

Medical Transport Resource Tool: MCHS - Waseca

| North Basic Life Support (BLS) | North Advanced Life Support (ALS) | Mayo One/Critical Care |
|---|---|---|
| <p>Medical crew is a <i>Basic EMT</i></p> <p>Medical Care Capabilities</p> <ul style="list-style-type: none"> • Only patients with stable vital signs and no anticipation of decline • Only basic cares and patient assessment needs anticipated • Basic airway and respiratory management (oxygen and suctioning) • IV fluids (only 0.9 or 0.45% saline, D5W and LR) for line or patient maintenance purposes. <ul style="list-style-type: none"> ○ Can take antibiotics running which are not on pump ○ IV fluids for resuscitation purposes requires ALS level of care at minimum | <p>Medical crew includes a <i>Paramedic, who is Critical Care trained</i></p> <p>Medical Care Capabilities</p> <ul style="list-style-type: none"> • Advanced airway skills, intubation and tracheal suction. • Mechanically ventilated, CPAP, (can take BIPAP with our vent) • Cardiac ECG monitoring, or availability of external pacing (TCP) or acquiring 12 leads • IV fluid infusions at any rate • IV infusions, including medications and blood already infusing <ul style="list-style-type: none"> ○ Can take multiple drips • Blood or blood products infusions-can initiate blood and hang additional bags enroute • Pain medication or sedation needed: <ul style="list-style-type: none"> ○ Pain—Fentanyl, Dilaudid ○ Sedation—Versed, Ativan, Ketamine ○ Paralytic—Succinylcholine, Vecuronium • OB pt. with Mag sulfate running requires RN, APP or MD to go with ambulance • Code 3 transfer is <u>ONLY</u> for critically ill or needing immediate intervention (STEMI or CVA), NOT for direct floor admits | <p>Medical crew includes <i>RN & Paramedic</i></p> <p>Medical Care Capabilities</p> <ul style="list-style-type: none"> • Invasive monitoring or central lines - CVP, arterial lines, etc. • Single or multiple IV medication infusions requiring frequent titration • Advanced Trauma Life Support procedures (chest tube placement, pericardiocentesis) • Intra-aortic balloon pump needed • Temporary cardiac pacing required en route (transcutaneous, transvenous, or epicardial) • Chest tube drainage system or blood auto-transfusion • Blood or blood product administration needing to be initiated by EMS <ul style="list-style-type: none"> ○ <i>Thawed plasma & PRBCs always carried</i> • BiPAP & CPAP initiated in ED (not pt's own) • Mechanical ventilation (ALS capable but not ideal) • Fetal heart rate and maternal uterine contraction monitoring <p>**Time consideration—where is Critical Care Ground Team coming from and length of time until here. Specific need is for neonate team.</p> |

Helicopter Emergency Medical Service Locator:

- **Mayo One: 1-800-237-6822** (CAMTS© accredited program) Mankato 15-17 min; Rochester 32-37 min
(Carries 3 units neg blood and 3 units thawed fresh frozen plasma, has peds/neonate team)

If Mayo One/Mayo MedAir is not available and Critical Care Team by ground is not an option, the next closest helicopter services are:

- **North AirCare : 1-800-247-0229** Lakeville 23-26 min; Redwood Falls 38 min
(Now carries 2 units O neg blood; no special neonate team)
- **Life Link III: 1-800-328-1377** (CAMTS© accredited program) (from Anoka) 37 min.
(Carries 2 units O neg. blood, has neonate teams)
- **MercyAirMed Mason City, IA 1-877-463-7291**(CAMTS© accredited program) 32-37 min
(Does not carry blood, no special peds/neonate team)