

NCCU CLINICAL GUIDELINES
SECTION: 19

TRANSFER AND DISCHARGE

Section 19: Transfer & Discharge
Air transport of stable O2 dependent infants by nursing staff
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Neonatology Clinical Guidelines
King Edward Memorial/Princess Margaret Hospitals
Perth Western Australia
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AIR TRANSPORT OF STABLE OXYGEN DEPENDENT INFANTS BY NURSING STAFF

All infants that are transported by air who require in-flight oxygen will be transported in a manner that meets the infant's, and Civil Aviation Safety Authority's safety requirements.

- The decision to have a nurse escort is to be made by the Medical Officer.
- Flight booked by the CNC/Discharge Coordinator. Flight details are given to the ward Coordinator and the information is kept in their file. Book the taxi (with capsule) to the airport, remember to give Taxi vouchers. The parents should be informed of taxi and flight details as soon as possible.
- Parents should be reminded to be ready to depart the nursery at least thirty minutes prior to the taxi's arrival. If parents have a large amount of luggage, they should consider sending some luggage home (by mail or family members).
- The airline must be informed at the time of booking that the infant will be flying with oxygen, and a medical clearance form, or "fitness-to-fly" form must be completed and faxed to the airline >48hours prior to departure.
- **For Qantas flights a 'medical oxygen cylinder approval form' to be completed and emailed to dq@gantas.com.au. Form to be carried at all times by nurse escort. [Medical Oxygen Cylinders Approval RNfrom the NCCU atKEMHTPA.pdf](#)**
- A nurse escort is required for the duration of all inter-hospital transports where the infant requires oxygen during the flight.
- Infants requiring SaO₂ monitoring during transport are to be monitored using a small oximeter with adequate battery life.
- Spare oxygen cylinders may be carried with permission of the airline. Requests to carry additional oxygen must be made 48hrs prior to departure.
- "D" size cylinders must NOT be carried on the aircraft. If these are required then a request is made to the airline, this is then organised by the airline.
- If travelling internationally then Qantas requires 14days notice to organize the oxygen.

PRE-FLIGHT PREPARATION - NURSE

1. Aim to commence checking and preparation at least 30 mins prior to departure from NCCU. Receive handover of infant from allocated nurse prior to commencing preparations.
2. The escort nurse must ensure that the following is available:
 - Photo identification for self
 - Correct number of taxi vouchers and/or hospital transport requisition slip
 - Copy of flight details and hospital transport / taxi arrangements

- Phone contact names and numbers for receiving hospital and transport / taxi service
- Medical discharge summary and nursing transfer letter

PRE-FLIGHT PREPARATION - INFANT

1. Aim for infant to be fed around 60 mins prior to departure from the NCCU.
2. Check positioning and taping of nasal cannula and IGT (Escort may carry pre-cut tapes – scissors cannot be carried on board the flight).
3. Sufficient milk feeds (packed in an esky with ice blocks not ice cubes).
4. Travel bag with the following equipment:
 - Medications
 - Adequate feeding & nappy changing equipment for the trip
 - Laerdal bag and appropriate sized mask
 - Mucous extractor / stethoscope
 - Change of clothes, extra cardigan and wrap/ blanket
 - **NO SCISSORS**
5. Check documented order for infant's in-flight oxygen requirement
6. Size C travel (Fibrewrap) oxygen cylinder in Oxypack carrier an approved cylinder carry bag)
7. Anaequip regulator (conversion chart is attached to regulator)
8. Rapid emptying regulator
9. Check presence of two identification labels on infant with another nurse prior to departure

CHECKING IN PROCEDURE

Plan to arrive at the airport at least 45 mins prior to take-off. At check-in, request engineering check and securing of cylinder and carrying equipment.

ON ARRIVAL TO DESTINATION (IF ON A TURN-AROUND FLIGHT)

Inform cabin crew that you will be returning on same flight. Check-in for return flight at check-in counter BEFORE handing over or transporting infant

PRIOR TO RETURN FLIGHT DEPARTURE

Empty oxygen cylinder using rapid emptying regulator (the 60lpm flow meter takes approximately 20mins to empty a "C" size cylinder. EMPTY cylinder must be checked in as luggage and CANNOT be carried on board the return flight. **Oxygen is an accelerant and must be emptied in a safe location ie. in a non-smoking area.**

ON RETURN TO NICU

- Complete NETS REVERSAL data sheet if applicable.
- Empty contents of travel bag and return equipment to appropriate places
- Report any adverse incidents to Clinical Nurse Consultant / Discharge Coordinator. Adverse events to be reported on eCIMS form (infant event) or OS&H form (staff event).