

REGION 11 CHICAGO EMS SYSTEM POLICY

Title: Conveyance of Patients

Section: Patient Care

Approved: EMS Medical Directors Consortium

Effective: December 6, 2023

CONVEYANCE OF PATIENTS

I. PURPOSE

To define safe conveyance of patients by licensed EMS personnel.

II. DEFINITIONS

- A. <u>Conveyance:</u> Movement of a patient from the response location to the ambulance and from the ambulance into the hospital Emergency Department.
- B. <u>Transport:</u> Movement of a patient in an ambulance with appropriate safety restraint based on the age or size of the patient and clinical condition.

III. CONVEYANCE

- A. Methods
 - 1. Stair chair
 - 2. Stretcher
 - 3. Backboard
 - 4. Scoop stretcher
 - 5. Basket stretcher
 - 6. Patient tarp or OPCD (Oversized Patient Carrying Device)
- B. Appropriate safety straps per manufacturer design should be used for all conveyance methods.

IV. AMBULANCE TRANSPORTATION

- A. <u>All patients transported by ambulance will be secured to the stretcher for safe conveyance during patient transport.</u>
- B. For multiple patient incidents or as needed with additional passengers, proper restraint is required including the bench seat with restraints as recommended by the manufacturer.
- C. For patients in a stretcher, all safety harness belts (as below) should be secured on the patient prior to transport.
 - 1. Chest, hip, and knee straps



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2. Shoulder straps

- D. Pediatric patients should be transported with size appropriate child restraint system as per the <u>Safe Transport of Children by EMS Policy</u>.
- E. Patients should never be transported in a stair chair.

V. PATIENT CRITERIA THAT REQUIRE CONVEYANCE (NOT ABLE TO AMBULATE)

- A. Require ALS (advanced life support) care per Initiation of Patient Care Policy.
- B. Have a confirmed or potential significant acute condition.
- C. Have any minor condition in which ambulation might result in clinical deterioration or further injury.
- D. Have any of the following conditions, including (but not limited to):
 - 1. Intoxication
 - 2. Severe abdominal pain
 - 3. Uncontrolled or controlled serious bleeding
 - 4. Pregnancy related complaint
 - 5. Extremely high or low body temperatures (hypothermia or high fever)

E. Are injured AND:

- 1. Require spinal motion restriction (SMR)
- 2. For whom ambulation will aggravate existing injury or risk new injury
- F. Have unique circumstances that require conveyance

NOTE: These above patients shall not be allowed to walk to the ambulance, or at the hospital, even if found to be ambulatory at the scene.

IV. PROCEDURE

- A. Approach the patient with the quick response bag, oxygen bag, AED or cardiac monitor/defibrillator and conveyance device per Initiation of Patient Care Policy.
- B. Perform an initial assessment and necessary on scene treatment. Evaluate the patient for any of the conditions requiring conveyance as above and prepare for appropriate



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conveyance of the patient to the ambulance.

- C. If it becomes apparent enroute to, or upon arrival at the scene, that EMS personnel will need additional assistance to appropriately and safely convey the patient to the ambulance, the responding crew should immediately request additional assistance.
- D. Convey patient by appropriate means to the ambulance assuring the patient is appropriately covered to respect dignity and personal privacy.
- E. At the hospital, the patient should be conveyed by appropriate means into the Emergency Department. EMS personnel shall request assistance of hospital personnel if additional lifting and moving help is necessary.
- F. Document any problems obtaining requested additional assistance in a timely manner or any other circumstances that prevent appropriate conveyance of patient.
- G. If the patient refuses to accept appropriate means of conveyance at any point from the scene to hospital hand-off, after explaining the risks, document this on the patient care report.