EMS System for Metropolitan Oklahoma City and Tulsa
2026 Medical Control Board Treatment Protocols

PROTOCOL 17B, Table: Categorization of Hospitals

Approved 7/1/26, Effective 7/1/26, replaces all prior versions.

Categorized Hospitals--Oklahoma City (Levels of Emergency Services)

Hospital	General Medical	Adult Stroke	Trauma	Neonatal	Pediatric Medical	Pediatric Trauma	Cardiology	Burns	Heli Pad	Hyperbaric Chamber	Level I Cardiac Arrest Center
HPI Community Hospitals – North/South	IV	IV	IV	N/A	IV	IV	III		No		No
Integris Health Baptist Medical Center - Northwest Expressway (IBMC-NWE)	I	I	II	I	I	III	I	* **	Yes	Yes	Yes
Integris Health Baptist Medical Center - Portland Avenue (IBMC-PA)	I	II	III	N/A	III	III	II		No		No
Integris Health Canadian Valley Hospital	II	III	III	II	III	III	II		No		No
Integris Health Community Hospitals Council Crossing; North; OKC West; Moore; Del City (Free Standing EDs)***	III	III	IV	N/A	IV	IV	III		No		No
Integris Health Edmond Hospital	II	III	III	N/A	III	III	I		Yes		Yes
Integris Health Southwest Medical Ctr	I	II	III	N/A	III	III	I		Yes		Yes
Mercy Hospital – Oklahoma City	II	I	III	II	III	III	II		Yes		No
Mercy ED I-35 (Free Standing ED)***	III	III	IV	N/A	IV	IV	III		No		No
Norman Regional Hospital	II	II	III	N/A	III	III	II		Yes		No
Norman Regional Moore	III	II	IV	N/A	III	III	II		No		No
Oklahoma Heart Hospital North	NA	NA	NA	N/A	NA	NA	I		Yes		Yes
Oklahoma Heart Hospital South	NA	NA	NA	N/A	NA	NA	I		Yes		Yes
OU Health OU Medical Center	I	I	I	N/A	III	I	I	*	Yes		Yes
OU Health Oklahoma Children's Hospital	I	N/A	N/A	I	I	II	I	**	Yes		No
OU Health Edmond Medical Center	II	IV	III	N/A	III	III	II		Yes		No
OU Health ER + Urgent Care South OKC & Yukon (Free Standing EDs)***	III	III	IV	N/A	IV	IV	III		No		No
SSM Health St. Anthony Hospital	I	I	III	II	III	III	I		Yes		Yes
SSM Health St. Anthony Hospital Midwest	II	III	III	N/A	III	III	II		Yes		Yes
SSM Health St. Anthony Healthplexes (Free Standing EDs)***	III	III	IV	N/A	IV	IV	III		No		No

Categorized Hospitals—Tulsa (Levels of Emergency Services)

Hospital	General Medical	Adult Stroke	Trauma	Neonatal	Pediatric Medical	Pediatric Trauma	Cardiology	Burns	Heli Pad	Hyperbaric Chamber	Level I Cardiac Arrest Center
Ascension St. John Medical Center	I	I	II	I	IV	III	I		Yes		Yes
Ascension St. John Broken Arrow	IV	IV	IV	N/A	IV	IV	III		Yes		No
Ascension St. John Owasso	IV	IV	IV	II	IV	IV	III		Yes		No
Ascension St. John Sapulpa	IV	IV	IV	N/A	IV	IV	III		Yes		No
Bailey Medical Center	IV	IV	IV	N/A	IV	IV	III		Yes		No
Hillcrest Medical Center	I	I	III	II	II	III	I	*	Yes		Yes
Hillcrest Hospital South	II	II	III	N/A	III	III	I		Yes		Yes
OSU Medical Center	I	II	III	N/A	III	III	I		Yes	Yes	Yes
Saint Francis Hospital	I	I	II	I	I	II	I		Yes		Yes
Saint Francis Hospital South	III	II	III	II	III	III	III		Yes		No
Saint Francis Glenpool (Free Standing ED)***	III	III	IV	N/A	IV	IV	III		No		No

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Specialty Hospitals, Healthcare Facilities, and Additional Clinical Considerations

