

SYSTEMS OF CARE THAT SCALE

Using the same Patient Movement Platform daily that can scale easily for local, regional, or national stress events or emergencies.

Readiness is a proactive, continuous process that allows communities to respond swiftly and effectively when an incident occurs. Therefore, using the same patient movement system daily that can scale to meet the demands of large scale all hazards stress events is a critical component of preparedness.



Pulsara's MED OPS infrastructure package supports flexible interactions for a variety of initiatives, but the cornerstone of a region's integrated system of care lies in the daily use of Pulsara for the EMS-to-ED prehospital report.

The phrase "fight like you train" captures this approach perfectly. By using Pulsara daily, communities build the muscle memory needed for seamless communication and coordination, ensuring effective transitions of care during high-stress, large-scale incidents and patient movement events.



During an incident with multiple patients, each patient has a dedicated communication and logistics channel creating situational awareness for the team providing care for that individual patient.

Within a standardized Incident Command System, Command and participating organizations also need situational awareness around the broader incident.



Therefore, Incident Command is able to create an incident around this group of patient channels.



Outside organizations can join the incident, add patients, and participate. Unless granted additional privileges by Incident Command, they are only able to see the patients where they are participating in their care.

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However, Incident Command can see all patients who are associated with the incident.



Command as the ability to Invite organizations like hospitals and EMS agencies to participate in the incident, and these organizations can choose who receives these critical notifications.

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Command can grant privileges to these organizations. They might allow a coordinating entity or a reunification center to see all patients and all patient details,

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but most commonly they grant these organizations the ability to see the incident summary.



Hospitals can fully participate in the incident, add patients who self-present to the hospital, and manage inter-facility transfers.



In addition, they can update their availability which is presented to the transport officer, transporting EMS agencies, and other hospitals when they are selecting their transport destination.



To add a virtual or physical Reunification Center, Incident Command invites the Reunification Center and grants access to all patients. Most regions will choose to have a single Reunification Center that can have representatives from multiple organizations, or access is provided via liaisons, but Pulsara can support multiple reunification centers in a region. Initially, individual patient channels may contain few details or identifying information.

As receiving hospitals are added and the patient's care team expands, more patient-identifying information is added to the individual channels. While clinicians will use patient channels to coordinate care, other hospital staff can assist with workflows aiding patient identification and reunification at the appropriate time.



Occasionally, there is a source of truth for potential victims. An example is an airline incident where the airline can upload a manifest and now use this as the source of truth for souls on board to help them reconcile against the main incident for reunification and reconciliation purposes. Similar roster uploads can be used to aid mass evacuations. Some communities will also create a single source of truth for missing persons, which can simplify access to this information and decrease the number of calls from people looking for duplicate missing persons.





Patient Movement Wristbands

OBJECTIVES

- Critical component of robust Patient Movement System
- Statewide | National Interoperability
 - Daily EMS to ED
 - Incidents
- Identify, find, move, hand off, and track "John & Jane Doe" patients

DAILY USE BENEFITS

- Simplified "Scan and go" patient hand off
- Unique ID from First Medical Contact to Definitive Treatment
- Build Muscle Memory for Incidents

INCIDENT BENEFITS

- Enable real-time situational awareness on the number and severity of patient encounters
- · Eliminate duplicate patients
- Creates self-healing patient movement system in chaotic environments with variable connectivity
- Patient Movement Wristbands are a critical component of a robust Patient Movement System.

Large-scale incidents are chaotic environments, and patient identification and tracking are not at the forefront of front-line providers' priorities.

Using patient movement wristbands on a daily basis helps simplify "scan and go" routine patient handoffs and makes their application automatic when under stress.

Following two simple rules provides organizations with real-time situational awareness on the number and severity of patient encounters, helping identify, find, move, and track "John and Jane Doe" patients and eliminate duplicate patients.



The two simple and intuitive rules of using Patient Movement Wristbands:

Rule 1: If you see a patient without a band, put a band on them. It is preferred to do this immediately at first patient contact. However, it may be most appropriate to do this at a casualty collection point in large-scale chaotic or dangerous environments.

Rule 2: If you see a band, scan it. If the band is in the system, it will open that patient channel and assign you to the patient. If it is new, it will prompt you to create the channel. This creates a self-healing patient movement system in chaotic environments with variable connectivity.

While the patient channel prominently displays the triage condition, some communities like the visual of colored triage tags on patients. They replicate this by applying colored tape to the wristbands.