

## Appendix I Hospital Diversion

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### Central Region ED Saturation Policy Adopted March 8<sup>th</sup> 2006 - Revised 5-09-2007

OPEN

Resource open - no restrictions

No Critical Care  
Beds

**No Critical Care beds available:** Hospital is able to receive all patients. Critical care patients will be treated and transferred to closest appropriate hospital with Critical care capacity. (will time out in 24 hours)

ED Saturated

**Emergency Department Closed:** hospital has exhausted the capacity of their emergency room to receive additional patients. No BLS or ALS transports **except** ALS critical and/or unstable patients which includes:

- Unstable patient as defined by attending paramedics:
- CPR performed or on-going,
- cathlab,
- airway problem
- acute stroke

ED may be on ED Saturated for no more than 2 hours at a time and for no more than 6 out of 24 hours. ED Saturated button will time off automatically after 2 hours.

**Select services not available at this time** (will time out in 8 hours)

Drop down pick list provided, choose from:

- CT down
- Cathlab down
- No OR
- Other

Update Required

Status info more than 25 hours old

Inactive

Status info more than 8 days old

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Hospital

## **Hospital-wide Catastrophic Failure (hospital wide power failure and contamination, evacuation, and lockdown scenario)**

### **Additional agreed upon recommendations:**

- If all hospitals within a zone are on ED Saturation, all hospitals within the zone will come off ED Saturation.
- If 50% of hospitals region wide have no Critical care beds, a conference call will be initiated. Any hospital may initiate the conference call.
  - Access to conference call line and direct line to Charge Nurse to be provided
- Appropriate Website usage and adherence to Diversion Policy will be subject to formal Q/A process and may be requested by prehospital providers.
- At a minimum the ED manager should initiate the ED Saturation status.