DMIST

Standardizing the EMS to Trauma Team Patient Hand-off in Pennsylvania
Why Standardize

• The transfer of care is an activity that has potential for medical error

• ACEP, NAEMSP, NAEMT, NASEMSO and ENA position statements suggest the transfer of care process should include verbal report, written report, and an opportunity for the receiving provider to ask questions

• The DMIST process is not just about trauma patients; it can be useful in all types of patient hand-off including medical, stroke and STEMI patients
Why Standardize

• Trauma centers receive patients from multiple EMS agencies with varied EMS agency reporting processes

• EMS agencies may deliver patients to multiple trauma centers with each center having its own verbal report process

• Comments, questions and inquiries for Pennsylvania trauma centers and EMS agencies regarding the possibility of streamlining the EMS hand-off procedure, specifically the verbal report
DMIST Process

• EMS arrival with patient in trauma bay

• Depending on patient condition, the trauma team may request the verbal report immediately or after an assessment and/or medical interventions (outlined in next 2 PPTs)
Critical Patient DMIST Process

- Patient transferred to hospital stretcher
- Hospital team performs critical interventions as needed
- When appropriate, Hospital Team Lead calls for “EMS Time Out”
- 30-second period of silence for EMS report
- EMS remains present for additional questions
Stable Patient DMIST Process

- Patient remains on EMS stretcher
- Hospital Team Lead calls for “EMS Time Out”
- 30-second period of silence for EMS report
- Patient is transferred to hospital stretcher and hospital team begins care
- EMS remains present for additional questions
DMIST
Rapid 15-30 second report

- D - Demographics
- M - Mechanism of Injury / Medical Complaint
- I - Inspection / Injury / Illness
- S - Signs (vital signs)
- T - Treatment
DMIST Defined

• D – Demographics include patient age, gender and weight (as appropriate)
DMIST Defined

• M – Mechanism of Injury / Medical Complaint
  o Trauma
    • Time of injury, type of injury (fall, MVC, assault, etc.) speed, type of collision, height of fall, type of weapon, safety devices
  o Medical
    • OPQRST
DMIST Defined

• I – Illness / Injury
  o Trauma
    • List injuries head-to-toe
  o Medical
    • ECG, Stroke Scale, SAMPLE etc.
DMIST Defined

• S – Signs
  o GCS, pulse, respirations, BP, SpO2, blood sugar etc.
DMIST Defined

• T – Treatment
  o Oxygen, wound care, splinting, tubes, IV’s, chest decompression etc.
  o Response to treatment(s)
The PA DOH EMS Transfer of Care (TOC) Form is also an important part of the hand-off process.

Per regulation, EMS shall complete a TOC form and provide it to receiving facility staff prior to departing.
The DMIST Poster has been added to the appendix of the PA Statewide EMS Protocols.
Partnering Agencies