



1000 Blythe Blvd. Charlotte, NC 28203
MEDCENTER AIR

Upcoming Events

Summer 2009

July

MedCenter Air at SouthPark Mall

MedCenter Air's neonatal and children's ambulance will be at the Village at SouthPark for the Kidgits 2009 Safe Summer Event.

10 a.m. – Noon. July 11

South Carolina Fire Association Conference – Myrtle Beach Convention Center

Visit MedCenter Air at the conference for information about programs and services.

July 15-18

September

Transport Nurse Advanced Trauma Course (TNATC)

MedCenter Air is hosting this course offered by the Air Surface Transport Nurse Association. Please visit www.astna.org for more details and to register.

September 18-20

MedCenter Air at Advanced Wilderness Life Support Certification Conference

MedCenter Air aircraft and personnel will be involved in all wilderness excavations for this conference held at Linville Gorge, NC. Visit www.awls.org for more details and to register.

September 25-28

For a complete list of events and further details, please visit www.medcenterair.org or call 704-355-3996.



MedCenter Air Communications: Behind the Scenes of Transport Operations

MedCenter Air is the only comprehensive transport, hospital-based service on the East Coast, offering helicopter, fixed wing and ground transport. For this reason, it's imperative to have an effective communication center. At any given time, MedCenter Air's communications division can deal with up to three helicopters, four airplanes and eight ambulances, in addition to any other flight programs that may be transporting to Carolinas Medical Center. MedCenter Air is fortunate to employ communicators who are members of the National Association of Air medical Communications Specialists (NAACS) and are trained specifically dealing with air medical transport.

When the phone rings to request a transport to a scene, it's a very busy time in the communication center. Local county protocols dictate who can initiate the call requesting

a helicopter to respond to a scene; this includes 911 communicators, EMS supervisors and firefighters.

When the initial call is made the basic information gathered includes: callers name, and agency, call back telephone number and coordinates to the landing zone. If coordinates are unknown, the communicator can dispatch the aircraft and the caller can call back with coordinates once they are available.

As soon as coordinates are received, the communications center enters them into the computer program, and the software confirms which aircraft is closest.

Next, the pilot who will complete the mission requests a weather check. This step may be eliminated if the weather is "green," meaning the pilot has confirmed that weather is acceptable for flight in all areas. The communicator will then notify crews by radio and pagers.

While the crew is responding to the aircraft, the communicator must notify the emergency department attending physician at Carolinas Medical Center that the aircraft is responding to a call and the general nature of the call, such as accident, medical, etc. If the aircraft is departing from the hospital, the communicator is also responsible for shutting down

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the hospital air intake system until the helicopter can depart.

Once the aircraft departs for the scene, the communicator provides the referring agency with an updated estimated time of arrival (ETA), and radio frequencies are confirmed. The communicator also confirms the nearest trauma center to the scene. The communicator is required to know the location of the aircraft at all times. MedCenter Air utilizes the Outerlink Satellite Tracking System to assist with this, enabling the communicator to document the position of the aircraft in the computer every 15 minutes. If for any reason Outerlink is not active, then a manual position must be obtained from the pilot and entered every 10 minutes. The communicator will continue to track the aircraft until he or she can confirm that it lands safely at the scene.

Once the aircraft departs the scene, the communicator checks the number of persons onboard the aircraft and at the receiving facility, and the amount of fuel onboard.

The communicator then notifies the emergency department of the ETA and ensures that adequate personnel are available to help offload the aircraft once it arrives at the hospital. MedCenter Air staff typically offloads the incoming aircrafts, but if insufficient personnel are available, the communicator will ask security and/or nursing administration to assist.

During the in-bound flight, the communicator continues to document positions of the aircraft and is responsible for assisting the medical crew with radio contact with the emergency department to give a medical report. The air intake system must again be turned off, and the communicator assigns which helipad the crew should use. It is imperative that the communicators are kept up-to-date on all in-bound aircrafts since only three helipads and cranes are the area may require advance notice to prepare for an arriving helicopter.

Once the aircraft lands, the communicator will update all flight logs and start the paperwork process. Communicators will attempt to obtain demographic information and enter it into the computer. If a helicopter is to return to an out base, the communicator must track the vehicle until it lands safely just as if a patient is onboard.

MedCenter Air is fortunate to have such a wonderful group of communicators whose behind the scenes operations contribute to the safety of our crews and patients. ■



Landing Zone Safety Courses Available

MedCenter Air embraces safety as a very important part of its culture. To ensure the safety of all personnel, MedCenter Air offers Landing Zone Operations classes to the community.

The LZ Operations class consists of a one hour educational presentation followed by an aircraft landing and



display (pending weather, transports or maintenance status). The class is also available to hospitals to ensure safety when assisting with loading the aircraft. This class is tailored to emergency department nurses, security personnel, or anyone who may assist with transporting and loading patients into the aircraft.

If you would like to request an LZ Operations class for your fire or EMS department, please contact Desiree Beaulieu at Desiree.Beaulieu@carolinashealthcare.org. Please give a minimum of one month's notice, when possible, so we can better accommodate your request. ■

Scene Response for Suspected Stroke Victims

Each year about 795,000 victims suffer a new or recurrent stroke. On average, someone in the United States suffers a stroke every 40 seconds. Due to increasing publicity and public education of strokes, emergency personnel have increased efforts to minimize the time to therapy administration in the field and at the hospital setting.

This is an important topic for local EMS agencies to address regarding their local facility's capabilities to care for victims of a suspected stroke. Many facilities do not have CT scan availability in-house around-the-clock, or there may be a significant delay in reading the CT scan. Ideally, stroke victims should be cared for at a designated stroke center capable of caring for the stroke victim throughout the hospital stay.

The challenge with stroke care is determining the time that the victim showed initial symptoms.

To be a candidate for reperfusion therapy, the time from the onset of symptoms to therapy administration must be less than three hours. All diagnostic treatments must be completed prior to the medication administration within three hours of symptom detection.

When time is critical, the utilization of a scene helicopter response is necessary for suspected stroke victims, and MedCenter Air supports the use of the helicopter for these patients. Since 2004, the Air Medical Physician Association has also supported the utilization of helicopter scene response for stroke victims when the benefit outweighs the risk. As previously detailed, local EMS providers should know their local capabilities. MedCenter Air will transport all "Code Stroke" patients to the closest appropriate facility. Helicopter transport may also be used when the patient has a long

ground transport time to the closest facility, despite the facility's capabilities (i.e. patients in remote locations or those inaccessible by ground vehicles).

When utilized for "Code Stroke" scene responses, the helicopter crew's actions are similar to any other scene request. The transport crew does a quick assessment in the back of the ambulance, performing only critical interventions



such as airway management. While the helicopter is en route to the receiving facility, the stroke team is activated to minimize all possible delays at the receiving facility.

For patients requiring transports from the emergency department to Carolinas Medical Center, the referring physician should call the Physicians Connection Line (1-800-CMC-MD97), and notify the operator that they have a "Code Stroke" victim. The operator will then initiate the proper protocols to ensure a timely acceptance, and MedCenter Air dispatches the closest available helicopter.

Working as an extension of your team, MedCenter Air shares the goal of getting patients to the closest center capable of caring for the stroke victims in the shortest time possible. ■