|  |
| --- |
| Purpose: Provincial Inter-Facility ECLS Transport Workflow  |
| SITUATION: Confirmation of ECLS patient details for transfer |
|  |
| STEP | **REQUIRED PERSONNEL** | TASK DESCRIPTION | REQUIRMENTS |  |
| **1.** | MRPPCC | Confirm: * Age
* Weight
* Relevant comorbidities
 | Ensure informed consent obtained from TSDM for inter-facility transfer, involve SW early. |
| **2.** | MRP | Diagnosis: |  |  |
| **3.** | MRP | Isolation requirements: * None
* Contact
* Droplet
* Airborne
 |  |  |
| **4.** | MRPPerfusion | Confirm:* Primary ECMO Transport
* Secondary ECMO Transport
 | Ensure requisite equipment for Primary vs Secondary transport available, e.g. blood products, Echo, etc. |  |

|  |
| --- |
| Purpose: Provincial Inter-Facility ECLS Transport Workflow |
| MISSION: Articulation of inter-facility transport options and plan(s). |
|  |
| STEP | **REQUIRED PERSONNEL** | TASK DESCRIPTION | REQUIRMENTS |  |
| **1.** | MRPPCCPerfusionist | Referring centre:Accepting centre: | Teleconference between referring and accepting physicians, PCC, and perfusionists, respectively. |
| **2.** | PerfusionistCCPEPOS | Transport mode: * *General Considerations:* minimizing patient transfers between ambulances/aircraft is optimal, and should be considered when selecting mode(s) of transport.
* Ground Ambulance: confirm appropriate stretcher mount.
* Air Ambulance: for distances > 150 km consider rotory-wring (helicopter) air ambulance.
* Air Ambulance: for distances > 300 km (150 nautical miles) consider fixed-wing air ambulance.
* Other:
 | Ensure total weight [patient + ECLS equipment] do not exceed stretcher capacity (see Appendix 1). |  |

|  |
| --- |
| Purpose: Provincial Inter-Facility ECLS Transport Workflow |
| EQUIPMENT: Confirmation of ECLS equipment, adjuncts, and transport equipement required. |
|  |
| STEP | **REQUIRED PERSONNEL** | TASK DESCRIPTION | REQUIRMENTS |  |
| **1.** | PerfusionistParamedic | ECLS: specify type* e.g. ECMO, VAD, IABP, other:

ECMO: specify* Mode:
* Configuration:
* Machine type:

Adjuncts: specify additional equipment* Heater
* ECLS adjunct:
* Other:
 | Ensure total weight [patient + ECLS equipment] do not exceed stretcher capacity (see Appendix 1).Confirm power draw and power sourcing compatible with transport mode(s) (see Appendix 1). |
| **2.** | PerfusionistParamedic  | Transport: specify transport equipment needs: * + Stretcher
	+ Tray(s)
	+ Power source(s)
	+ Heat source(s)
	+ ECMO – transport equipment
 | As above |  |
| **3.** | RNParamedic | Transport: specify transport equipment needs: * + Pumps
	+ Monitor/defibrillator
	+ Blood products
	+ Medication – maintenance
	+ Medication – emergency/rescue
	+ Other:
 | As above |  |
| **4.** | RTParamedic | Transport: specify transport equipment needs: * Ventilator
* Oxygen/Air supply
* iNO
* Other
 | As above |  |
| Purpose: Provincial Inter-Facility ECLS Transport Workflow |
| ADMINISTRATION: Confirmation stakeholder notification |
|  |
| STEP | **REQUIRED PERSONNEL** | TASK DESCRIPTION | REQUIRMENTS |  |
| **1.** | MRP | Family/TSDM* Informed consent obtained

