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|  | X02 - DESTINATION (SECTION B) CHANGE TRACKING | |
| | Version date: 2024-11-05 | See appendix A for deleted documents |

| B01 - STANDARD DESTINATION |
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| <p>2024-01-16:</p> <ul style="list-style-type: none"> • Simplified flow chart & revised notes • CTAS & NEWS-2 implemented • Identifier legend at bottom of flow chart replaces work scope statement in header <p>2022-09-14:</p> <ul style="list-style-type: none"> • Direction to transport to destination within Manitoba for non-emergent circumstances • Addition of direct palliative care admission to table A <p>2022-07-08:</p> <ul style="list-style-type: none"> • Compliance statement moved out of header to become policy & procedure A03 • Work scope statement added to header <p>2022-04-15:</p> <ul style="list-style-type: none"> • Renumbered from A04.1 and moved to section B • Reformatted (replacement of colored boxes with scope of work statement & 3 letter indicators) • Revised flow chart for ease of use & expanded notes for greater clarity • Paramedics will contact OLMS (not OCS) for destination decision support (item #3) • Clarification that patient / proxy cannot request specific destination (item #5) • Clarification about which critical situations go to with or without a physician present (item #8) • Clarification that a designated site may redirect patients who do not meet criteria for designated site (item #9) • New table A for designated hospitals (reduced list of links) • Reminder to transport to Wpg hospital when closest to Perimeter <p>2020-04-24:</p> <ul style="list-style-type: none"> • Inclusion of flow chart for quick reference • Revised notes for clarification • Alignment with protocols that have specific destinations • Updated list of current destination protocols • Inclusion of some content from the previous A04 (note #6) <p>2018-10-16:</p> <ul style="list-style-type: none"> • Original version |
| B02 - REDIRECTION ADVISORY |
| <p>2024-01-16:</p> <ul style="list-style-type: none"> • Revised flow chart & notes <ul style="list-style-type: none"> ○ Destination based on CTAS level & NEWS-2 for standardization ○ Definition of “open” ED added • Tension pneumothorax removed from first box (covered by second box as need to go to site with MD) • Instruction to call OCS for operational issues • Identifier legend at bottom of flow chart replaces work scope statement in header <p>2022-07-08:</p> |

- Compliance statement moved out of header to become policy & procedure A03
- Work scope statement added to header

2022-04-16:

- Renumbered from A04.2 and moved to section B
- Reformatted (replacement of colored boxes with scope of work statement & 3 letter indicators)
- Revised flow chart for ease of use & expanded notes for greater clarity
- Increased role of OLMS in managing redirections
- Patient must be informed of redirection but consent not required
- Clarification that redirection advisory might be over-ruled in some specific situations
- Removal of table C

2020-04-28:

- Simplified flow chart
- Revised notes for clarification
- Updated list of current destination protocols 2019-11-26:
- Original version

2019-11-26:

- Original version

B03.1 - WINNIPEG DESTINATIONS FOR ACUTE CARE

2042-06-18:

- Renumbered and renamed (from DESTINATION WHEN CLOSEST ED IS IN WINNIPEG)
- Simplified flow chart, expanded information in tables
- Major trauma and major burns defined (appendix A and B)
- Non-traumatic cardiac arrest with ROSC divided into age over 17 (SBH) and age under 17 (Children's)
- Obstetrical emergencies & addictions / mental health conditions moved to new protocols (B03.2 & B03.3)
- Removal of ambulatory for possible transports to UCC, but CTAS & NEWS-2 criteria added

2023-12-07:

- Obstetrical & neonatal emergencies will be transported to the closest of HSC or SBH
- Known or suspected hip / femur fractures will be transported to GH or CH depending on day of the week
- Selected patients (CTAS 4 / 5 and ambulatory) may be transported to urgent care
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-10-16:

- Children under 17 years of age who do not meet any other destination criteria will now be transported to Children's ED to align with WFPS protocol

2022-07-08:

- Compliance statement moved out of header to become policy & procedure A03
- Work scope statement added to header

2022-04-16:

- Renumbered from A08.1 & moved to section B
- Reformatted (replacement of colored boxes with scope of work statement & 3-letter indicator)
- Revised flow chart for ease of use & revised notes for greater clarity
- Removal of SBH as stroke center

