## **DMIST**

Standardizing the EMS to Trauma Team Patient Hand-off in Pennsylvania

#### Why Standardize

- The transfer of care is an activity that has potential for medical error
- ACEP, NAEMSP, NAEMT, NASEMSO and ENA position statements suggest the transfer of care process should include verbal report, written report, and an opportunity for the receiving provider to ask questions
- The DMIST process is not just about trauma patients; it can be useful in all types of patient hand-off including medical, stroke and STEMI patients

#### Why Standardize

- Trauma centers receive patients from multiple EMS agencies with varied EMS agency reporting processes
- EMS agencies may deliver patients to multiple trauma centers with each center having its own verbal report process
- Comments, questions and inquiries for Pennsylvania trauma centers and EMS agencies regarding the possibility of streamlining the EMS hand-off procedure, <u>specifically the verbal report</u>

#### **DMIST Process**

- EMS arrival with patient in trauma bay
- Depending on patient condition, the trauma team may request the verbal report immediately or after an assessment and/or medical interventions (outlined in next 2 PPTs)

#### **Critical Patient DMIST Process**

- Patient transferred to hospital stretcher
- Hospital team performs critical interventions as needed
- When appropriate, Hospital Team Lead calls for "EMS Time Out"
- 30-second period of silence for EMS report
- EMS remains present for additional questions

#### **Stable Patient DMIST Process**

- Patient remains on EMS stretcher
- Hospital Team Lead calls for "EMS Time Out"
- 30-second period of silence for EMS report
- Patient is transferred to hospital stretcher and hospital team begins care
- EMS remains present for additional questions

# **DMIST**Rapid 15-30 second report

- D Demographics
- M Mechanism of Injury / Medical Complaint
- I Inspection / Injury / Illness
- S Signs (vital signs)
- T Treatment

 D – Demographics include patient age, gender and weight (as appropriate)

- M Mechanism of Injury / Medical Complaint
  - o **Trauma** 
    - Time of injury, type of injury (fall, MVC, assault, etc.) speed, type of collision, height of fall, type of weapon, safety devices
  - Medical
    - OPQRST

- I Illness / Injury
  - o **Trauma** 
    - List injuries head-to-toe
  - Medical
    - ECG, Stroke Scale, SAMPLE etc.

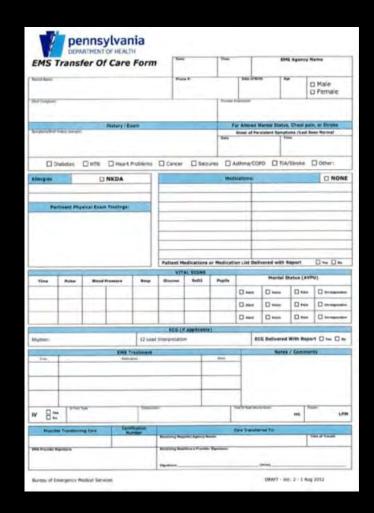
- S Signs
  - o GCS, pulse, respirations, BP, SpO2, blood sugar etc.

- T Treatment
  - Oxygen, wound care, splinting, tubes, IV's, chest decompression etc.
  - Response to treatment(s)

#### **PA DOH EMS Transfer Of Care Form**

The PA DOH EMS Transfer of Care (TOC)
Form is also an important part of the hand-off process

**Per regulation**, EMS shall complete a TOC form and provide it to receiving facility staff prior to departing



#### **PA Statewide EMS Protocols**

The DMIST Poster has been added to the appendix of the PA Statewide EMS Protocols

#### PENNSYLVANIA EMS HANDOFF REPORT

Give EMS 30 seconds, they'll tell you everything you need to know!!!

D	Demographics	Age, sex, weight (if pertinent)
M	Mechanism of Injury or Medical Complaint	Medical: OPQRST as appropriate  Mechanism: Speed, Mass, Height of fall, Restraints, Type of Collision, Safety device use, Type of weapon
I	Injuries or Illness	Injuries: Head to toe, significant findings Info: ECG, Stroke Scale, SAMPLE
S	Vital Signs	GCS, Pulse, Resp., BP, SpO2, BSG if applicable
T	Treatments Provided	Tx: Tubes, Lines, Meds, Electrical Therapy, O2, wound care  Trends: Responses to treatments

#### CRITICAL PATIENT

- Patient transferred to hospital stretcher
- \*Hospital team performs critical interventions as needed
- \*When appropriate, Hospital Team Lead calls for "EMS TIME OUT"
- **\*30** second period of SILENCE for EMS report
- **\*EMS** remains present for additional questioning

#### STABLE PATIENT

- Patient remains on EMS stretcher
- \*Hospital Team Lead calls for "EMS TIME OUT"
- **30** second period of SILENCE for EMS report
- Patient is transferred to hospital stretcher and hospital team begins
- **\*EMS** remains present for additional questioning

<u>Per regulation</u>, EMS shall complete a <u>DOH EMS Transfer of Care</u> form and provide it to the receiving facility staff prior to departing.







### **Partnering Agencies**

