

Providence Health Care	Department: Respiratory Services	Date Originated: September 1986 Date Revised: November 2008
POLICY	Topic: <u>Critical Care</u> – External Transfer of Mechanically Ventilated Patients (Respiratory Therapy) Number: B-00-11-12003	Related Links: B-00-11-12002 B-00-12-12007 B-00-12-12008

APPLICABLE SITES:
 St. Paul's Hospital
 Mount Saint Joseph Hospital

Pertaining to the external transport of patients with artificial airways between hospitals.

Respiratory Services will participate in the out-of-hospital transport of mechanically ventilated patients and spontaneously breathing patients with unstable airways.

The Professional Practice Leader and/or Clinical Coordinator, or in their absence the Charge Respiratory Therapist, must be notified of any impending external transports to allow for the assessment and/or reassignment of workload to ensure safe patient care coverage is maintained.

1. **VENTILATED or SPONTANEOUSLY BREATHING PATIENTS with an ENDOTRACHEAL TUBE** will be accompanied by:
 - a. Critical Care Registered Nurse
 - b. Registered Respiratory Therapist**

2. **SPONTANEOUSLY BREATHING PATIENTS with a TRACHEOSTOMY TUBE** will be accompanied by:
 - a. Critical Care or tracheostomy trained Registered Nurse
 - b. Registered Respiratory Therapist if the patient is deemed medically unstable by the care team**

** In the event that a Respiratory Therapist attending to an external transport may result in compromised patient care coverage on site, alternative arrangements should be made that will still allow for the safe transfer of the patient (i.e. having the most responsible resident accompany the patient).

In **ALL** cases the Respiratory Therapist must be informed of the pending transport to ensure the appropriate emergency artificial airway supplies are present and with the patient for the transport.

APPROVED: _____ DATE: _____

TITLE: **Professional Practice Leader, Respiratory Services**