Ascension St. John Jenks (formerly known as Center for Orthopedic Reconstruction & Excellence/CORE)	**Orthopedic referral facility that should only receive surgical patients with a chief complaint related to a scheduled surgery at the facility within the next 7 days or a surgery that was performed at the facility within the past 30 days. The patient's surgeon (or the call coverage surgeon) must be contacted and agree to accept the patient at their "Emergency Department" prior to ambulance transport. The patient and/or patient representative (e.g., family) has the responsibility to provide the treating EMS personnel with the contact number for the surgeon/physician at the facility. The EMSA Communications Center will attempt to contact that surgeon/physician on a recorded line. If no answer from the surgeon/physician within 10 minutes of attempted notification, an alternate destination shall be selected to promote efficient scene time.**
***Freestanding EDs (See tables above)**	**Typical emergency department capabilities exist, though no acute post-emergency department care (surgery, cardiac Cath, ICU care) is available on-site. These facilities should be bypassed for a hospital-based emergency department when the patient's symptoms, exam, and/or diagnostics such as 12-lead ECG indicate the patient most likely requires very urgent or emergent intervention by a specialty physician that is hospital-based (e.g., cardiac cath, surgery). Examples of typical transports allowed include: minor head trauma with no or brief LOC; MVC or falls with low suspicion for internal injury and normal vital signs; minor isolated/closed orthopedic injury; epistaxis; respiratory infections; dental injury/illness; fever in pediatrics and young adult (without hypotension/suspected sepsis); chest pain in patients less than 35 years of age, without ST elevation or depression on 12-lead ECG, and without coronary disease history; HTN illness; abdominal pain with normal vital signs and suspected non-surgical cause; genitourinary illness (infections, kidney stones, vaginal bleeding non-pregnant), neurological illness (headaches, seizure (non-status) with seizure history), psychiatric illness, allergic reactions, minor burns, dermal rashes, and MCI "green" patients.**
Integris Health Lakeside Women's Hospital OKC	**Labor and delivery hospital for assigned patients**
McBride Orthopedic Hospital Oklahoma City	**Orthopedic referral facility; Level IV trauma capabilities**
Oklahoma Surgical Hospital (OSH) Tulsa	**Surgical referral facility that should only receive surgical patients with a chief complaint related to a scheduled surgery at OSH within the next 7 days or a surgery that was performed at OSH within the past 30 days. The patient's surgeon (or the call coverage specialist partner) must be contacted and agree to accept the patient at OSH's "Emergency Department" prior to ambulance transport. The patient and/or patient representative (e.g., family) has the responsibility to provide the treating EMS personnel with the contact number for the surgeon/physician at OSH. The EMSA Communications Center will attempt to contact that surgeon/physician at OSH on a recorded line. If no answer from the surgeon/physician at OSH within 10 minutes of attempted notification, an alternate destination shall be selected to promote efficient scene time.**

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OneCore Health	**Surgical referral facility that should only receive surgical patients with a chief complaint related to a scheduled surgery at OneCore Health within the next 7 days or a surgery at OneCore Health within the past 30 days. The patient's surgeon (or the call coverage specialist partner) must be contacted and agree to accept the patient at OneCore Health's "Emergency Department" prior to ambulance transport. The patient and/or patient representative (e.g., family) has the responsibility to provide the treating EMS personnel with the contact number for the surgeon at OneCore Health. The EMSA Communications Center will attempt to contact that surgeon at OneCore Health on a recorded line. If no answer from the surgeon at OneCore Health within 10 minutes of attempted notification, an alternate destination shall be selected to promote efficient scene time.**
OU Health Dean McGee Eye Institute	**Adult patients with isolated ocular trauma with loss of vision, change in the appearance of the eye, or severe ocular pain should be transported to OU Health OU Medical Center for timely access to ocular services.**
SSM Health Bone & Joint Hospital at St. Anthony	**Orthopedic referral facility; Level IV trauma capabilities**
Tulsa Spine & Specialty Hospital (TSSH)	**Orthopedic & neurosurgical referral facility that should only receive surgical patients with a chief complaint related to a scheduled surgery at TSSH within the next 7 days or a surgery that was performed at TSSH within the past 30 days. The patient's surgeon (or the call coverage surgeon) must be contacted and agree to accept the patient at TSSH's "Emergency Department" prior to ambulance transport. The patient and/or patient representative (e.g., family) has the responsibility to provide the treating EMS personnel the contact number for the surgeon/physician at TSSH. The EMSA Communications Center will attempt to contact that surgeon/physician at TSSH on a recorded line. If no answer from the surgeon/physician at TSSH within 10 minutes of attempted notification, an alternate destination shall be selected to promote efficient scene time.**
Veterans Administration Medical Center - OKC	**Medical and surgical hospital for the military veteran population, capable of managing patients with complex medical illnesses and non-Priority 1 traumatic injuries.**

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St. John Medical Center Pediatric Capabilities	**Internal medicine and ICU physicians will only treat patients 18 years of age and older. So, almost anyone under 18 years of age that, in the judgement of on-scene EMTs and Paramedics, will most likely require hospital inpatient admission and care beyond the emergency department should be taken to an alternative hospital destination. Many pediatric patients are successfully cared for with safe discharge home after emergency department-based care. Examples of such patients include non-toxic appearing febrile illness, febrile seizures that have resolved, seizures resolved prior to EMS arrival or with EMS care with a past medical history of seizure disorder, minor abdominal symptoms such as nausea/vomiting/diarrhea, lacerations without suspected underlying fracture(s), closed orthopedic injuries (strains, sprains, suspected simple fractures), and lower speed blunt trauma – motor vehicular, non-motorized scooters/bikes, and falls). Of note, at least one pediatric general surgeon, experienced in pediatric trauma care, two urologists doing pediatric surgeries, and multiple ear, nose, & throat surgeons doing pediatric surgeries are on the medical staff. You may encounter pediatric patients established with these surgeons and their families may understandably wish to continue utilizing St. John Medical Center for their child's specific surgical care. St. John Medical Center is an American College of Surgeons Committee on Trauma verified Level I Trauma Center and by definition will accept trauma patients 15 years and older. When any doubt arises if St. John Medical Center is an appropriate hospital destination, immediately request an on-line clinical consult with an on-duty emergency physician at St. John Medical Center to review with them the current clinical situation.**

Special Considerations

*	**Burn Center. Burns associated with Priority I Trauma should be transported to Level I or II Trauma Center**
**	**Pediatric Burn Center. Burns associated with Priority I Trauma should be transported to Level I or II Trauma Center**