2020-04-13:

- Clarification of destination for trauma victims by age
- Alignment with COVID 19 protocols 4 A08.1 – DESTINATION ED-WINNIPEG

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| <ul style="list-style-type: none"> • Reformatting <p>2019-09-25:</p> <ul style="list-style-type: none"> • Original version |
| B03.2 - WINNIPEG DESTINATIONS FOR MATERNAL & NEWBORN CARE |
| <p>2024-06-18:</p> <ul style="list-style-type: none"> • New |
| B03.3 - WINNIPEG DESTINATIONS FOR MENTAL HEALTH & ADDICTIONS |
| <p>2024-06-18:</p> <ul style="list-style-type: none"> • New |
| B04.1 - TRAUMA DESTINATION FOR IERHA & SHSS GEOGRAPHIC AREAS |
| <p>2024-10-25:</p> <ul style="list-style-type: none"> • Paramedics will radio MTCC if STARS has been pre-alerted or autolaunched • Paramedics will call VECTRS for OLTS • Simplified flow chart & revised notes for greater clarity & ease of use <p>2024-04-10:</p> <ul style="list-style-type: none"> • Clarification to call MTCC and request OLTS <p>2023-11-14:</p> <ul style="list-style-type: none"> • Retitled from “TRAUMA TEAM ACTIVATION FOR IERHA & SHSS GEOGRAPHIC AREA” • Paramedics will contact OLTS <p>2023-10-10:</p> <ul style="list-style-type: none"> • Retitled from “TRAUMA BYPASS FOR IERHA & SHSS GEOGRAPHIC AREA” to align with Provincial trauma strategy • Request “trauma team activation” instead of trauma bypass • Appendix A added • Identifier legend at bottom of flow chart replaces work scope statement in header <p>2023-06-11:</p> <ul style="list-style-type: none"> • New reference link (H12) <p>2023-05-06:</p> <ul style="list-style-type: none"> • Contact MTCC for all patients who meet criteria • Paramedics will request “trauma bypass” to avoid confusion <p>2022-07-08:</p> <ul style="list-style-type: none"> • Compliance statement moved out of header to become policy & procedure A03 • Work scope statement added to header <p>2022-04-17:</p> <ul style="list-style-type: none"> • Corrections to links section • Revised flow chart for ease of use • Increased note details for clarification <p>2022-01-20:</p> <ul style="list-style-type: none"> • Reformatted, renumbered (B04.1.1 → B04.1) & retitled • Statement regarding compliance with ERS policies / procedures / care maps added to header • Work scope identifiers (ALL / PCP) replace colored boxes & standardized to 3-letter abbreviations • Revised & simplified flow chart |

- Work scope statement has been moved to the top of flow chart
- Revised notes
 - Immediate life-threatening conditions have been clarified for those relevant to trauma
 - All calls for trauma bypass to go through STARS TP
 - Paramedics will not call TP or bypass closest ED for patient who do not meet trauma bypass indicators

2021-09-28:

- Renumbered from F11 (section B will become repository for all destination policies) and reformatted
- Applies only to incidents within the boundaries of IERHA and SHSS (B04.1.1); PMH (B04.1.2); and NRHA (B04.1.3)
- Revised and simplified flow chart
- Clarification of calling STARS or OLMS physician for clinical support
- Revised table of field triage criteria includes HR > 120 (adults), focal neurological deficits, significant injury ion pregnant patient and extremity hemorrhage (to align with Provincial Trauma Program and WFPS Trauma Triage protocol)

2021-06-16:

- New

B04.2 - TRAUMA DESTINATION FOR PMH GEOGRAPHIC AREA

2024-10-25:

- Paramedics will radio MTCC if STARS has been pre-alerted or autolaunched
- Paramedics will call VECTRS for OLTS
- Simplified flow chart & revised notes for greater clarity & ease of use

2024-04-10:

- Clarification to call MTCC and request OLTS

2023-11-14:

- Retitled from “TRAUMA TEAM ACTIVATION FOR PMH GEOGRAPHIC AREA”
- Paramedics will contact OLTS

2023-10-19:

