OLIVE VIEW-UCLA MEDICAL CENTER POLICY & PROCEDURE

NUMBER: 11492 VERSION: 1

SUBJECT/TITLE: CCT: TRANSPORT OF THE PATIENT WITH AN INTRA-AORTIC

BALLOON PUMP (IABP) / VENTRICULAR ASSIST DEVICE (VAD)

POLICY: Transport of the Patient with an Intra-Aortic Balloon Pump (IABP)/Ventricular

Assist Device (VAD)

PURPOSE: Patients requiring Intra-Aortic Balloon Pump support during transport are often

severely compromised and may be dependent on a variety of medical

interventions for support. The patient with an Intra-Aortic Balloon Pump will be accepted for transport only if the patient is being moved for medical necessity to a facility where the same or higher level of medical care can be delivered, and if the

overall benefits of the transport outweigh the risk of transport.

DEPARTMENTS: ALL

DEFINITIONS:

PROCEDURE: The Care Critical Transport RN will **not** take responsibility for the IABP/VAD

during transport. The transporting facility must provide the personnel to manage the IABP/VAD. If there is no one available, the receiving facility may provide the

appropriate personnel, and time must be allowed to pick them up before

proceeding to the call.

The most common models of IABP now on the market are highly portable and fit into the type 3 modular ambulances without difficulty. The VADs are centrifugal pump that requires a large universal power supply that travels together. The patient may have to be loaded onto the gurney and into the ambulance feet first to accommodate the pump console.

The Communication Center will not oblige Care to the transport until the following criteria is met:

- Patient acceptance and bed assignment have been confirmed by the receiving facility
- A portable IABP and technician are available
- Contacting sending facility for dimensions of IABP and VAD
- Verify with the crew that the unit configuration will accommodate the IABP
- Orders need to be written for the IABP as well as for the argumentation ratio (1:1, 1:2 and 1:3).

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• Documentation must include the extremity of balloon placement, side condition, distal pulses, extremity color and temperature. If available, document balloon size and serial number.

• The ambulance <u>must</u> be equipped with an alternative power source (inverter).

References:	
Approved by: Bonnie Bilitch (Chief Nursing Officer), Judith Maass (Chief Executive Officer), Shannon Thyne (Chief Medical Officer)	Date: 06/27/2018
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