E. ALS/BLS TRANSPORT GUIDELINES

Consider extremes of age when evaluating for BLS versus ALS transport.

BLS  If the patient meets BLS criteria, they may be transported by the crew of a licensed, verified BLS or ALS ambulance agency. The ambulance crew will contact the Receiving Facility unless Base Station orders are required.

- Warm, dry, pink skin at rest.
- HR 60 to 130 regular when at rest, peripheral pulses present.
- RR 10 to 30 at rest.
- BP > 100 systolic unless symptomatic due to BP.
- BP < 180 systolic unless symptomatic due to BP.
- BP < 120 diastolic unless symptomatic due to BP.
- Awake, alert, or at baseline mental status.
- No chest pain/no shortness of breath/no signs of a stroke/TIA.
- No drug overdose.
- No suicide attempt requiring ALS interventions.
- No significant mechanism of injury resulting in ALS symptoms.
- No impending or current childbirth associated with complications.
- Patients with Ventricular Assist Device (VAD) not requiring ALS interventions.
- Patients with medical devices/equipment managed by the patient/caregiver requiring no medical intervention or monitoring (e.g. peg tubes, CSF shunts, colostomy/ileostomy bags, insulin pumps, feeding tubes that are not running during transport).

ALS  If the patient meets ALS criteria, they must be transported by the crew of a licensed, verified ALS ambulance agency. The ambulance crew will contact the Receiving Facility unless Base Station orders are required.

- Cool, clammy skin.
- HR < 60 or > 130 at rest, in adults.
- RR < 10 to > 30 shallow or labored at rest.
- BP < 100 systolic if symptomatic due to BP.
- BP > 180 systolic if symptomatic due to BP.
- BP > 120 diastolic if symptomatic due to BP.
- Altered LOC or confirmed loss of consciousness now or prior to arrival.
- Chest pain/shortness of breath/signs of a stroke/TIA.
- Impending/recent childbirth/neonate care.
- Medication reaction/drug overdose/suicide attempt resulting in ALS symptoms, requiring ALS intervention or if decompensation may occur.
- Severe bleeding, amputation; including fingers/toes resulting in shock.
- Significant mechanism of injury resulting in ALS symptoms.
- Supra-umbilicus abdominal and/or back pain when atypical cardiac origin is suspected.

* If the transport of an ALS patient will be delayed longer than the time it would take a BLS unit to transport to the Receiving Facility, the BLS unit may transport the patient with the permission of Base Station.