

Guidelines for intra & inter-hospital transport of critically ill patients

Once patient assessed and deemed appropriate for transfer by the Consultant in charge of their care, check the following –

Transport arranged through SAS emergency desk (08456023999) call 30 minutes before predicted departure and state Critical Care Transfer then call back when patient stabilised on trolley to upgrade to Emergency response. Request vehicle compatible with the CCT6 trolley and inverter.

EQUIPMENT (dependent upon patient speciality, fully checked and charged)

CCT 6 Transfer Trolley
Transport Ventilator and compatible CO2 monitoring
Braun Pumps
Asena Pumps
Suction unit
Emergency Drugs
Intubation Drugs
Transfer Drugs
Transfer Bag containing appropriate kit
Laerdal Bag (Disposable)
Unit Mobile Phone (charged when not in use)
Batteries for monitor and laryngoscopes
Spare Infusions and Drugs (if insufficient to last duration of transfer)
Monitoring Chart and Patient Notes
Size E oxygen cylinder (with Schraeder head).

Calculation of quantity of O2 required: minute volume x FiO2 x transfer time in minutes plus 1 litre per minute for driving the gas for the ventilator THEN DOUBLE IT

MINIMUM MONITORING

ECG
A-Line
SpO₂
EtCO₂
Temp
O₂ Supply
FiO₂
Ventilator settings
Airway Pressure

ACCOMPANYING STAFF

Medical staff should be competent in Airway Management, Pharmacology and Vascular access
Nursing Staff/ODP should have up to date competencies in – Infusion devices, Central Lines, IV Therapy and ILS.

Documentation during transfer should be recorded on the Lothian Intra/Inter Hospital Transfer document.

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	Authors: Mike Fried, Lillian Weir
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**Critical Care Guidelines
FOR CRITICAL CARE USE ONLY**

DOES PATIENT REQUIRE TRANSFER?

