

Delta Ambulance Dispatch Guidelines

BLS TRUCK	ALS TRUCK *	ALS TRUCK with DELTA CCTT **	ALS TRUCK plus HOSPITAL STAFF
Basic Life Support (BLS)	Advanced Life Support (ALS) Paramedic Interfacility Transport (PIFT)	Specialty Care Transport (SCT)	Specialty Care Transport (SCT)
Blood Glucose Monitoring Low Flow Oxygen Balanced IV Fluids TKO by Gravity (NS, LR, NR, D5W) Wound Vacs Foley Catheters Patient Controlled Devices (excluding Home Vents and MaineGeneral provided PCA Pumps with Key) Traction Devices w/o Pain Medication Orders NG Tube (clamped) Feeding Tubes: J-tube, G-tube, etc. (clamped) Tracheostomy Tube (no care or suctioning needed) Hospital to Nursing Home: No Special Needs Pulse Oximetry ER to ER: BH, consults, procedures (contact Supervisor for all other cases) NTG Paste / Patch (if pain free and stable)	Medication Orders for Transport High Flow O2 CPAP IV Fluids (non-isotonic and/or through pumps) LVADS / RVADS EKG Monitoring Central Line or plain A Line in place Tracheostomy Care and Suctioning CathLab Patient with Sheath in Place Recent Thrombolytics (minimal to no S/Sx) Chest Tubes (PIFT) Continuous Bladder Irrigation (PIFT) IV Fluids (with electrolytes or non-MEMS meds) (PIFT) Transvenous Pacemaker (no epicardial leads) (PIFT) OG / NG Tubes to suction (PIFT) Feeding Bag with nutrients running (PIFT) Banana Bag, Plasmalite (PIFT) All PIFT Medication Classes (PIFT) Precedex (PIFT) Kcentra (PIFT) Patient's Own Scheduled Meds (PIFT) MaineGeneral PCA Pump w/Key (PIFT per Dr. Diaz)	Mechanically Vented Patients NPPV: BiPAP (Future project - equipment required) Thrombolytics Enroute Anesthetics (Propofol, Etomidate, etc.) Paralytics (Succinylcholine, Rocuronium, Vec, etc.) NOTE: Anesthetics / Paralytics for Vented Patients Only REQUIRES 2 PARAMEDICS ATTENDING THE PATIENT, 1 PARAMEDIC MUST BE A MEMBER OF THE CCT TEAM	Blood Products (Whole, RBC, Platelets, FFP, etc.) Extra Corporeal Membrane Oxygenation (ECMO) Vapotherm (hospital owned) Intra-Aortic Balloon Pump Invasive Hemodynamic Monitoring (Swan-Ganz, etc.) ICP Monitoring L & D Patients with Fetal Heart Monitoring Epicardial Pacing Wires Epidural / Intrathecal Infusions Patient cannot be stabilized at the sending facility
	* AND PT MUST BE CONSIDERED STABLE BY THE TRANSPORTING PARAMEDIC PER PIFT PROGRAM.	** HOSPITAL STAFF MAY STILL BE REQUIRED BY EITHER THE SENDING FACILITY OR THE CCTT PARAMEDIC	