Suicidal Tendencies, Mental Disorders
- Substance Abuse Issues (e.g. Drug / Alcohol abuse)

## **SECTION B**

It is required that the Amerimed Crew obtain the original signed involuntary physician form for the receiving facility, and a copy of the form for billing purposes. Copies are not acceptable, and the receiving facility will deny the patient without the original. Special arrangements can be made by the receiving facility to provide the involuntary admission form to our crew upon arriving at the receiving facility. This type of arrangement shall be made in advance and crews will be notified at the time of dispatch.

Patients should remain in “custody” of Amerimed field personnel at all times. Patients should be transported to and from facilities via stretcher (not ambulated). All patients will be buckled to the stretcher using leg, lap, and shoulder harnesses; with buckle-guards in place to discourage the patient from unfastening the seatbelts.

When a patient presents as combative, personnel should contact medical control at the originating or receiving facility to obtain chemical or physical restraint orders. If the patient becomes combative to the point that Amerimed personnel cannot complete the transport safely (on-scene or during transport), personnel should contact Communications so that a law enforcement agency can be contacted to assist or complete the transport.

When a patient becomes combative during transport, the communications center should be notified immediately so that law enforcement can be sent to the location. The vehicle operator should park the ambulance safely, but in plain sight of the public, and engage all emergency lights. The vehicle operator should also consider calling 911 or the communications center via cellphone and leave the line “open” so that those personnel can hear what is happening.

Patients who have been chemically or physically restrained should have their vital signs assessed and documented immediately after the patient has been restrained, and then every 2-5 minutes thereafter. We should never restrain someone in the prone position (refer to positional asphyxia).

Amerimed will attempt to use female personnel to transport female involuntary admissions patients whenever possible. When it is not possible, male crews will be used to transport these patients.

Associates should contact the on-duty Shift Commander for any issues or concerns regarding combative patients.