

HEALTHEAST MEDICAL TRANSPORTATION
MEDICAL OPERATIONS MANUAL

CP 9.21 BLS versus ALS Transport

Title: BLS versus ALS Transport
Effective Date: April 1, 2015
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Standard: Patient Care and Transport
Policy: Under optimal conditions patients will be transported by HEMT providers with the most appropriate level of training and certification consistent with the needs of the patient's condition.

I. **Purpose**

This policy defines which patient conditions are appropriate for Basic Life Support (BLS) versus Advanced Life Support (ALS) transport.

II. **Definitions**

- A. **Basic Life Support Provider**: Providers trained and certified to the EMT-2 credentialing level.
B. **Advanced Life Support Provider**: Providers trained and certified to a minimum of the Paramedic-1 credentialing level.

III. **Procedure**

- A. Patients with the following presentations should be considered for ALS transport:
1. Accident/assault victim with multiple trauma or significant mechanism of injury (qualify for Trauma Team Activation) including but not limited to:
 - Falls from a distance of > 20 feet
 - Ejection from a vehicle
 - Death in the same passenger compartment
 - Extrication time > 20 minutes
 - Rollover
 - High speed auto crash with any of the following:
 - Initial speed > 40 mph
 - Major auto deformity > 20 inches
 - Passenger compartment intrusion > 12 inches
 - Steering wheel deformity
 - Auto-pedestrian/auto-bicycle injury with significant (> 5mph) impact
 - Pedestrian thrown or run over
 - Motorcycle crash > 20mph or with separation of rider
 2. Airway compromise
 3. Altered level of consciousness: persistent, alternating, unknown etiology, or GCS < 14

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4. Anaphylaxis
5. Respiratory distress
6. Burns: major partial or full thickness, hydrofluoric acid or fluorine gas exposure, respiratory or facial, or when pain control is indicated
7. Chest pain and/or heart problems
8. Cardiac or respiratory arrest
9. Cerebrovascular accident or stroke symptoms
10. Near drowning
11. Electrical injury
12. Fractures: bilateral femur, pelvic, or open fractures (suspected or known), or when pain control is indicated
13. Heatstroke with altered level of consciousness
14. Hemorrhage: internal or external, with evidence of shock
15. Obstetrical: known or suspected complications, including, but not limited to, breech, prematurity, multiple births, or pre-eclampsia
16. Overdoses, drug reactions, and poisonings associated with GCS < 13
17. Penetrating trauma to head, neck, or torso
18. Syncope episode in any patient > 35 years old
19. Seizures: prolonged or repetitive, initial episode or unknown etiology
20. Any patient whose vital signs fall within these ranges should be considered for ALS transport

Age	Blood Pressure	Pulse	Respirations
>11 Yrs.	<90 or >200 systolic or >120 diastolic	<50 or >150	<10 or >30
3-11 Yrs.	<80 systolic	<60 or >150	<15 or >30
3mo-2Yrs.	<70 systolic	<80 or >160	<20 or >40
Birth-2 Mo	<50 systolic	<100 or >180	<30 or >50

- B. Patients with the following presentations may be transported BLS as long as they do not fit any of the above criteria:
1. Accident/assault victims with minor trauma
 2. Altered level of consciousness: brief and improving, and GCS of 14 or 15, or altered level of consciousness that represents the baseline and stable mental status of the patient.
 3. Burns: minor (<20% total body surface area (TBSA) in adults, <10% TBSA if <12 or >60 years)
 4. Fractures: simple

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5. Lacerations : minor
6. Obstetrical: uncomplicated
7. Psychiatric or suicidal patients that do not require more than Two Point Light physical restraint.
8. Seizure: febrile or with known history and improving LOC
9. Syncopal episode in any patient <35 years old

IV. **Special Notes**

- A. If in doubt as the appropriate level of transport contact a Supervisor for assistance.
- B. If a Supervisor is not readily available default to ALS level of transport.

Previous versions: