



Preparing a Patient for Medical Transport

The transport medicine environment is challenging. To carry out the transport safely, your patient may need interventions prior to transport that would not be performed if the patient remained in your hospital. To minimize the time the Ornge crew needs to prepare the patient for transport, please consider the following before the crew arrives:

INFORMATION – PLEASE HAVE SOMEONE AVAILABLE TO COMMUNICATE PERTINENT DETAILS TO THE MEDICAL CALL TAKER, TRANSPORT PHYSICIAN OR CREW AND ANSWER FURTHER QUESTIONS AS REQUIRED. PHYSICIAN TO PHYSICIAN COMMUNICATION IS OFTEN HELPFUL AND THERE IS A TRANSPORT MEDICINE PHYSICIAN AVAILABLE 24/7.

- ☒ Incident history and relevant past medical history
- ☒ Medications and allergies
- ☒ Treatment and response to treatment, equipment, ongoing infusions and therapies
- ☒ Recent vital signs and pertinent physical findings
- ☒ 12-lead ECG (when pertinent) results and significant lab values
- ☒ Diagnostic imaging results – if on PACS or CD, please allow crew to view images
- ☒ Resuscitation status: DNR or advanced directives

PLEASE MAKE COPIES OF ALL DOCUMENTATION FOR THE CREW TO BRING TO THE RECEIVING HOSPITAL.

PATIENT PREPARATION FOR TRANSPORT (*as appropriate)

- ☒ Intravenous access (2 large bore peripheral IV's if hypotensive, active/severe hemorrhage, severe trauma, sepsis or burns)
- ☒ Foley*
- ☒ Gastric tube*
- ☒ Airway supported / secured* (e.g. GCS<=8)
- ☒ Recent ABG if ventilated
- ☒ Spinal immobilization*
- ☒ Arterial line/central line*
- ☒ Blood products*
- ☒ Pregnant patients in active labour require a recent pelvic exam within the last hour prior to transport to assess likelihood of imminent delivery
- ☒ Medications (prn or regular) administered prior to transport particularly if being transported by primary care paramedics who will not be able to administer this in flight e.g. antinauseant, analgesics as appropriate
- ☒ Extremity fractures are splinted

ON ARRIVAL, THE ORNGE CREW WILL:

- ☒ Take history and do brief physical assessment
- ☒ Review copies of patient's chart and other pertinent data
- ☒ Contact the Transport Medicine Physician for medical direction as required
- ☒ Ensure patient is prepared for the transport
 - cardiac, blood pressure, oxygen saturation monitoring
 - ensure all IV access is well secured and place pressure bags on intravenous fluid bags and use infusion pumps as necessary. Lines may need to be switched to the standardized air transport system
 - secure the airway for intubated patient by checking ETT placement (clinically and/or CXR) and ensure ETT taping is appropriately secured
 - stabilize patient on a transport ventilator for intubated/ventilated patients
 - perform other interventions as required
 - transfer patient to a stretcher and securely strap in place

For further information, please call the Ornge Communications Centre to speak directly to a Transport Medicine Physician.

CALL: 1 800 387 4672