## PATIENT CONDITION / TREATMENT

<table>
<thead>
<tr>
<th>Stable patient who requires no special care, may have the following:</th>
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<tbody>
<tr>
<td>• Foley catheter</td>
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<tr>
<td>• Gastrostomy tube</td>
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<tr>
<td>• Medication patch</td>
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<tr>
<td>• Nasogastric (NG) tube</td>
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<tr>
<td>• Patient controlled (or automated) medication pump that requires no intervention from transporting personnel</td>
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<tr>
<td>• Surgical drain</td>
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<tr>
<td>• Tracheostomy tube</td>
</tr>
<tr>
<td>• Ventricular assist device (VAD)</td>
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</tbody>
</table>

### BLS | ALS | SCT*
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Yes |  |  |

Oxygen by mask or cannula

Heparin or saline lock

Peripheral IV without additives, maintained at a preset rate (*normal saline, lactated rings or glucose solutions*)

Pre-existing vascular access device or peripherally inserted central catheter (PICC) line capped or with fluids infusing at a preset rate

Stable patient who requires cardiac monitoring or may need paramedic level intervention

Peripheral IV with any medication listed in the Los Angeles County paramedic scope of practice, infused with or without an IV pump

Chest tube clamped or attached to a Heimlich valve or similar device

Stable or unstable patient who requires care outside the paramedic scope of practice

Continuous ventilatory assistance via a ventilator required (*For stable patients, consider RCP staffed CCT transport*)

Any intervention or therapy that is not within the Los Angeles County paramedic scope of practice including IV infusion of any drug to an unstable patient

Chest tube to suction

Central venous catheter with central venous pressure (CVP) monitoring device in place

Arterial line in place

Pulmonary artery line in place (e.g. Swan Ganz)

Intracranial pressure (ICP) line in place

Intra-aortic balloon pump

Transvenous pacemaker

Standing orders written by transferring facility physician or provider agency medical director

### BLS | ALS | SCT*
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Yes |  |  |

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*Includes RN and/or RCP staffing SCT transports – Consult with SCT Coordinator/Medical Director for specific indications for RN and/or RCP staffing of SCT transports.

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**Effective Date:** 07-01-17