

CNYEMS

INTERFACILITY TRANSFERS

May 10, 2002

Field providers may transport patients with the following
IV equipment and IV drips without facility staff:

- EMT** Saline lock
Stable patient with no anticipation of further interventions enroute
- EMT-I** Peripheral IV lines with no additives
Stable, non-intubated patients with no anticipation of further interventions enroute
- EMT-CC** Peripheral IV lines
Cardiac monitor/defibrillator
Intubated patients ≥ 5 years old
Antibiotics
Amiodarone drip
Chest Tubes*
Diltiazem
Glycoprotein (GPIIb/IIIa) Inhibitors
Insulin
Lidocaine drip
Bretylium drip
Heparin
Methylprednisolone
Blood and blood products
IV drips:
 All electrolyte and lipid solutions
 Dobutamine
 Procainamide
 Aminophylline
 EMT-CC protocol drips
EMT-CC protocol drugs (MS, NTG. Etc.)
- EMT-P** In addition to above:
Ativan/Lorazepam
Intubated patients any age
Central venous lines/PIC Lines**
Hickman catheters**
Subclavian IV**
Internal jugular IV**
Port-a-Cath**
Arterial lines-May not be used for IV access or any medications
Paramedic protocol drugs



When transferring patients with the above drips, the transferring facility must supply the IV pump and training.

*: Approval contingent on approval of the agency Medical Director. In addition, an individual providers must have received chest tube training as prescribed by the agency Medical Director

** : Not to be accessed by EMT-P during transport. If the line is to be used for medication infusion facility personnel must access it prior to leaving the hospital.

EMT-P: providers may transport patients with additional interventions if approved by their service Medical Director and the REMAC.