

Special Delivery:

The Pros and Cons of Police Transport

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The Evolution of Patient Transport



But When 9-1-1 is Called...



Police Transport of Patients

- Mumbai, India
- Tanzania
- Nigeria
- Malaysia
- Kampala, Uganda
- Louisville until 1972
- Psychiatric or violent pts/fellow LEOs



University of CO ED

- Aurora, CO, shooting, July 20, 2012
- Of 23 pts, 12 by police, 8 by PMV, 3 by EMS
 - Within 45 min., 9 police cars and 1 ambulance arrived with victims



Philadelphia Fire Department

- Sole 9-1-1 EMS response agency for City of Philadelphia
- 50 ambulances during peak hours
- Transport pts to 23 receiving hospitals
 - 8 trauma centers (2 are peds hospitals)
- 2012 EMS call volume 280,877
 - 5 ambulances went on > 8000 runs
 - At times, no ambulances available



Violence in Philadelphia

- 331 homicides in 2012 (82% due to firearms)
- If arrive shooting scene and no ambulance there, police often load and go
 - At times as ambulance arrives

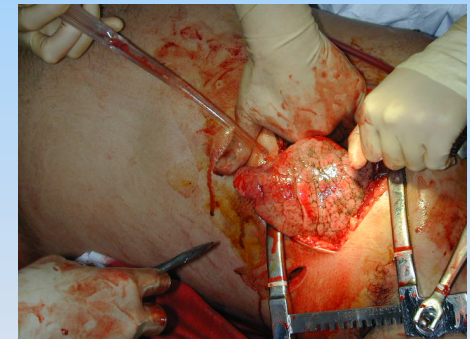


The Literature

- Impact of police transport on outcome of assault pts (blunt and penetrating)
 - 6 yrs of trauma registry data
 - PFD transported 2,108; PPD transported 1,356
 - Outcomes compared
- PFD pts had lower probability of survival
- After controlling for severity, outcomes of PPD pts equivalent to PFD pts

The Literature

- Outcome of 94 pts with penetrating cardiac injuries requiring EDT (87% GSW)
- Predictors of survival:
 - Stab wound
 - Higher GCS
 - Sinus tach on ED arrival
 - Measurable ED vital signs
 - **Transport by police**



The Literature

- Compared mortality for penetrating trauma pts transported by PPD, PFD over 5 yrs
 - 1558 by PFD, 569 by PPD (most were GSWs)
- PPD pts sicker
- After adjusting for injury severity, no difference in survival between groups
 - Practice of PPD transporting penetrating trauma pts should be continued



Media Attention

- “Philadelphia's unusual but effective policy: Police can transport trauma victims”
 - “This innovative program takes advantage of the existing law enforcement infrastructure to extend the EMS system and shorten time to definitive emergency medical care”

The Philadelphia Inquirer

Philadelphia Inquirer, June 4, 2011

EMSWORLD

www.emsworld.com/article/

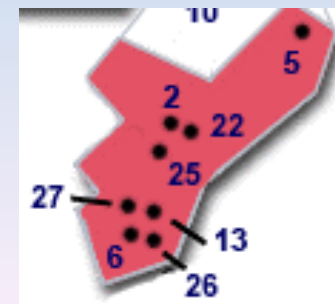
Media Attention

- “Philadelphia Police Begin Transporting Trauma Victims. New directive has police taking patients with penetrating injuries to nearest trauma center.”



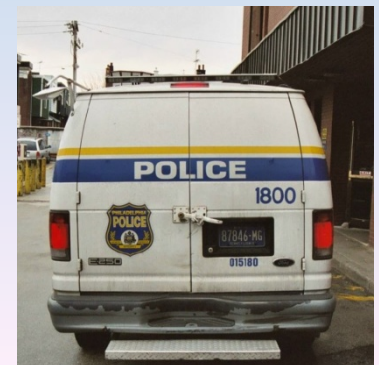
Pros

- Outcomes at least equal to EMS transport
 - Trauma is a BLS disease
- Gets police off of emotionally charged scene
- Police can be at trauma center in minutes
 - Often half of time of ambulance dispatch and pt transport



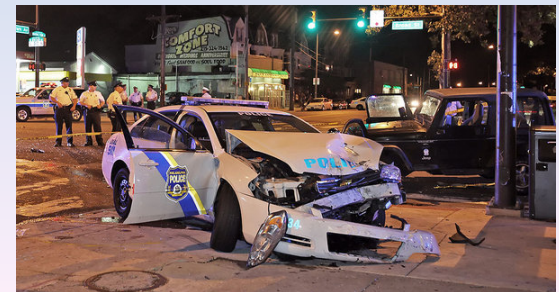
Cons

- Philadelphia Fire Department is sole 9-1-1 provider of EMS for City of Philadelphia
 - (Mayor Goode's 1988 Executive Order 7-88)
- Police vehicles not licensed ambulances
 - Function outside of EMS system
- Minimal medical training/equipment
- No medical oversight



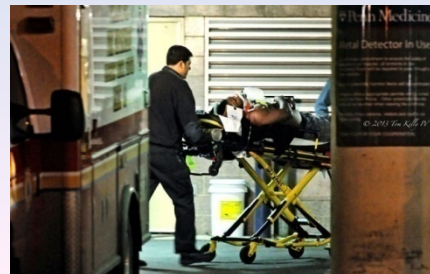
Cons

- No medical care en route
 - Pt not secured in vehicle
- Police sometimes go to non-trauma center
- May have been police-related shooting
- Fosters resentment among EMS
- Lessens incentive for City to give more resources to EMS
- Transports not reimbursed



Closing Thoughts

- Police transport is long-standing practice
- May save lives
 - Unclear if min. saved impact outcome
- Gets police off tense scenes
- Reflects need for more EMS resources
- Perhaps better to give EMS tools needed to do their job so police are freed up to do theirs



Thank You

