Position Statement

Transport of the Mechanically Ventilated, Critically Injured or Ill, Neonate, Child or Adult Patient

Transport of the mechanically ventilated, critically injured or ill neonatal, pediatric and/or adult patient is always associated with a degree of risk. Whether these transports are considered external transports—from one facility to another—or internal transports—from one area to another within a facility or system—the risk needs to be minimized through careful preparation prior to the transport, continuous monitoring throughout the transport, and the use of appropriate transport equipment and personnel.

The American Association for Respiratory Care recognizes the following as the minimum standards for the safe transport of the mechanically ventilated, critically injured or ill, patient:

1. Transports will be performed by a team consisting of, at a minimum, a Certified or Registered Respiratory Therapist and a Registered Nurse with critical care experience.
2. One member of the transport team will have the appropriate advanced life support certification (NRP, PALS and/or ACLS).
3. A minimum of one member of the transport team will be competent in airway management. Appropriate airway management equipment will be readily available during the transport.
4. Transport monitors will provide real time measurement of all essential parameters.
5. All patients receiving mechanical ventilation will have some form of carbon dioxide monitor in place during transport as this monitor is useful in providing information regarding both airway placement and pulmonary blood flow.
6. A transport ventilator, or transport capable ICU ventilator, will be utilized for mechanical ventilation when possible.
7. A self inflating bag/valve/mask resuscitation device will accompany all patients on transport in case of ventilator failure, gas failure, or accidental extubation.
8. A trial of mechanical ventilation using the planned transport device will be conducted to assess patient tolerance and stability before proceeding with the transport whenever possible.
9. Appropriate and thorough documentation, using the facility’s designated process, will occur for all stages of the transport in accordance with the facility’s policies and procedures.

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