



University of Pennsylvania Police Department 4040 Chestnut Street, Philadelphia, Pa 19104		 
Directive: 31	Subject: Hospital Cases	Effective Date: 01/27/2000
Order of: Gary Williams, Chief of Police		Amended Date: 08/01/2023

I. PURPOSE

The purpose of this directive is to provide procedures for police response to calls for service involving injury and/or illness and to establish steps to be followed by University of Pennsylvania Police Department (UPPD) personnel.

II. POLICY

It is the policy of the UPPD to treat all "Emergency Hospital Case" calls as emergency situations unless advised otherwise by a medically competent person. Officers assigned "Emergency Hospital Cases" will respond to such calls as quickly and safely as possible in the "Emergency Response Mode" in accordance with **Directive 26, "Routine and Emergency Vehicle Operation."**

III. SCOPE

This directive shall affect all sworn police officers.

IV. DEFINITIONS

- A. **Emergency Hospital Cases:** For purposes of this directive, "Emergency Hospital Cases" (i.e. heart attacks or persons experiencing chest pain, seizures, strokes, shock, overdoses, diabetic emergencies, unconsciousness, poisoning, broken bones, back or neck injuries, serious penetrating wounds such as gun shot or stab wounds, choking or breathing difficulties, severe burns, severe bleeding, females in labor, etc.) are defined as those emergency situations of a life threatening or potentially life threatening nature where immediate specialized medical intervention is required. All such cases will be directed to the Philadelphia Fire Department's (PFD) Fire Rescue Paramedics.
- B. **Medical Escorts:** For purposes of this directive, "Medical Escorts" (i.e., follow-up medical appointments, minor cuts or abrasions, cold symptoms, etc., where the victim is ambulatory) are defined as those "non-emergency" requests for transportation to Student Health or the

Hospital of the University of Pennsylvania. Such escort requests will be referred to, and handled by, the University of Pennsylvania Department of Transportation and Parking.

V. PROCEDURES

A. PennComm Center Responsibilities

1. The PennComm Center will be responsible for screening requests for services involving injuries/ illnesses and obtaining as much information as possible to determine the severity or possible presence of life-threatening conditions.
2. In order to dispatch the call correctly, the call taker will obtain the following information:
 - a. caller's name;
 - b. address/location of victim;
 - c. call back number;
 - d. nature of the injury/illness; and
 - e. any other pertinent information. (i.e., relatives, medications used, etc.)
3. If deemed an "Emergency Hospital Case," as defined above, the call taker will:
 - a. have the caller stay on the line and immediately notify the PFD via the direct ring-down line and request that a Fire Rescue Unit and a PPD police officer be dispatched to the location of the injured/ill person(s), as appropriate and/or as needed;
 - b. immediately dispatch UPPD officers to render care until the PFD Paramedics arrive;
 - c. notify the Shift Commander/Supervisor of the situation; and
 - d. enter the appropriate information into the Computer Aided Dispatch (CAD) system as it becomes available.
 - e. dispatch the Penn Medical Emergency Response Team (MERT) during their working hours if the scene is deemed safe by UPPD personnel.
 - f. dispatch the Philadelphia Fire Department Alternative Response Unit (AR1) during their working hours.

Note: If no UPPD mobile units are available, (including supervisors) the PennComm Center supervisor will immediately provide this information to a Shift Commander/Supervisor who will re-assign a UPPD mobile unit to the location of the emergency hospital case.

4. If deemed a "Medical Escort," as defined above, the call taker will:

- a. explain to the caller that the Penn Transit will service their request (inform caller to look for a vehicle labeled "Penn Transportation");
 - b. dispatch the request to the Penn Transit; and
 - c. enter the appropriate information into the CAD system.
5. If upon their arrival, Penn Transit determines that the escort is actually an "Emergency Hospital Case," Penn Transit will immediately contact the PennComm Center.
 - a. The PennComm call taker will immediately follow the procedures outlined in Section V., A., 3., above.
 6. PennComm Center personnel should also be guided by their standard operating procedures.
 7. The PennComm Center Police Supervisor will ensure that all of the aforementioned directions are adhered to as warranted.

NOTE: If in doubt as to the severity of the caller's injury/illness, UPPD personnel will notify the PFD Fire Rescue.

