

APPROPRIATENESS OF AIR MEDICAL TRANSPORT IN ACUTE CORONARY SYNDROMES

Position Statement of the Air Medical Physician Association

Approved by the AMPA Board of Trustees

November 10, 2001

BACKGROUND

Acute Coronary Syndromes are common reasons to utilize air medical transport. Regionalization of cardiac care to highly specialized centers, increasing the use of invasive and time sensitive therapies, and efforts to minimize both the absolute time to therapy and the dangerous out-of-hospital time are significant drivers in improving cardiac care and for increasing the utilization of air medical transport.

determination of medical appropriateness also negates the regional, environmental level of prehospital care and situational issues that are important factors at the time of transport in determining medical appropriateness for air medical transport in acute and potentially acute coronary syndromes.

AMPA POSITION STATEMENT

AMPA supports the use of air medical transport for adult patients with acute coronary syndromes requiring or potentially requiring urgent/time-sensitive intervention not available at the sending facility.

As outlined by the American Heart Association, acute coronary syndromes represent the spectrum of clinical disease presenting with syndromes ranging from unstable angina to Q-wave and non-Q-wave myocardial infarctions.

It is AMPA's position that the determination for the need for urgent/time-sensitive interventions is made by a physician, as documented on a written Certification of Medical Necessity.

Furthermore, AMPA acknowledges that scene air medical transport of acute coronary syndromes occurs routinely and supports that the medical necessity is determined by the requesting authorized provider based on regional policy and their best medical judgment at the time of the request for transport. AMPA supports that a receiving physician or the transport program medical director may complete the Certificate of Medical Necessity on scene transports.

AMPA does not support the use of discharge ICD-9 codes or other methodologies that retrospectively determine medical appropriateness of acute coronary syndromes, as this may adversely restrict access to appropriate care and may contradict the intent of EMTALA regulations. AMPA also believes that retrospective