



CHARLOTTESVILLE-ALBEMARLE RESCUE SQUAD Clinical Review and Training

IV maintenance policy

To provide guidance in handling patients found with IV access established by the referring facility. The following are directives to be followed in most situations.

○

Policy:

1. Patients with IV access established by referring facility.
 - A. If the facility established an IV and have not given any IV medications then a BLS crew may request that the IV be locked off for transport.
 - a. If the referring facility established the IV for labwork without administering medications then the IV can be locked off for transport without calling for ALS intercept.
 - B. If the facility believes that immediate fluid administration is critical to the care of the patient then the crew should lock off the IV and request ALS intercept while proceeding to the hospital without delay.
 - C. If a call is improperly triaged and the patient requires ALS then call for intercept, but do not run fluids. BLS crews may maintain IV access, but we do not train our crews to maintain IV fluid infusions.
 - D. **CARS ALS providers may not initiate IV without transporting the patient. The same goes for ALS providers who initiate ALS on non-transport units (Like CFD or ACFR).**
 - a. EMS providers who initiate IV access must transport the patient or transfer care to a provider with equal or greater training. Doing otherwise is abandonment.

Please use common sense and do not delay transport to wait for ALS. The IV does not need to be removed unless the referring facility deems it necessary, and they should be the ones to do so, not the BLS crew.