

Iowa County, Iowa  
Policy Manual

Title: Transport Destination Decision Policy	Reference #: AMB 1009
Section:	Date Effective/Revised: 12/1/2025
Department (s): Ambulance	Approved By: EMS Director

## TRAUMA EMERGENCY

**Does patient meet criteria for Iowa Out of Hospital Trauma Triage Destination Decision Protocol?**

YES

Transport to nearest Level 1 or 2  
Trauma Care Facility  
\*Consider air transport if over 30 minutes.

NO

Transport to nearest appropriate  
Trauma Care Facility of patient's  
choice within 45 miles.

## MEDICAL EMERGENCY

**Does patient present with a STEMI, STROKE, PSYCHIATRIC PROBLEM, or other signs indicating need for a Specialty Resource Facility?**

YES

Transport to nearest appropriate facility  
of patient's choice.  
\*STEMI – PCI capable facility  
\*Stroke – Primary Stroke Center

NO

Transport to nearest appropriate  
facility of patient's choice within 30  
miles.

### Bypassing Regional Hospitals

Regional hospitals in Iowa City should not be bypassed simply because the patient prefers a regional hospital in Cedar Rapids. A 5-mile difference is acceptable.

### NOTE

If there are multiple appropriate facilities within 30 miles and the patient does not choose the nearest, then obtain an ABN for non-covered mileage.

- If a patient or their financial representative is unable to sign an ABN, then transport to nearest appropriate facility.

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## EMERGENCY HOSPITAL TRANSFER

**An emergency transfer is defined as any transfer that requires an immediate response or as soon as possible, is going to a higher level of care or for specialty care not available locally, and the patient is experiencing an event that puts their health and life at serious risk without immediate transfer to another facility.**

Is the transfer destination requested within 45 miles of the ambulance service area?

YES

Transport to the facility requested by the transferring physician.

NO

- Advise the hospital to consider an alternative (e.g., Air Ambulance)
  - Notify the EMS Director, or next in charge if they are not available.
  - The EMS Director will consult with the transferring facility considering:
    - Necessity of the transfer
    - Condition of staff on 24-hour shift
    - Strain on resources and leaving 911 underserved.
    - Availability of other transport resources.
- The EMS Director will determine if the long-distance transfer will be accepted.

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## NON - EMERGENCY HOSPITAL TRANSFER

*All Non-Emergency Transfers Require a Physician Certification Statement (PCS).*

Is the transfer for a higher level of care, skilled patient appointment, or scheduled by the EMS Director who has advised the ambulance crew on the billing procedure & medical necessity?

YES

NO

- Transport to the facility requested by the transferring physician if within 45 miles of the service area.
- Transferred may be delayed if no ambulance is available to provide 911 coverage.
- Transfer may be declined if not within 45 miles of the service area.

Does the transport meet the definition of medical necessity?

- The patient must either be “bed confined” or suffer from a condition such that transport by means other than an ambulance is contraindicated.
- To be “bed-confined” the following 3 criteria must be met:
  - Unable to get up from bed without assistance.
  - Unable to ambulate.
  - Unable to sit in a chair (including wheelchair)

NO

YES

Decline transfer and suggest other means of transport.

**\*\*\*Non-Emergency Transfers for a higher level of care within 45 miles may only be delayed with approval of the sending Physician or Provider.**

- Obtain PCS.
- Obtain ABN if questionable medical necessity.
- Transport to facility requested if within 45 miles of the service area.
- Transfer may be delayed if no ambulance is available to provide 911 coverage.\*\*\*
- Transfer may be declined if not within 45 miles of the service area.

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## ADDITIONAL GUIDANCE

**Patient Choice** – A patient's choice in the destination decision is limited to the scope of this policy. Our EMS resources are limited, and patient choice shall not compel our EMS system to strain its resources and leave communities underserved just because a patient prefers a destination beyond our destination criteria outlined in this policy. If a patient is incapable of making a destination decision, or is a minor, then the decision would be delegated in the following order: (1) parent/guardian, (2) family, (3) physician, (4) nearest appropriate.

**Advanced Beneficiary Notice (ABN)** – An ABN is highly recommended for:

1. Non-medical necessary transports
2. Transports to a doctor's office
3. Mileage beyond the nearest appropriate facility

**Multi Casualty Incident** – Either the EMS Incident Command or Transport Officer will determine the most appropriate destinations.

**Unstable Patient** – This policy shall not restrict the EMS crew from transporting to the nearest facility when the situation warrants additional immediate assistance (e.g. Cardiac Arrest, Respiratory Arrest, Uncontrolled Hemorrhaging, etc...)

**Adverse Weather** – This policy shall not restrict the EMS crew from transporting to the nearest facility they feel they can travel to safely during adverse weather and/or road conditions.

### Service Area Hospitals

	Trauma Level	PCI (Cardiac Cath)	Primary Stroke Center	Adult Psych	Child Psych
Compass	4	NO	NO	NO	NO
UIHC	1	YES	YES	YES	YES
UIHC-Downtown	3	YES	YES	YES	NO
UIHC - NL	4	NO	NO	NO	NO
St.Lukes	3	YES	YES	YES	YES
Mercy-CR	3	YES	YES	YES	NO
Keokuk Co.	4	NO	NO	NO	NO
Grinnell	4	NO	NO	NO	NO
VA - IC	CALL AHEAD				

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## Mileage Chart

Origin	Destination					
	Marengo	Iowa City	Cedar Rapids	Grinnell	Sigourney	North Liberty
Amana	13	25	19	56	49	29
Conroy	8	31	42	44	37	29
High Amana	9	34	25	52	45	34
Homestead	11	22	24	53	46	25
Ladora	7	39	52	38	41	43
Marengo	1	36	32	45	38	37
Middle Amana	12	27	20	58	47	30
Millersburg	20	44	55	41	25	40
North English	20	43	54	50	18	50
Parnell	18	28	46	48	26	32
Victor	14	44	56	30	38	41
West Amana	8	33	26	52	45	32
Williamsburg	12	28	40	43	31	26