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Emergency Medical Technician (EMT) and Paramedic (PM) Satisfaction with Patient Transfer of Care in the Emergency Department (ED)



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Objective

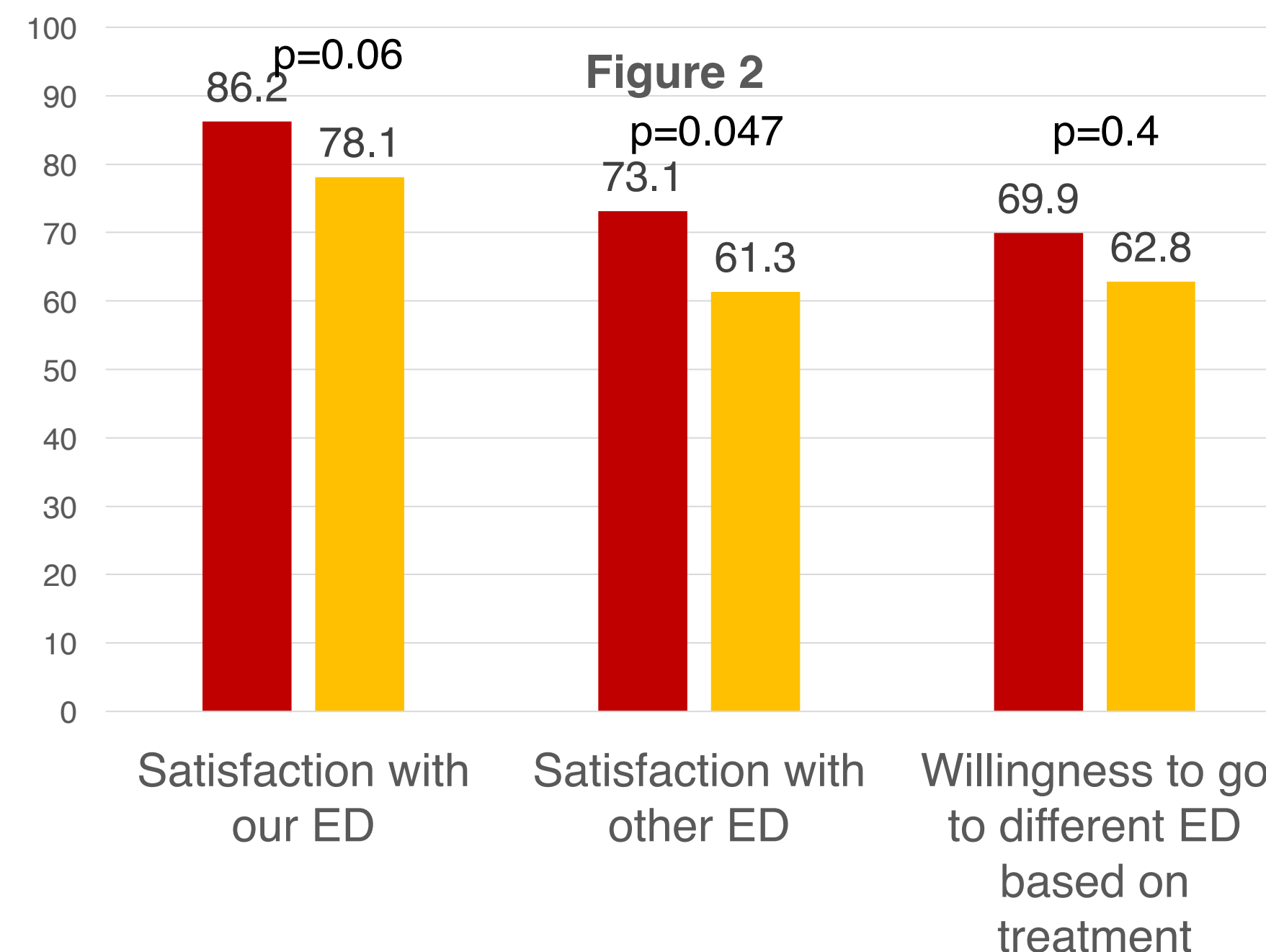
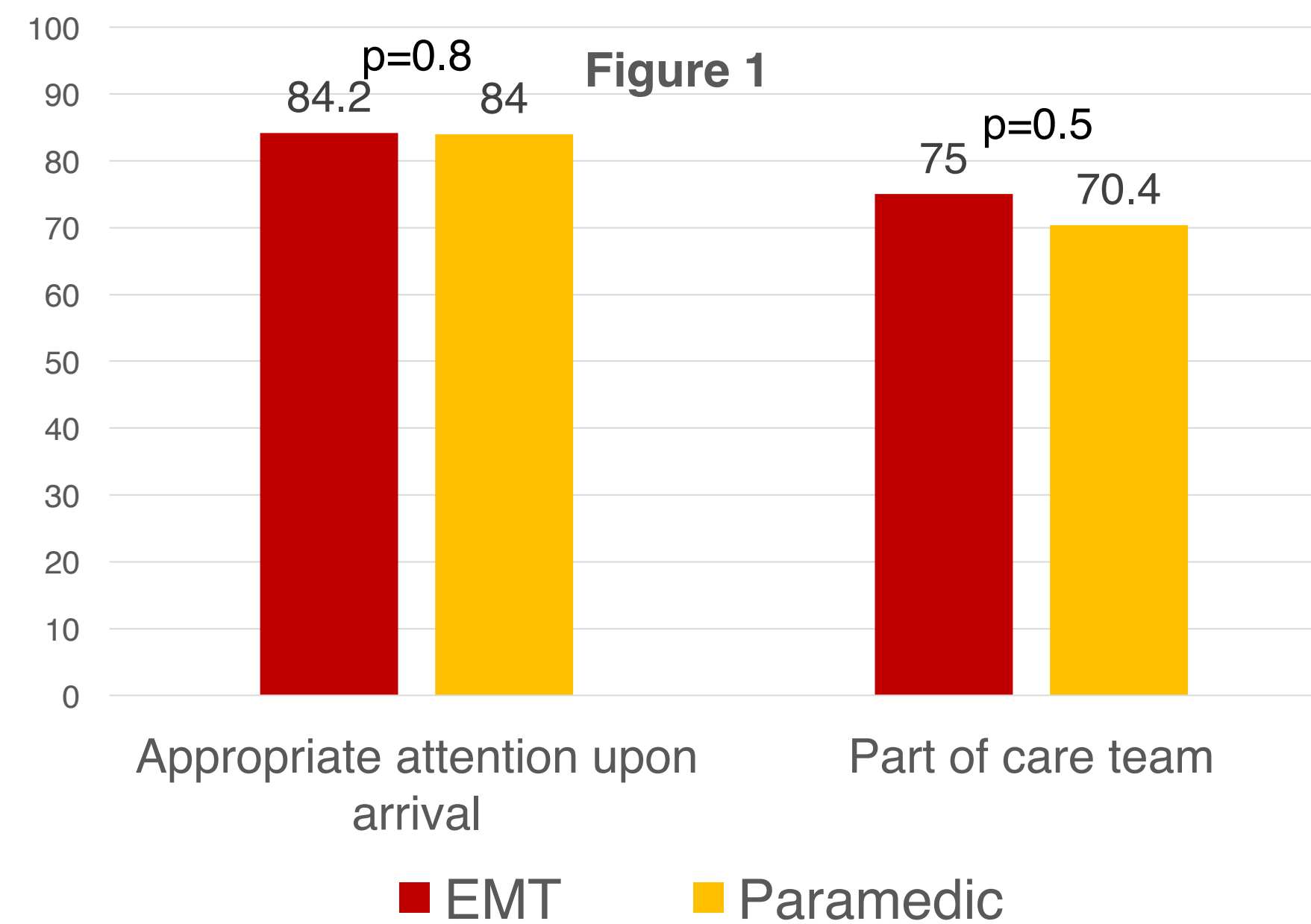
EMS destination may be determined by protocols, transport times, specialty care, or experiences at the facility, but EMS satisfaction may impact the quality of patient reports or transport destination. Difference in EMS satisfaction may be associated with level of training. We seek to examine perceptions and satisfaction of EMTs and Paramedics with the patient care transfer process in the ED.

