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## Support of US Army MEDEVAC Policy



*This procedure is for internal use only and does not enlarge an employee's civil liability in any way. The procedure should not be construed as creating a higher duty of care, in an evidentiary sense, with respect to third party civil claims against employees. A violation of this procedure, if proven, can only form the basis of a complaint by this department for non-judicial administrative action in accordance with the laws governing employee discipline.*

**Related Policies:** Chief's Memorandum NO. 2015-057

**Applicable HI Statutes:**

### I. PURPOSE

This policy is to set forth the Hawai'i Fire Department's (HFD) role in supporting the USARMY HAWAII MEDEVAC services designated for Department of Defense personnel assigned to the Pōhakuloa Training Area.

### II. APPLICABILITY

This policy applies to all Hawai'i Fire Department (HFD) emergency response personnel.

### III. BACKGROUND

Effective June 24, 2015, the US Army Hawai'i (USARHAW) has assumed aeromedical MEDEVAC services for Department of Defense (DoD) personnel at the Pōhakuloa Training Area (PTA). The primary mission of the USARHAW MED EV AC is to provide aeromedical treatment and evacuation for all DoD personnel out of the PT A to any one of our Level III Trauma Centers on island. USARHAW MEDEVAC will provide the following resources and capabilities:

- Two fully manned (2) HH-60 air ambulance military aircraft staged at PTA.
- Paramedic or EMT-B capability with each patient evacuation. Flight medics will follow current Flight Surgeon approved protocols within their scope of practice.
- All flight medics will maintain required credentialing (BLS, ACLS, PHTLS, PALS) and will be validated annually through medical evaluations.
- Each air ambulance shall have all of the capabilities and equipment as outlined in Chapter 72-55 Standards for Ambulance Equipment and Supplies, of Title 11, Hawai'i Administrative Rules.

The USARHAW MEDEVAC has formal MOU's in place with each of the Level III Trauma Centers - Hilo Medical Center (HMC), North Hawai'i Community Hospital (NHCH) and Kona Community Hospital (KCH) detailing the notification and communication procedures, estimated time of arrival and landing procedures. HMC has been identified as the primary receiving facility followed by NHCH, and KCH respectively.

AMR has a corporate policy restricting personnel from conducting "Hot off loads" and shall not be dispatched to assist with the USARHAW MEDEVAC patient transports.

### IV. POLICY:

In efforts to assist our Federal partners, the following notification process and HFD response protocols shall be implemented in support of the USARHAW MEDEVAC services.

### V. PROCEDURES

- a. HFD's role for USARHAW MEDEVAC evacuations to HMC and NHCH shall be as follows:

Implemented: June 2015

Revised:

Next Review: September 2025

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1. Range Control/ PTA Fire shall contact the HFD Fire Communication Center (FCC) and request for fire suppression and EMS patient transfer support. (NHCH utilizes a retro fitted golf cart to transport patients from their helipad to the Emergency Department and may not need HFD ambulance response). Range Control/ PTA Fire shall provide the following information to the HFD FCC:
    - Destination Hospital
    - ETA
    - Number of Patients
    - Severity of Injuries
  2. HFD FCC shall dispatch the appropriate resources for fire suppression and EMS patient transfer from the helipad / LZ to the Emergency Department as needed.
  3. The ground ambulance personnel shall remove sheets and other potential loose items from the gurney prior to approaching the aircraft. The ground ambulance personnel shall not approach the aircraft until escorted by the MED EV AC Crew Chief. The MED EV AC Crew Chief shall accompany the ground ambulance personnel at all times to and from the aircraft for the unloading of the patient. PPE's for the ground ambulance crew shall be eye protection with helmet and face shield in addition to the normal universal precautions. The MED EV AC Medic shall accompany the patient to the receiving ED.
  4. The secondary LZ for HMC shall be the Hilo International Airport. The landing location and gate access shall be communicated to the FCC by PT A Range Control.
- b. HFD's role for USARHAW MEDEVAC evacuations to KCH in addition to the above shall be as follows:
1. The primary LZ for MEDEVAC to KCH shall be the Clarence Lum Won Park, also known as "Scenic Park".
  2. The secondary LZ will be the Kona Community Hospital modified helipad, located in the rear of the hospital. Due to limited landing space for Blackhawk MEDEVAC, this LZ will only be used in extreme emergent situations or when the primary LZ is unavailable.
  3. The HFD shall secure the primary LZ, provide fire suppression, and EMS transport from the LZ to the KCH Emergency Department.
  4. The ground ambulance personnel shall remove sheets and other potential loose items from the gurney prior to approaching the aircraft. The ground ambulance personnel shall not approach the aircraft until escorted by the MEDEVAC Crew Chief, the MEDEVAC Crew Chief shall accompany the ground ambulance personnel at all times to and from the aircraft for the unloading of the patient. PPE's for the ground ambulance crew shall be eye protection with helmet and face shield in addition to the normal universal precautions. The MEDEVAC medic shall accompany the patient to the receiving ED.
- c. Loading and Unloading of Patients:
1. For Safety reason, all commands will come from the on-ground crew chief and/or flight medic during patient off-load or on-load.

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2. All urgent patients will be off-loaded while the rotors are still turning. Only in rare occasions will the pilot have time to shut down the aircraft and rotors. On average, it takes the aircraft 10 minutes to shut down and for the rotors to stop.

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