Patient* Code Status

Transport Team* Confirm MD who will provide on-line medical support for ECLS teaming during transport
 | Involve SW to help family get to destintation centre safely. |
| **2.** | PCC | Transport Team* RN and RT assignment if needed for transport (if Critical Care Paramedic team not available)
* Return plan for RN/RT/Perfusionist and medical equipment confirmed
 |  |  |
| **3.**  | Perfusionist | Transport Team* ECLS tube length adequate for transport
* Confirm power sourcing (See Appendix 1)
* Need for heater (or heat source)
* Oxygen/Air supply
* Emergency equipment (e.g. circuit breach, air embolism, cannulae migration, etc.)
* Plan in place for circuit swap/change at destination centre
 | Guide all patient movements/transfers between beds and transport vehicle(s).Confirm with accepting centre perfusionist the plan for transfer of circuit/equipment. |  |
| **4.** | RN | Transport Team* Infusions - baseline
* Infusions - emergency
* Medications - PRN
* Medications - emergency
 | Minimize infusions when possible to simplify during transport. Prepare IV infusion bags (not spiked) for transport team. |  |
| **5.**  | RT | Transport Team* Ventilator
* Adjuncts e.g. iNO
 |  |  |
| **6a.** | Paramedic*Primary Care* | Transport Team* Liaise with RN/RT/Perfusionist to facilitate patient transfer
* Clinical Care and/or delegation of care (within scope of practice) is responsibility of transport RN/RT/Perfusionist
 | Roles and Responsibilities: RN/RT/Perfusionist guide clinical care during transport. |  |
| **6b.** | Paramedic *Critical Care* | Transport Team* Liaise with RN/RT/Perfusionist to facilitate patient transfer
* Liaise with MRP/RN/RT for clinical care hand over and discuss clinical goals/thresholds
 | Roles and Responsibilities: CCP and Perfusionist guide clinical care during transport. |  |
| **7.** | Unit Clerk | * Chart copied
* Relevant diagnostics/imaging pushed to grid
* Consent(s)
 |  |  |
| **8.** | PTN | * Relevant diagnostics/imaging pushed to grid
* Transport vehicle(s) confirmed with BCEHS
* Pick-up time confirmed
* Repatriation of transport personnel and equipment confirmed (if applicable)
 |  |  |
| **9.** | SW | * Family has plan to get to final destination safely
 |  |  |

|  |
| --- |
| Purpose: Provincial Inter-Facility ECLS Transport Workflow |
| COMMUNICATION: Articulation of stakeholder notification |
|  |
| STEP | **REQUIRED PERSONNEL** | TASK DESCRIPTION | REQUIRMENTS |  |
| **1.** | MRP | Family/TSDM* Updated re: destination and transport time frame

Transport Team* Confirm MD who will provide on-line medical support for ECLS teaming during transport

Clinical Care* Sedation goals
* Hemodynamic goals
* ECMO parameters
* Anticoagulation
* Blood products and thresholds for transfusion
* Resuscitation procedure(s) and roles
 | MRP to lead team huddle (CRM) prior to transport to discuss roles and clinical care during transport.MD indentified who will provide on-line support during transport (if no MD on transport). |
| **2.** | PCC | Transport Team* RN and RT assignment if needed for transport (if Critical Care Paramedic team not available)
* Return plan for RN/RT/Perfusionist confirmed
 |  |
| **3.**  | Perfusionist | Transport Team* Emergency Action Plan(s) (e.g. circuit breach, air embolism, cannulae migration, etc.)
* Plan in place for circuit swap/change at destination centre
 | Guide all patient movements/transfers between beds and transport vehicle(s).Confirm with accepting centre perfusionist the plan for transfer of circuit/equipment. |
| **4.** | RN | Transport Team* Sedation goal
* Hemodynamic goal(s)
* Clinical goals/thresholds (e.g. anticoagulation, Hgb, temperature, etc.)
 |  |
| **5.**  | RT | Transport Team* Ventilator Settings (baseline)
* Ventilator Settings (emergency)
 |  |
| **6a.** | ParamedicPrimary Care | Transport Team* Liaise with RN/RT/Perfusionist to facilitate patient transfer
* Clinical Care and/or delegation of care (within scope of practice) is responsibility of transport RN/RT/Perfusionist
 | Roles and Responsibilities: RN/RT/Perfusionist guide clinical care during transport. |
| **6b.** | Paramedic Critical Care | Transport Team* Liaise with RN/RT/Perfusionist to facilitate patient transfer
* Liaise with MRP/RN/RT for clinical care hand over and discuss clinical goals/thresholds
 | Roles and Responsibilities: CCP and Perfusionist guide clinical care during transport. |
| **7.** | Unit Clerk | * Chart copied
* Relevant diagnostics/imaging pushed to grid
 |  |
| **8.** | PTN | * Pick-up time confirmed
* Repatriation of transport personnel and equipment confirmed (if applicable)
 |  |
| **9.** | SW | * Family up to date on transfer plan and time frame
 |  |