Methods

Our study is a prospective, single-blind survey with a convenience sample of EMS who transported patients to our tertiary, inner city ED in June 2017. We collected a standardized data form including: demographic data, experience, and satisfaction with transfer process. Agreement was assessed on a "100 mm ruler" 100-point Visual Analogue Scale (0 for complete disagreement; 100 for complete agreement). Data is reported as means with standard deviations (SD). Comparisons were performed using t tests.

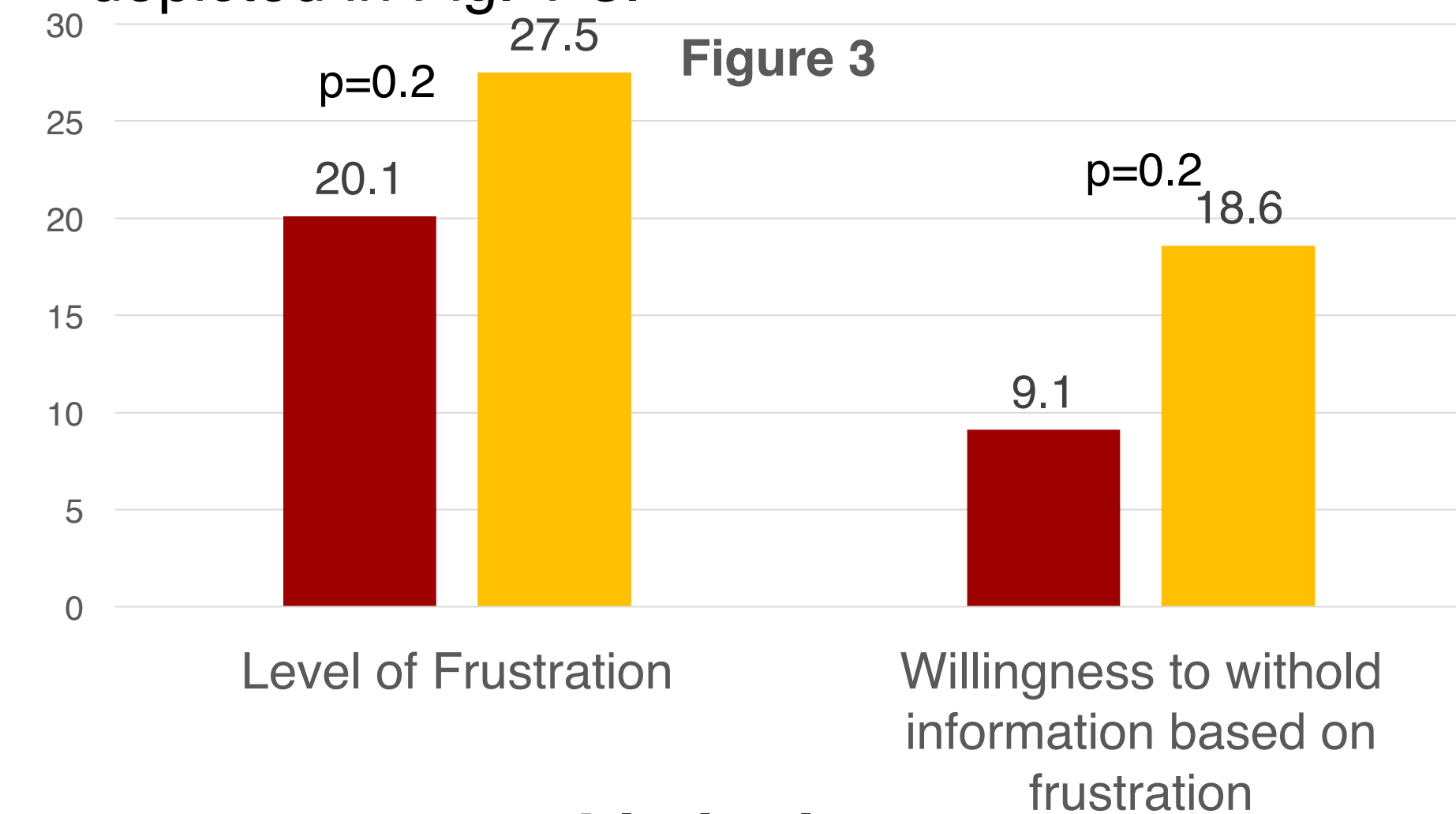
References:

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3. Meisel, Z. F., et al. (2015). "Optimizing the patient handoff between emergency medical services and the emergency department." *Ann Emerg Med* 65(3): 310-317.e311.
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Results

1. Our study enrolled 125 responders: 104 EMTs, 21 PM. Average age was 34.6 (9.5) vs. 39.6 (11.2), $p=0.03$ respectively, with average experience 11 years vs 18.6 years. Additional results are depicted in Fig. 1-3.



Limitations

Our study is limited by its small sample size of EMS providers, limited geographic area of study, and single ED.

Conclusions

Overall, our encounters were positive with prehospital providers satisfied with their outcomes in our Emergency Department, but a majority of EMS providers stated they would consider alternative destinations based on their treatment during patient care handoff.