

Neonatal Return Transport Service Information Sheet

For hospital return bookings:

Telephone PIPER dedicated 24-hour non-emergency line on 1300 659 803

1. Overview / Description

A return transfer occurs when a baby is transported to a hospital closer to home and not requiring higher-level care.

2. Definition of Terms

AAV: Air Ambulance Victoria

ETD: Estimated time of departure

EBM: Expressed Breast Milk

3. Procedure

3.1 The Transport team and transport platforms

3.1.1 *Road*

- a neonatal intensive care trained nurse
- a qualified patient transport driver
- 4 specially designed vehicles to accommodate up to 3 babies per vehicle

3.1.2 *Air*

- a neonatal intensive care trained nurse
- a paramedic and pilot
- a pressurised, fixed wing aircraft (Air Ambulance Victoria or occasionally, commercial aircraft)

3.2 Who can utilise this service?

Medical and nursing staff in all special and intensive care nurseries can utilise this service, including specialist paediatric wards. Babies are transferred from both public and private hospitals to other hospitals throughout metropolitan Melbourne, regional Victoria and, at times, interstate.

3.3 Criteria for using this service

3.3.1 *Road return*

Any self-ventilating baby weighing less than 6kg (larger infants may be transferred but will require a stretcher with neomate harness rather than an incubator

- Distances up to 180 kilometers from the central business district of Melbourne

3.3.2 *Air return*

- Any baby weighing less than 6kg
- Distances over 160 kilometers, the transfer is carried out by Air Ambulance Victoria in fixed wing aircraft.

Neonatal Return Transport Service Information Sheet

3.4 How to organise a return transfer

Return transfers are booked through Arvis online booking system.

3.4.1 **Road return**

PIPER will advise each of the referring and receiving hospitals the planned time of arrival on the morning of the day of transfer once the itinerary has been finalised for the day.

3.4.2 **Air return**

Details of the baby are faxed to Air Ambulance Victoria (AAV). Once AAV have finalised their itinerary PIPER is contacted with the estimated time of departure (ETD) from Essendon airport. AAV organise an ambulance to take the PIPER nurse/incubators/other equipment from PIPER to the referring hospital and the baby is then transferred to the airport. AAV also organise an ambulance to transfer the baby and PIPER nurse to the receiving hospital. AAV usually require one day's notice. PIPER Return Patient Transport Officers (PTOs) will transfer teams and babies to Essendon Airport (AAV) as required for a return flight.

3.5 Care of the baby during return transfer

3.5.1 **Equipment**

For all return transfers, available equipment includes:

- Incubators with safety harness
- 12 volt / 240 volt leads
- Saturation monitor
- Syringe pump (if required)
- Oxygen cylinder, flow meters low/high (If required)
- Suction unit
- Equipment bags including resuscitation equipment
- Observation charts folder
- Esky to hold expressed breast milk (fresh/frozen) / freezers in specialised return vehicles
- Mobile phone

3.6 Clinical management of neonate

- Observations ½ hourly
- Continuous saturation monitoring
- Babies are occasionally fed during a road transfer and also during a long interstate air return when aircraft is at maximum altitude and well before descent and landing
- Baby is given supplementary oxygen as required

3.7 Safety during return transfer

All equipment in PIPER Return Transfer Service ambulance is secured safely.

- Stretchers are secured in Returns ambulances by stretcher locking devices
- Ambulance Victoria (AV) ambulances: incubators are secured with safety straps x 4 and a large safety belt
- Fixed wing aircraft: incubators are secured with seat belts

Neonatal Return Transport Service Information Sheet

- Incubators are checked by Biomedical Engineering on a regular basis

3.8 Interstate transfers

Contact PIPER preferably a week prior to requested date of transfer

3.9 Infection control

- Each Returns Ambulance and returns bag has antimicrobial hand gel solution available
- Incubators are washed with advice from Infection Control
- Expressed breast milk is double bagged and labelled

3.10 Parent accompanying a baby

The PIPER Returns Ambulance can accommodate one parent (this needs to be discussed with PIPER staff beforehand).

Parents may travel by air but this is at the discretion of Air Ambulance Victoria. Parents are required to make their own way to the airport, and there is limited space for luggage so only up to 5kg may be taken.

3.11 Transport of expressed breast

The PIPER Returns Ambulance is equipped with a freezer for frozen EBM. An esky with ice packs is used to transport fresh EBM which is also double bagged.

Only 24 hours supply of EBM may be transported with Air Ambulance.

3.12 Costs associated with road transfer.

- PIPER charges per kilometre for travel in the road vehicle.
- The referring hospital is billed.
- The charges remain below those of alternative transport organisations who are unable to provide a specialist neonatal nurse to supervise/monitor the baby.

3.13 Costs associated with air transfers (Air Ambulance Victoria – AAV)

PIPER charges the referring hospital a nominal cost for transfer and AAV also charge the referring hospital.

4. End of Document
