Follow **MAMP Protocol 4201,** as applicable, with the following modifications:

A.   Patient Assessment.
    1. Airway and Oxygenation Management:
        a. If external airway is in place prior to arrival, confirm proper placement and secure device prior to transport.

        b. If patient's airway is not secure and needs secured, establish patent airway using **Airway Management Protocol 4901** and/or **Advanced Airway Management (RSI) Guideline 1901/2901.**

    2. Breathing:
        a. If the patient is in respiratory distress and cannot maintain oxygen saturations >90% by utilizing **MAMP Protocol 4201**, consider securing airway with endotracheal tube using **Airway Management Protocol 4901** and/or **Advanced Airway Management (RSI) Guideline 1901/2901.**

        b. Assess and document any ventilator settings if applicable.

    3. Circulation:
        a. Assess vital signs, skin color, temperature, cap refill, vital signs and document.

    4. Neuro
        a. Assess level of consciousness, GCS
        b. Assess for any focal neurological deficits.

B. Treatment.
    1. Initiate or continue at least one (preferably two) IVs of 0.9% normal saline.

    2. If interfacility transport, assess and document any continuous IV infusions and their rates. Assess to ensure enough meds to complete the transport.

    3.   Monitor ECG, pulse oximeter, end tidal CO_2, vital signs at least every 15 minutes, and document.
.

    4. If interfacility transport, ensure that any available medical records, x-rays, recent labs are transported with the patient.

5. If interfacility transport and prolonged transport time is contemplated, consider urinary catheter insertion.

6. If interfacility transport, provide a short update/visit with family at sending facility if time and condition allows, to alleviate anxiety of patient and family.

C. **Contact Medical Command** enroute with patient report and ETA.