



Countywide AWARE Direct-to-Receiving Hospital Notification

EMS Job Aid | Effective September 2, 2026 at 0800

Beginning September 2, 2026, contact the receiving hospital directly on its designated radio channel and give a report using the AWARE format. **AWARE is intentionally brief and serves as a readiness notification.**

Who Should I Call?

Receiving Hospital	Routine transport with an established destination: use the hospital's designated radio channel and the AWARE format. Non-base hospitals should not provide medical or destination direction.
Base Hospital	OLMD (BHO/BHPO/EPE), clinical advice, destination assistance, or any policy/protocol-required contact (e.g., termination, AMA). MICN will relay report to non-base destination. If needed, make base contact to confirm specialty availability without giving full report.

Use the AWARE format

A	Alert, Acuity, Arrival: Hospital; unit & CAD #; patient/notification type; mild, moderate, or acute; ETA.
W	Who and What: Age and sex; chief complaint or mechanism; relevant time marker (e.g., LKW, onset, injury time, downtime).
A	Abnormal Assessment: Abnormal vital signs, mental status, or findings that affect preparation. For a mild patient with no concerning findings, use "normal vitals."
R	Response to Treatment: Significant treatment and clinically relevant response (e.g., meds, procedures, access)
E	ED Readiness Needs: Specialty activation, RT or equipment, PPE/isolation, security, decontamination, or other immediate clinical preparation.

Examples

MILD: "Kaiser San Marcos, RA141, CAD# 2026-999999, mild status medical, ETA 8 minutes. 42-year-old female with abdominal pain and nausea for 6 hours. Normal vitals. No treatment."

MODERATE: "Palomar Poway, M93, CAD# PW26999999, moderate status stroke alert, ETA 12 minutes. 76-year-old female with new right arm weakness and slurred speech, last known well 45 minutes ago. BP 188/96, glucose 112, alert, BE-FAST positive. FAST-ED 2."

ACUTE: "Palomar Escondido, RA131, CAD# 2026-999999, acute major trauma alert, ETA 5 minutes. 25-year-old male, motorcycle crash with ejection, GCS 10, systolic BP 86. IV access obtained, fluids started, being ventilated. More details on arrival."

Reminders

Brief: Routine notifications should generally take 30 seconds or less. Give the shortest report that allows safe preparation. For an acute hands-on patient, give the essential alert first.

Relevant: Report only what affects immediate hospital readiness or continuity of care.