

1. Transport to Cabell Huntington Hospital, or location per attending physician.
2. Assess Stability of patient, VS and B/P on arrival to referring facility and every 15 minutes thereafter (HRM, RRM, NIBP, SpO2.)
3. Assess and assure airway patency, treat as per protocol.
4. Lab Studies on arrival as indicated by protocol and PRN.
5. When indicated insert NGT/OGT, secure and empty patient's stomach.
6. Obtain IV/IO access for unstable status. Initiate IV fluids per protocol.
7. If cardiac and/or pulmonary arrest or deterioration occurs, call local attending physician to the scene. Communicate to Intensivist all cardiac and/or pulmonary arrests and worsening conditions. Transport patient when stable as possible.
8. Obtain copies of patient's records and x-rays.
9. Institute the appropriate protocol for each individual diagnosis. Call Intensivist if:
 - A) Indicated on protocol,
 - B) Patient's diagnosis is outside of the established protocols,
10. Call Intensivist after initial evaluation and stabilization.

E. Pino, MD Medical Director
J.M. Waldeck, MD Transport Director
Marie Frazier, MD
Pediatric Transports

ADDITIONAL ORDERS:

DATE:	TIME:
<input type="checkbox"/> Verbal Order Verification	