B. Officers' Responsibilities

1. Officers assigned "Emergency Hospital Cases" will proceed directly to the scene. Officers assigned to emergency vehicles will respond in the "Emergency Response Mode."
2. Upon arrival at the scene, officers will:
 - a. survey the scene for any potential hazards such as fire, toxic fumes, heavy traffic, electrical wires, etc.;
 - 1) If an officer cannot get to the victim because of extreme hazards, the PennComm Center will be notified, and additional services needed to handle the specific life-threatening hazard will be requested. (i.e., fire department, water company, gas company, electric company, etc.).
 - b. secure the scene;
 - c. exercise safety precautions in accordance with **Directive 32, "Occupational Exposure to Blood-borne Pathogens."**
 - d. do a primary survey (if PFD Fire Rescue is not yet on location) of the victim and provide first aid or CPR if appropriate, (See section V., C., below);
 - e. apprise the PennComm Center of the situation and request additional personnel if necessary; and

- f. do a secondary survey of the victim, when appropriate.
3. If an officer is "flagged down" or comes upon a medical emergency while on patrol, the officer will evaluate the situation as outlined above and immediately notify the PennComm Center of conditions. The officer will request PFD Fire Rescue if necessary or:
 - a. if the officer determines that PFD Fire Rescue is not necessary, the officer will call the PennComm Center and request the services of the PTS.
4. UPPD officers will not transport victims to a hospital unless instructed to do so by PFD Fire Rescue personnel or a UPPD supervisor.
5. If transporting a victim to a hospital, the transporting officer will notify the PennComm Center of the type of injury/illness and hospital destination.
6. In addition to the above responsibilities, officers will also be responsible for:
 - a. securing any crime or accident scene;
 - b. traffic congestion;
 - c. crowd control; and
 - d. assisting PFD personnel as directed by the PFD.
7. All responses to "Emergency Hospital Cases" require the preparation of an Incident Report (UPPD-10).

C. First Aid/CPR Consent Law

1. Legally, a victim must give consent to an offer to help before a person trained in first aid or CPR can render care. The law assumes that an unconscious victim would give consent; therefore, consent is implied if the victim is unconscious. Consent is also implied if:
 - a. the victim is mentally or emotionally disturbed and does not appear to be able to make a rational decision; or
 - b. the victim is so ill or badly injured that he/she cannot respond.
2. If the victim is a juvenile (under 18 years of age), the responding officer should make a reasonable attempt to get consent from the child's parent, guardian or custodian before rendering care. If a parent, guardian or custodian is not available or cannot be reached, the law assumes that the parent would give consent; therefore, consent is implied.
 - a. An officer may also take custody of a juvenile against his/her parent's wishes if there are reasonable grounds to believe that the child is suffering from illness or injury or is in imminent danger from his/her surroundings, and that his/her removal is necessary.

3. If the victim does not fit into one of the above categories, and refuses to give consent, the officer will have the person sign a PPD 75-48 and submit it with the Incident Report. The officer will notify his/her supervisor of the situation prior to going back into service.

D. Philadelphia Fire Department Responsibilities

1. The PFD Fire Rescue Paramedics will respond to all "Emergency Hospital Cases" and will assume full responsibility for the medical welfare of the injured/ill person.

E. Supervisory Responsibilities

1. The Shift Commander/Supervisor will monitor all "Emergency Hospital Cases" and respond when appropriate to ensure compliance with policy and procedures outlined in this directive.
2. If the person transported to the hospital is a University affiliate, and the person is admitted to the hospital the Shift Commander/Supervisor will ensure that the PennComm Police Supervisor makes periodic checks on the status of the individual being treated. These checks will be documented on the UPPD Summary Sheet.

F. Compliance

Violations of this directive, or portions thereof, may result in disciplinary action.

G. Officers Assigned To Other Agencies

Officers of this department assigned to or assisting other law enforcement agencies will be guided by this directive.

H. Application

This directive constitutes departmental policy, and is not intended to enlarge the employer's or employee's civil or criminal liability in any way. It shall not be construed as the creation of a higher legal standard of safety or care in an evidentiary sense with respect to third party claims insofar as the employer's or employee's legal duty as imposed by law. Violations of policy will only form the basis for departmental administrative sanctions. Violations of law will form the basis for civil and criminal sanctions in a recognized judicial setting.