

Criteria for Air Medical Transport: Pediatric and Neonatal Patients

Patient: _____ Transport Date: _____ Flight # _____

Referring Hospital: _____ City/State: _____ Loaded Miles: _____

Section 1: Medical Benefits to the Patient

General Criteria for Air Medical Transport

- Distance to the closest appropriate facility was too great for safe and timely transport by ground ambulance.
- Patient's clinical condition required that the time spent in transport be as short as possible.
- Patient's condition was time critical, requiring specific/timely treatment, not available at the referring hospital.
- Potential for transport delay associated with ground transport, was likely to worsen the patient's clinical condition.
- Patient required critical care life support during transport, not available from the local ground ambulance service
 - Monitoring _____
 - Medication _____
 - Personnel _____
 - Special equipment _____
- Patient was located in an area inaccessible to regular ground traffic, impeding ambulance egress or access due to
 - Road obstacles and/or conditions
 - Wilderness rescue or geographic considerations
- Local ground units were not available for long distance transport.
- Use of a local ground transport service would have left the local area without adequate EMS coverage.

Indications for Transfer to an Appropriate Receiving Facility

- Patient required further diagnosis, specialized care and/or timely treatment, not available at the referring hospital.
- Patient required care by physician(s) at a receiving hospital where the patient had previously undergone specialized treatment and where medical records were located which were likely to significantly influence patient care.
- Patient's attending physician requested transport to a specific hospital based on medical needs/continuity of care.

Section 2: Criteria for Critical Care Transport

Pediatric Criteria for Critical Care Transfer

- Patient was experiencing or had a high risk for
 - Cardiac dysrhythmias or cardiac pump failure
 - Acute respiratory failure or respiratory arrest
- Unstable or potentially unstable airway
- Patient required mechanical ventilator support or any constant positive airway pressure (CPAP)
- The patient had unstable vital signs (circle below):

Age	sBP	Heart Rate	Resp. Rate
<input type="checkbox"/> 1-12 m/o	< 70	<80 or >160	<25 or >40
<input type="checkbox"/> 1-5 y/o	< 75	<75 or >160	<20 or >35
<input type="checkbox"/> > 5 y/o	< 85	<70 or >110	<15 or >25
- Shock:
 - Septic
 - Hypovolemic
 - Evidence of persistent abnormal perfusion (Pale, cold, cyanosis, or capillary refill > 3 seconds)
- Patient required continuous intravenous vasoactive medications to maintain a stable cardiac output
- Patient required specific therapy, diagnostic procedures, or intensive care not available at the referring hospital for any of the following
 - Near drowning
 - Status epilepticus
 - Acute bacterial meningitis
 - Life threatening infectious process
 - Acute renal failure
 - Unstable toxicologic syndrome
 - Hypothermia requiring active therapy
 - Acute deterioration in mental status
 - Significant acidosis
 - Complications of cancer and chemotherapy
 - Decompression sickness
 - Non-traumatic surgical emergency

Neonatal Criteria for Critical Care Transfer

- Neonate was experiencing unstable vital signs:
 - Temp. instability _____
 - HR: < 80 or > 180
 - sBP: < 60 mmHg
 - RR: < 25 or > 45
- Shock:
 - Septic
 - Hypovolemic
 - Evidence of persistent abnormal perfusion (Pale, cold, cyanosis, or cap refill > 3 sec)
- Cardiac or respiratory arrest within 24 hours
- Premature infant < 30 weeks gestational age
- Body weight < 1,200 grams and complications
- Evidence of or potential to develop respiratory compromise, associated with any of the following
 - Requiring mechanical ventilation or CPAP
 - Hyaline membrane disease
 - Persistent pulmonary hypertension
 - Supplemental oxygen > 60% or Sats < 90%
 - Subcutaneous, mediastinal or intrapleural air requiring a thoracostomy tube
- Vasopressor drip medications or repeated volume challenges are required to maintain BP
- Persistent seizure activity
- Congestive heart failure
- Surgical emergencies including
 - Trauma
 - Diaphragmatic hernia
 - Intussusception
 - Abdominal wall defect
 - Volvulus
 - Congenital heart defect
 - Necrotizing enterocolitis

Other Criteria / Comments

Section 3

Transfer Diagnosis

Physician Signature