

# Preparation For Retrieval



Careful Preparation for Retrieval Transport Improves Care & Reduces Risk



## AIRWAY

### ENSURE PATIENT AIRWAY SAFETY

- 1 Assess airway stability
- 2 ETT patent, secure and position confirmed
- 3 ETCO<sub>2</sub> continuous monitoring
- 4 Sedation and/ or paralysis adequate



## BREATHING

### ENSURE OPTIMISED OXYGENATION

- 1 Observe respiratory rate and character
- 2 SpO<sub>2</sub> monitored / blood gases reviewed
- 3 Administer oxygen using an appropriate delivery device
- 4 Ensure ventilation settings appropriate
- 5 Intercostal catheters patent and secure



## CIRCULATION

### ENSURE IV ACCESS AND MANAGEMENT

- 1 Ensure x 2 peripheral access secure and patent, injection ports accessible.
- 2 Consider intraosseus access where IV access difficult
- 3 Secure all CVC/arterial lines
- 4 ECG & NiBP/ Arterial BP appropriately monitored and managed
- 5 IDC and orogastric tube insitu - output measured
- 6 Check blood sugar
- 7 Prepare medications for transfer according to the [Monash Childrens Paediatric Emergency Medication Handbook](#) or [Adult Retrieval Victoria Infusion Guidelines](#)



## DOCUMENTS & DEPARTURE

### ENSURE DOCUMENTATION COMPLETE

- 1 Complete referral and transfer document
- 2 Provide copies of all patient charts & NOK details
- 3 Investigation & imaging results included
- 4 Be aware of any advanced care directives
- 5 Ensure belongings are managed and family engaged



## EQUIPMENT

### EQUIPMENT CHECK

- 1 Oxygen/infusions sufficient for transport
- 2 Batteries and spares sufficient
- 3 BVM and suction available and functioning

### OTHER

- + Monitor temperature and prevent heat loss
- + Ensure pressure area care is attended
- + Gastric decompression if intubated
- + Empty drainage bags prior to transport
- + Administer anti-emetic and analgesia as required
- + Restrict spinal motion, manage splints & pelvic binder if indicated, consult with ARV/ PIPER if not tolerated
- + Seizure prophylaxis in Traumatic Brain Injury

### ALERT

It is important that you notify the ARV/PIPER Coordinator of:

- Significant deterioration in:
  - Conscious state
  - Respiratory status or oxygenation
  - Heart rate
  - Blood Pressure
- Major clinical developments such as significantly abnormal diagnostic tests, new clinical signs etc.
- The need for major interventions prior to the retrieval team arriving (e.g. intubation, surgery etc).