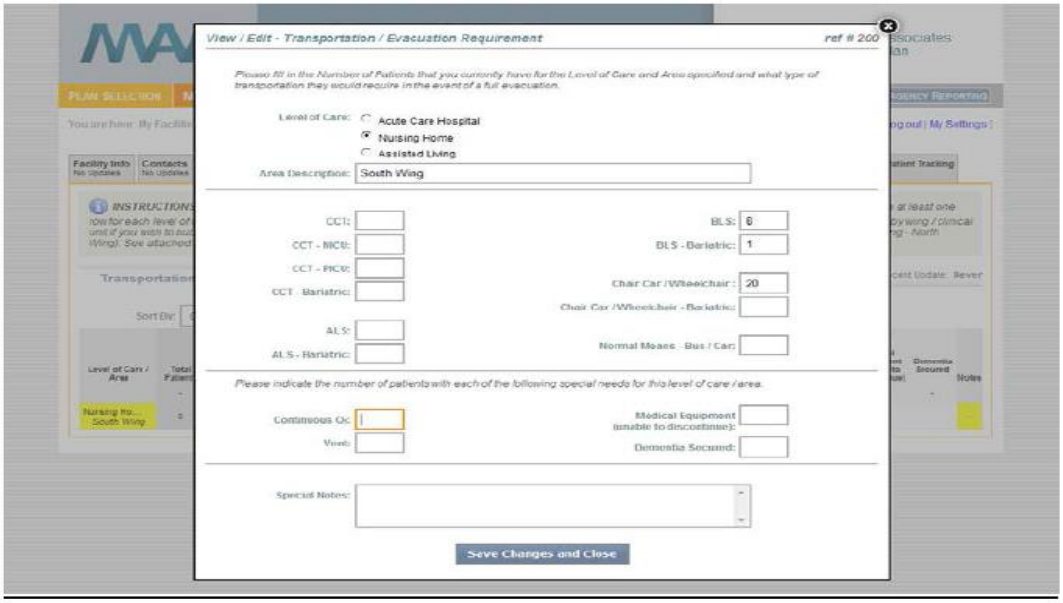
HANDOUT #2

MassMAP

Transportation & Evacuation Resource Tool

- Review **Page 2** for Decision-making Guide to Assigning Resident Transport Mechanism
- Go to www.massmap.org and log into your facility
- Click on the "Transportation" tab and click on "Add a Transportation Survey"

- Click on your Level of Care (Hospital, Nursing Home, Assisted Living) and add an Area Description (e.g., Skilled Nursing - 3rd Floor A-Wing)
- Fill out the required transportation for the total patients/residents on the unit



- Click "Save Changes & Close" then complete the next unit by updating an existing area (hover over the area click "View/Edit Area") or click "Add a Transportation Survey" for a new floor/area
- All areas with patients/residents should be listed
- Click on "Printable List" and insert in your Disaster Plan and provide to EMS/Fire.

Nurse / Physician Decision-Making Guide
Assigning Residents Transport Mechanism Based on Clinical Criteria

a. Residents requiring *Critical Care Transportation* (RN-staffed)

- Need any medications administered via Physician orders by any means in any dosage prescribed
- Neurosurgical ventricular drains
- Invasive hemodynamic monitoring which cannot be temporarily or permanently discontinued (e.g., intra-arterial catheter if noninvasive blood pressure have not been reliable for Residents, they are hemodynamically unstable, and they have a continuing chance of survival.)

b. Residents requiring ALS transport (Paramedic)

- IVs with medication running that are within paramedic protocols
- IV pump(s) operating (determine if pump can be provided by the transport crew)
- IV with clear fluids (no medications)
- Need limited medications administered via Physician orders by limited means in limited dosage prescribed
- Cardiac monitoring/pacing (only external pacing can be provided by the transport crew) / intra-aortic counter pulsation device / LVAD
- Ventilator dependent (determine if vent can be provided by the transport crew or home vent)
- Prone or supine on stretcher required.

c. Residents requiring BLS transport (EMT)

- O2 therapy via nasal cannula or mask (can be provided by the transport crew)
- Saline lock and Heparin lock
- Visual monitoring / Vitals (BP/P/Resp)
- Prone or supine on stretcher required or unable to sustain
- If Behavioral Health, provide information regarding danger to self or others.

d. Residents requiring Chair Car/Wheelchair Accessible Bus
(Medically knowledgeable person to ride on the transport)

- No medical care or monitoring needed, unless they have their own trained caregiver rendering the care.
- Not prone or supine, no stretcher needed.
- No O2 needed, unless resident has own prescribed portable O2 unit safely secured en route.
- If Behavioral Health, provide information regarding danger to self or others.

NOTE: Some wheelchair van companies provide a standard wheelchair, if needed, for the duration of the trip. Buses do not provide wheelchairs. Some electric wheelchairs cannot be secured in wheelchair vans due to size or design. These are NOT to be transported with the resident.

e. Residents requiring Normal Means of Transport (typically a bus – resident must be limited assist transfer or no assist required – Medically knowledgeable person to ride on the transport)

- No medical care or monitoring needed, unless they have their own trained caregiver rendering the care.
- No O2 needed, unless resident has own prescribed portable O2 unit that can be safely secured en route.
- Not prone, supine, or in need of a wheelchair (can ambulate well enough to climb bus steps)
- If Behavioral Health, provide information regarding danger to self or others.
- Limited assist transfers or no assist required.
- NOTE: A person with a folding wheelchair, who can ambulate enough to get in and out of a car, could go by car if there was room to bring/pack the wheelchair.

f. Residents requiring bariatric ambulance or transport (A good base is to start at >350lbs.)