
Virginia Office of Emergency Medical Services
Medevac Best Practice 2.1.2
Early Notification Terminology
Revised October 25, 2007

Virginia Department of Health
Office of Emergency Medical Services
P.O. Box 2448
Richmond, Virginia 23218
(804)864-7600
www.vdh.virginia.gov/oems

Virginia Medevac Best Practice

Date Reviewed: October 25, 2007

Target Audience: Flight Comm. Centers, Public Safety Comm. Centers, Local Fire and Rescue Departments, Regional Councils, Hospital ED's

Area: Initiating a Medevac Response

Best Practice: Early Notification Terminology.

Goal: To provide statewide/system wide common definitions describing the status of a Medevac Unit that has been placed in a higher state of readiness or activated prior to first responders arriving on scene.

Procedure: the following definitions have been developed by the State Medevac Committee and should be used consistently throughout the Virginia EMS System. This best practice does not require Medevac agencies to provide these services, it only assures when they are offered, that common terminology be used.

Stand-by

A state of heightened alertness and preparation for a Medevac provider regarding a possible mission, which is initiated by a first responder.

- At a minimum, each air Medevac provider will:
- Communicate if aircraft is currently committed to another mission.
- Evaluate weather.
- Crew will ready aircraft for flight (i.e. remove from hanger, un-tether from electrical attachments) – aircraft will remain on the ground.
- Communicate Estimated Time of Arrival (ETA) upon lift-off, if activated to respond.
- Remain available to respond to another request.
- Await further information.

If the Medevac provider is airborne at the time of a stand-by request or determines that lift-off would be beneficial due to long distance (defined by AAMS as flight distance greater than 10 minutes or 29 miles and/or the patient is further than 20 miles from a specialty hospital and patient criteria is critical in nature), it will:

- Communicate its airborne status or its desire to lift off to the first responder.
- Receive confirmation of first responder for **Early Activation** before responding.

Early Activation

A Medevac provider departs for the requested scene prior to arrival of first responders, based on a high index of suspicion that specialty services will be necessary. This is initiated by the request of the first responders.

Auto Launch

The simultaneous dispatch of air and ground resources through a 911 request for EMS based upon pre-designated and/or medical criteria set up by local or regional EMS systems.

Self Launch

A Medevac provider departs for a scene without the request of first responders.

Note:

- A. These requirements do not apply to public safety agencies engaging in law enforcement or other non-air Medevac functions. However, these agencies must still notify applicable first responders as to their response and/or presence in the area of the scene incident, if applicable.
- B. The Virginia State Medevac Committee supports *Early Activation* and *Auto Launch* with the understanding that it does not obligate the primary responding agency to transport the patient by air if the clinical condition does not warrant Medevac services.

Education:

All flight programs licensed in the Commonwealth of Virginia, should educate EMS and hospital personnel using these common definitions.