Preparation and Stabilization of the Patient Prior to Transport

- Treat life and limb threats – Follow the "ABC's" A - Establish or ensure patent airway. B – Ensure adequate breathing. C – Address hypoperfusion. Restore perfusion to injured extremities if possible through repositioning or reduction where applicable. Provide adequate volume resuscitation. D – Determine patient's baseline level of consciousness as a reference for change. E – Expose patient appropriate to complaint for assessment.
- Ensure that trauma patients with significant mechanism of injury are fully immobilized. This immobilization can be accomplished with a c-collar and long spine board and straps.
- Complete secondary assessment appropriate to patient's presenting injury or complaint.
- Establish IV or IO access. Large bore IVs, 18g or greater are preferred. One line may be sufficient for management of medical patients; two are preferred for trauma patients and patients that may require multiple medication infusions. Titrate infusions to hemodynamic stability.
- Manage pain and sedation as patient condition will tolerate. Comfortable patients are easier to assess and treat and are safer to transport. Sedate and manage pain in intubated patients. Paralyzed patients can be fully awake and still feel pain and anxiety.
- Secure all lines or tubes appropriately to prevent dislodgement during patient moves and during transport.
- Prepare available documentation to include field forms and ECG tracings for scene calls or MOT, Nurse/Physician notes, labs, EKGs, and appropriate transfer paperwork for interfacility transports.
- Prepare a concise and specific verbal turnover report. Consider mnemonics such as Subjective, Objective, Assessment, Plan (SOAP), which is commonly used in the nursing environment, or M-Mechanism I- Injuries, V- Vitals, T- Treatment (MIVT), which is common in the prehospital environment.
- Prior to air medical personnel arrival, remove any loose garments or items from your person, patient, and stretcher that could come loose in wind from the rotor and create a safety issue.
- Follow direction of the air medical personnel regarding approaching aircraft and helping to load patients.