	CENTRAL DUPAGE HOSPITAL EMERGENCY MEDICAL SERVICES SYSTEM POLICY & PROCEDURES
TITLE: EQUIPMENT ADDITIONS	
SECTION: EQUIPMENT	POLICY NUMBER: E-5
APPROVED BY: DR. STEVE GRAHAM EMS MEDICAL DIRECTOR	
EFFECTIVE DATE: 01 JULY 2018	NUMBER OF PAGES: 2

PURPOSE:

To define the Central DuPage Hospital Emergency Medical Services (CDHEMSS) policy on system EMS agencies adding equipment / devices beyond the currently approved equipment / medication list.

POLICY:

When a provider within the CDHEMSS wishes to trial, or purchase additional equipment for use on patients, the agency must first submit a written request to the CDHEMSS Medical Director on the "Additional Equipment Request Form" as well as all required supportive literature. Upon review, the CDHEMSS Medical Director and IDPH may approve or deny the request, and will do so in writing. If approved, and prior to use:

1. All personnel must have documented training completed.
    a. Training must be preapproved by the CDHEMSS Medical Director and IDPH
2. All literature must be submitted to the EMSS office, including:
    a. Indications for use
    b. Age range for use
    c. Contraindications for use
    d. FDA approval
    e. Evidence of benefits to patient / crew care
    f. Education curriculum for each additional drug/equipment to include
        i. Objectives
        ii. Methods and materials
        iii. Content including
            1. Use
            2. Complications
            3. Adverse reactions
            4. Equipment maintenance
            5. Equipment use
            6. Evaluations of education / learning
    g. Additional information as requested by IDPH

Upon completion of the above listed steps, the agency will receive a letter authorizing the use of the device / equipment. During the first year the following steps shall be completed:

1. All uses must be documented in the patient care report (PCR), as well as the "Additional Equipment QA Form."
    a. Data shall be tracked by agency for 1 year or more as requested by IDPH
2. If any injury / death occurs during use of the device / equipment that could be device / equipment related, the CDHEMSS office must be contacted within 24 hours. Additionally, should injury or death occur related to the device, its use shall be suspended until the CDHEMSS Medical Director gives further direction.
    a. CDHEMSS will notify IDPH of device use suspension
3. If any failure of the device occurs, this shall be documented on the "Additional Equipment QA Form" and the CDHEMSS office shall be notified within 24 hours.

The requesting agency is responsible for providing data on the devices quarterly for 1 year to the CDHEMSS in accordance with IDPH regulations. These reports are due on Jan 1, April 1, July 1, and October 1. Data shall include, at a minimum

1. Indications for use
2. Number of times used
3. Number and types of complications that occurred
4. Outcome of patient after use
5. Description of follow-up actions taken by the system on each case in which complications occur.