


Sierra – Sacramento Valley EMS Agency Program Policy			
Paramedic IFT Optional Skills Transferring Hospital Requirements			
	Effective: 6/1/2023	Next Review: 03/2026	<b>341</b>
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## PURPOSE:

To establish the transferring hospital requirements for the utilization of any of the following paramedic interfacility transport (IFT) optional skills:

- A. Monitoring of magnesium sulfate, nitroglycerin, heparin, &/or amiodarone infusions.
- B. Monitoring of blood transfusions.
- C. Utilization of an Automatic Transport Ventilator (ATV).
- D. Utilization of non-invasive High Flow Nasal Cannula (HFNC).

## AUTHORITY:

- A. HSC, Division 2.5, § 1798.200, 1798.206, 1798.214, 1797.218, 1797.220, 1798.2, 1798.170, and 1798.172.
- B. CCR, Title 22, Chapter 4, § 100146.

## POLICY:

- A. Only prehospital provider agencies approved by S-SV EMS to utilize paramedic IFT optional skills are authorized to provide such services.
- B. Only paramedics who have successfully completed an S-SV EMS approved paramedic IFT optional skills training program are authorized to utilize such skills.
- C. The following criteria apply to patients who are candidates for the utilization of paramedic IFT optional skills:
  1. Magnesium sulfate, nitroglycerin, heparin, &/or amiodarone infusions:
    - The infusion should be running in peripheral or central IV lines for at least 10 minutes prior to transport.
    - Patients should have maintained stable vital signs for the previous 30 minutes.

- Patients will not have more than two (2) medication infusions running, exclusive of potassium chloride concentrations authorized under the paramedic basic scope of practice during transport.
- 2. Blood transfusions:
  - Transfusions shall be pre-existing in peripheral or central IV lines.
- 3. ATV:
  - Paramedics shall not initiate ventilator support.
- 4. Non-invasive HFNC:
  - Paramedics shall not initiate non-invasive HFNC.
  - Non-invasive HFNC should be utilized by the sending facility for at least one (1) hour prior to transport.

**PROCEDURE:**

- A. The paramedic shall receive written orders from the transferring physician prior to leaving the transferring hospital. These orders shall include a telephone number where the transferring and/or base/modified base hospital physician can be reached during transport, in addition to the following information:
1. Magnesium sulfate, nitroglycerin, heparin, &/or amiodarone Infusions:
    - Type of solution.
    - Dosage and rate of infusion.
  2. Blood Transfusions:
    - Blood type and unit identifying number.
    - Parameters for regulation of the transfusion rate.
  3. ATV:
    - Parameters for maintaining and adjusting ventilations during transport.
  4. Non-invasive HFNC:
    - Parameters for maintaining and titrating flow (LPM), FiO<sub>2</sub>, and SpO<sub>2</sub> goals for transport.

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- B. The transferring hospital is responsible for mixing and labeling the infusion. If the existing infusion will not be sufficient for the transport duration, the hospital must provide additional clearly labeled pre-mixed infusion(s).
- C. Transferring physicians must be aware of the general paramedic scope of practice as well as the parameters for utilization of paramedic interfacility transport optional skills contained in applicable S-SV EMS policies (841, 842, 843, and/or 844).