Guidelines for Preparation of Medical Patient for Transport



The medical crew will attempt to ensure that all of the following are performed:

- Secure airway as deemed appropriate by medical crew factoring in patient condition, transport time, etc.
- One or two appropriately sized IV lines as needed initiated do not delay transport of a "load and go" patient for IV access.
- 3. Patients with altered mental status will have bilateral soft wrist and ankle restraints applied and secured to the cot.
- 4. Nasogastric tube (if indicated) do not delay transport in order to place NG.
- 5. Cardiac monitor and pulse oximetry is initiated.
- 6. Blankets/warming measures are initiated as indicated.
- 7. Other equipment/procedures are initiated as indicated (i.e. hearing protection).
- 8. Institutional transfers:
 - It is preferable that the referring and accepting physicians confer prior to the patient's departure. Copies of patient medical records, radiograph copies, EMS run sheets and **transfer forms/consents** are transferred with the patient.
 - All patients must have a completed physician certification form that includes
 the reason the patient is being transported by Life Flight or Mobile Life. In addition,
 the form must be completed accurately and completely.
 - An ABN Form should be completed on Medicare patients.
 - Nursing report and any medical updates can be reported to the receiving institution after Critical Care Transport departure.
 - The patient is informed of the procedure and verbalizes consent (if competent).
- 9. Family members are apprised of the situation and have directions to the receiving institution. (Family members will not be transported as a passenger except at the discretion of all transport crewmembers.)