**Transporting Patients on ECLS:**

PURPOSE:

To outline the ECLS team responsibilities when moving a patient on ECLS.

SUPPORTIVE DATA:

The ECLS patient will be moved when requiring surgical procedures in the OR, non-portable diagnostic studies, etc. An ECLS Physician must accompany the patient when being moved. The patient must also be accompanied by a respiratory care practitioner and an ECLS Specialist. Once the move is completed, plug the ECLS cart into an electric plug as soon as possible, as the water bath for the heat exchanger will not be circulating, and the blood will cool. The ECLS supply cart must accompany the ECLS patient during the move.

EQUIPMENT LIST:

* Complete ECLS set-up on cannulated patient.
* ECLS supply Cart.
* Portable respiratory gas tanks.

STEPS:

* **Simulate move and determine optimal position that the patient will need to occupy in various places prior to and at the destination point.**
* **Choose the smallest gurney which fits the patient, can be raised upward, and fits through the doors of the PICU.**
* When moving the ECLS patient to the Cath Lab or radiology, it is easiest to first place the child onto the white board which is kept in the ECLS Storeroom. Place padding on white board. The ECLS cannulas and tubing should be secured firmly to the board and moved carefully to the gurney which fits into the elevator. (The service elevator across from the NICU nursing lounge measures 9 feet deep by 5 feet, 3 inches wide and is the largest elevator on the third floor of the hospital. The elevator closest to the PICU measures 8 feet deep by 4 feet, 11 inches wide).
* Lower the patient’s bed to the highest level of gurney and assure that flows are stable.
* Move the patient from the bed to the gurney. Lift child and backboard up, roll bed out, and roll gurney in.
* If patient is too heavy to lift, try bringing the bed next to the patient’s left side and sliding the patient onto the gurney.
* Lower the IV poles on the ECLS cart to provide doorway clearance.
* Lower the bed to provide doorway clearance.
* Obtain baseline ABG from patient.
* Move patient EKG monitor and pulse oximeter to the bed.
* **Minimize pumps and remove meds which are not critical to the patient during move.**
* Add extension tubing length to critical IV lines.
* Mount all IV pumps on IV poles of ECLS cart or on the bed. The IV pole will be positioned at patient’s left side near the head of the bed in the elevator.
* Secure all circuit lines, cables, and hoses away from wheels or other potential areas that could become entangled or stepped on.
* Unplug power to cart, and check that battery display indicator is lit on the console
* **Check that the yellow cap is ON the de-airing port of the oxygenator during transport – it should also be tightened**.
* Open air and oxygen tanks on ECLS cart (turn to left). Confirm there are appropriate levels of gas in the tanks (minimum 100 psi).
* Unplug gas lines of ECLS cart from the wall.
* Remove ventilator and begin hand bagging at same settings. The anesthesiologist stands near the head of the bed at the patient’s left side.
* **Alert security to help with clearing traffic from the hallways and placing the elevator on hold.**
* **Move patient to destination positioned such that patient’s head and IV pole are leading and the ECLS pump is at the end.**
* The gurney will be positioned in the back of the elevator against the left/back wall, IV pole to left of head, and pump at foot of bed.

At destination:

* Plug cart power into wall power at destination.
* Plug air and O2 lines into wall. Turn off tanks.
* If using, readjust Transonics as if turning on, it does not need to be re-zeroed.
* When ready to leave, repeat same procedure.

If moving to or from the O.R.

* ECLS cart ultimately must lie next to CPB cart on patient’s LEFT side while in the OR.
* To plug into the OR electrical supply, do the following steps: Plug into the OR power supply. Because the power cord from the Blue Electrical box on the cart is too short to reach, remove the Blue electrical power box from the ECLS cart while keeping all cords plugged into it. It will be necessary to stretch the cords on the floor to allow the ECLS cart to move closer towards the OR bed. Tape over the cords using masking tape for safety.
* Turn on portable O2 and air tanks prior to switching from CPB to ECLS.
* When on ECLS and off CPB, connect ECLS gas lines to OR source
* Verify ECLS supply cart has accompanied patient.
* Before moving patient on ECLS back to PICU, it is necessary to move ECLS cart to patient’s RIGHT side.
* Bring patient bed between ECLS cart and OR table.
* Transfer patient to bed.
* Move patient out of room (feet first)

DOCUMENTATION:

Document on the Bedside Nurses Notes how the patient tolerated the move including vital signs, pulse oximeter readings, color, amount of support needed, etc. Document on ECLS flowsheet why and where patient was moved to and any other pertinent details regarding the move.