

2025 Emergency Department Capabilities Report	Hamilton				Indiana								
	Christ Hospital	**Cincinnati Childrens-Main	UC Medical Center	Cincinnati VAMC	Good Samaritan	Ascension St Vincent Jennings	***Decatur County Memorial	Shelbyville	Major Hospital	Batesville	Margaret Mary	Rush Memorial Hospital	St. Elizabeth Dearborn
Type of facility (H=Hospital, FS= Free-Standing)	H	H	H	H	H	H	H	H	H	H	H	H	H
EMS transport of PEDIATRIC patients:													
Capability to provide definitive care for a post-arrest pediatric patient without transfer/transport		Y											
Capability to provide definitive care for a pediatric diabetic emergency/DKA patient without transfer/transport		Y	Y										
Capability to assess, treat, and stabilize a pediatric patient with isolated minor orthopedic injuries	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y	Y	Y
Capability to assess, treat, and stabilize a pediatric patient with minor trauma? (lacerations, single system trauma, etc.)	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y	Y	Y
Verified Pediatric Trauma Center and Level		1											
Can admit, without transfer/transport, a pediatric patient to a general inpatient setting		Y					Y	Y					
Can admit, without transfer/transport, a pediatric patient to an ICU setting		Y											
EMS Transport of BURN patient:													
Capability to assess, treat, and stabilize a patient with major burns	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Capability to assess, treat, and stabilize a patient with burns and associated inhalation injury	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y	Y	Y
Can admit, without transfer/transport, a patient with a diagnosis of smoke inhalation		Y	Y										
Verified Burn Center and level			Y										
EMS transport of Adult ROSC/Cardiac Arrest patients:													
ECPR capabilities available 24/7	Y	Y	Y				Y						
Routinely performs intra-arrest cardiac catheterization 24/7			Y										
Cardiac Catheterization capabilities available 24/7 without transfer/transport	Y	Y	Y		Y								
EMS transport of Adult Trauma patients:													
ACS verified Trauma Center and level		1	1										
Capability to provide definitive care for a patient with traumatic intracranial hemorrhage without transfer/transport	Y	Y	Y		Y								
Capability to provide definitive care for a patient with long-bone fractures without transfer/transport	Y	Y	Y	Y				Y					Y
Capability to provide definitive care for a patient with significant (non-minor) ocular trauma without transfer/transport		Y	Y										
Capability to provide definitive care for a patient with significant hand injury/infection without transfer/transport	Y	Y	Y	Y	Y			Y					
Capability to provide definitive care for a patient with traumatic spinal cord injury without transfer/transport	Y	Y	Y										
Capability to conduct mass-decontamination operations for HAZMAT/contaminated patients upon arrival 24/7		Y	Y	Y	Y	Y	Y	Y	Y	Y			Y
Security/police presence available 24/7	Y	Y	Y	Y	Y			Y					Y
Capability to assess, treat, and stabilize a verbally abusive/belligerent patient	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Capability to assess, treat, and stabilize a violent/restrained patient	Y	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y
Utilizes an EMS pre-notification/Medical Control line that is recorded	Y	Y	Y		Y	Y							Y

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EMS transport of STROKE patients:													
ASRH - Acute Stroke Ready hospital - CT Head, TPA and transfer PSH - Primary Stroke hospital - CT Head, TPA, 24/7 TCSC - Thrombectomy Capable Stroke Center - additional thrombectomy capabilities for LVOs CSC - Comprehensive Stroke Center - LVOs, hemorrhagic stroke, admit to a Neurological ICU	Primary	Pediatric	Comprehensive	Limited Hours Stroke Facility	Comprehensive				Primary				Acute Stroke Ready
EMS transport of patients assessed to be INTOXICATED/POISONED:													
Capability to assess, treat, and stabilize a patient that is intoxicated/poisoned	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Can admit, without transfer/transport, a patient with a diagnosis of toxic ingestion	Y	Y	Y	Y	Y		Y	Y		Y	Y	Y	Y
Emergency dialysis capabilities available 24/7	Y	Y	Y	Y	Y								
Regarding EMS transport of PSYCHIATRICALY ILL patients:													
Capability to assess, treat, and stabilize a non-violent psychiatric patient	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Can admit, without transfer/transport, adult psychiatric patients	Y		Y	Y	Y								
Can admit, without transfer/transport, pediatric psychiatric patients		Y											
Regarding patients with EMS transport of OB patients:													
Inpatient OB services available 24/7	Y	Y	Y		Y		Y	Y	Y				
*Level of Nursery/NICU	3	4	3		3			1					
*NICU Level Designations: Level I: Well Newborn Nursery Level II: Special Care Nursery Level III: Neonatal Intensive Care Unit (NICU) Level IV: Regional NICU													
** Pediatric Only													
***Capabilities for this facility were not verified by time of publishing													