Policy Guidance is hereby provided to:

All New Jersey Mobile Intensive Care Programs

Issue: Two Mobile Intensive Care Programs have asked that the Twiage product be recognized as an "other approved means" within N.J.A.C. 8:41-3.22 Biomedical telemetry communications: MICUs and AMUs only.

N.J.A.C. 8:41-3.22 Biomedical telemetry communications: MICUs and AMUs only
...(c) Each time an ALS crewmember makes contact with the medical command physician, a voice recording of the call shall be made. This shall be done regardless of whether the means of two-way communications is radio (including HEAR), telephone (regular, cellular and/or wireless) or any other approved means.

Department Review: The Department has reviewed the Twiage product and has determined that use of Twiage shall be an "other approved means" for the purposes of N.J.A.C. 8:41-3.22 Biomedical telemetry communications: MICUs and AMUs only, and is appropriate for:

1. All EMS Clinicians providing clinical report to the Emergency Department.
2. Mobile Intensive Care and Mobile Specialty Care Clinicians making contact with the Medical Direction Physician in the setting of providing clinical report where no further physician direction is anticipated.

When the following conditions exist:

1. Twiage is part of the Mobile Intensive Care Program’s Communication Plan.
2. The Mobile Intensive Care Program’s Communication Plan includes a process to either include, transfer, or transmit the biomedical telemetry communications to the receiving hospital physician when the patient is not being transported to the base hospital where the Medical Direction Physician is located.
3. The Mobile Intensive Care Program maintains a primary and a separate and distinct secondary means of communications equipment as outlined in N.J.A.C. 8:41-9.18 Two-way communications, explicitly including maintaining JEMS frequencies 1-4 on each EMS vehicle and JEMS 2/HEAR radios in the emergency department.

Terms & Conditions: Prior to implementation of this protocol, all area EMS Clinicians who regularly transport patients to that hospital are provided with in-service training on the revised Communications Plan

Duration: This guidance shall remain in effect until the current version of N.J.A.C. 8:41 has been revised.

For: Christopher R. Rinn, Acting Commissioner

By: Scot Phelps, JD, MPH, Paramedic
Director, Office of Emergency Medical Services

Date Issued: December 8, 2017
Expiration Date: Upon Regulatory Revision