

PREPARATION FOR RETRIEVAL

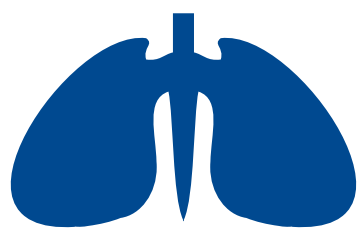
Careful Preparation for Retrieval Transport Improves Care & Reduces Risk



AIRWAY

ENSURE PATIENT AIRWAY SAFETY

- ① Assess airway stability for all patients
- ② Secure endotracheal tube
- ③ Record size and lip length
- ④ Oro-gastric tube placed
- ⑤ CXR to confirm position of endotracheal tube



BREATHING

ENSURE OPTIMISED OXYGENATION

- ① Observe respiratory rate and character
- ② Measure SpO₂ and ETCO₂
- ③ Administer oxygen using the correct delivery device
- ④ Check ABG's if indicated
- ⑤ Secure intercostal catheters if present



CIRCULATION

ENSURE IV ACCESS & MANAGEMENT

- ① Insert two peripheral IV lines
- ② Secure all lines – ensure injection ports are accessible
- ③ Prepare drug infusions in 50 ml syringes
For advice on infusion concentrations call ARV
- ④ Record all IV fluids
- ⑤ Transduce all arterial and central lines



DOCUMENTS

ENSURE COMPLETE PATIENT DOCUMENTATION

- ① Complete ARV on-line or telephone referral
- ② Provide copies of all patient charts
- ③ Investigation results – pathology & ECG
- ④ Imaging – films / scan / MRI
- ⑤ Please advise any 'limitation of treatment' orders

OTHER

- ① Maintain body temperature
- ② Consider indwelling catheter – maintain Fluid Balance Chart
- ③ Empty drainage bags prior to transport
- ④ Administer antiemetic and analgesia as required
- ⑤ Maintain spinal precautions if indicated

ALERT

It is important that you notify the ARV Coordinator of:

- ① Significant deterioration in –
 - Conscious state
 - Blood Pressure
 - Heart Rate
 - Respiratory status
 - Oxygenation
- ② Major clinical developments such as significantly abnormal diagnostic tests, new clinical signs etc
- ③ The need for major interventions prior to the retrieval team arriving (eg intubation, surgery etc)