- Retitled from “TRAUMA BYPASS FOR PMH GEOGRAPHIC AREA” to align with Provincial trauma strategy
- Request “trauma team activation” instead of trauma bypass
- Appendix A
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-06-11:

- New reference link (H12)

2023-05-06:

- Contact MTCC for all patients who meet criteria
- Paramedics will request “trauma bypass” to avoid confusion

2022-07-08:

- Compliance statement moved out of header to become policy & procedure A03
- Work scope statement added to header

2022-07-08:

- Reversal of misplaced “yes” and “no” attached to second box

2022-04-17:

- Corrections to links section
- Revised flow chart for ease of use
- Increased note details for clarification

2022-01-20:

- Reformatted, renumbered (B04.1.2 → B04.2) & retitled
- Statement regarding compliance with ERS policies / procedures / care maps added to header
- Work scope identifiers (ALL / PCP) replace colored boxes & standardized to 3-letter abbreviations
- Revised & simplified flow chart
- Work scope statement has been moved to the top of flow chart
- Revised notes
 - Immediate life-threatening conditions have been clarified for those relevant to trauma
 - All calls for trauma bypass to go through STARS TP
 - Paramedics will not call TP or bypass closest ED for patient who do not meet trauma bypass indicators

2021-09-28:

- Renumbered from F11 (section B will become repository for all destination policies) and reformatted
- Applies only to incidents within the boundaries of PMH
- Revised and simplified flow chart
- Clarification of calling STARS or OLMS physician for clinical support
- Definition of north-south and east-west divides
- Revised table of field triage criteria includes HR > 120 (adults), focal neurological deficits, significant injury ion pregnant patient and extremity hemorrhage (to align with Provincial Trauma Program and WFPS Trauma Triage protocol)

2021-06-16:

- New

B04.3 - TRAUMA DESTINATION FOR NRHA GEOGRAPHIC AREA

2024-10-25:

- Paramedics will radio MTCC if STARS has been pre-alerted or autolaunched
- Paramedics will call VECTRS for OLTS
- Simplified flow chart & revised notes for greater clarity & ease of use

2024-04-10:

- Clarification to call MTCC and request OLTS

2023-11-14:

- Retitled from “TRAUMA TEAM ACTIVATION FOR NRHA GEOGRAPHIC AREA”
- Paramedics will contact OLTS

2023-10-10:

- Retitled from “TRAUMA BYPASS FOR NRHA GEOGRAPHIC AREA” to align with Provincial trauma strategy
- Request “trauma team activation” instead of trauma bypass
- Appendix A added
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-06-11:

- New reference link (H12)

2023-05-06:

- Contact MTCC for all patients who meet criteria
- Paramedics will request “trauma bypass” to avoid confusion

2022-07-08:

- Compliance statement moved out of header to become policy & procedure A03
- Work scope statement added to header

2022-04-17:

- Corrections to links section
- Revised flow chart for ease of use
- Increased note details for clarification

2022-01-20:

- Reformatted, renumbered (B04.1.3 → B04.3) & retitled
- Statement regarding compliance with ERS policies / procedures / care maps added to header
- Work scope identifiers (ALL / PCP) replace colored boxes & standardized to 3-letter abbreviations
- Revised & simplified flow chart
- Work scope statement has been moved to the top of flow chart
- Revised notes
 - Immediate life-threatening conditions have been clarified for those relevant to trauma
 - All calls for trauma bypass to go through STARS TP
 - Paramedics will not call TP or bypass closest ED for patient who do not meet trauma bypass indicators

2021-09-28:

- Renumbered from F11 (section B will become repository for all destination policies) and reformatted
- Applies only to incidents within the boundaries of PMH
- Revised and simplified flow chart
- Clarification of calling STARS or OLMS physician for clinical support
- Definition of north-south and east-west divides
- Revised table of field triage criteria includes HR > 120 (adults), focal neurological deficits, significant injury ion pregnant patient and extremity hemorrhage (to align with Provincial Trauma Program and WFPS Trauma Triage protocol)

2021-06-16:

- New

B05 - DIRECT TRANSPORT TO PALLIATIVE CARE UNIT

2023-10-20:

- Retitled from "TRANSPORT FOR DIRECT ADMISSION TO PALLIATIVE CARE "
- OLMS physician changed to OLMS

2022-09-27:

- New