



CCT Training Requirements and Patient Classifications

For agencies that provide CCT, they must have providers conducting those transports trained either through the University of Maryland Baltimore County (UMBC), the Cleveland Clinic Critical Care or other programs approved by the GCMCA medical director and the agency medical director.

Any patient that is in need of the care described in the state Inter-Facility Transfers protocol can be transported by a paramedic, or CCT paramedic. Based upon the following list of interventions and designations, these additional interventions may be transported by personnel holding the noted licenses/certifications:

Procedure / Equipment / Medication	ALS	CCT
Procedures / Equipment		
Arterial line monitoring	No	Yes
Balloon pump (IABP)	No	Yes (1)
Central Line – Use & Maintenance	No	Yes
Chest tube	No	Yes
CVP Line Monitoring	No	Yes
ICP Monitoring	No	Yes
Swan-Ganz Catheter Monitoring	No	Yes
Transvenous pacing – Maintenance & Troubleshooting (not initiation)	No	Yes
Ventilator dependent	Yes (2)	Yes (2)
Ventilator – newly vented	No	Yes (2)
Ventricular assist device (LVAD)	Yes (3)	Yes (3)
Medications		
Albumin	No	Yes
Amrinone	No	Yes
Bata Blockers - Any Drip	No	Yes
Blood products - Any	Yes (4)	Yes
Cardizem	No	Yes
Digoxin	No	Yes
Dobutamine	No	Yes
Epinephrine - Drip	No	Yes
Drip Esmolol (Brevibloc)	No	Yes
Etomidate	No	Yes
Flumazenil (Romazicon)	No	Yes
Glycoprotein IIb/IIIa Inhibitors	Yes	Yes
Heparin	Yes	Yes
Inacor (Inamrinone)	No	Yes
Insulin	No	Yes
Isoproterenol	No	Yes



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Labetalol	No	Yes
Levophed (Norepinephrine)	No	Yes
Magnesium Sulfate Drip	Yes	Yes
Mannitol (Osmitrol)	No	Yes
Milrinone (Corotrope, Primacor)	No	Yes
Neosynephrine (Phenylephrine)	No	Yes
Nesiritide (Natrecor)	No	Yes
Nicardapine (Cardene)	No	Yes
Nitroglycerine Drip	Yes	Yes
Nitroprusside (Nitropress)	No	Yes
Nitroprusside (Nipride)	No	Yes
Octreotide (Sandostatin)	No	Yes
Oxytocin (Pitocin)	No	Yes
Paralytics - Any	No	Yes
Potassium	No	Yes
Propofol (Diprivan)	No	Yes
tPA or other thrombolytics	Yes	Yes
Vasopressin (Pitressin)	No	Yes

- (1) Must be accompanied by appropriate hospital staff familiar with the equipment
- (2) Must be trained on their agency's transport ventilator
- (3) Must have emergency contact information for responsible VAD program
- (4) If blood products need to be changed during transport then must be CCT transport

Additional Requirements & Expectations for Critical Care Transports:

1. Vehicle, Equipment and Staffing Requirements
 - A. MDHHS Vehicle License. All vehicles conducting Critical Care Inter-Facility Patient Transports must be licensed as transporting Advanced Life Support (ALS) vehicles.
 - B. Equipment. The following is the minimum equipment that will be carried by an ALS vehicle while it is providing Critical Care Inter-Facility Patient Transport, in addition to the equipment required by Part 209, P.A. 368 of 1978, as amended, and local medical control authority protocols:
 - a. Waveform Capnography
 - b. Portable Ventilator or staff capable of providing ventilatory support
 - c. Portable Infusion Pump(s)
 - d. Pressure infusion bag(s)
 - C. Staffing
 - a. All ALS vehicles that conduct Critical Care Inter-Facility Patient Transports will be staffed in accordance with local medical control requirements with at least one (1) paramedic trained in the Critical Care Inter-Facility Patient Transport curriculum. The trained paramedic must be in the patient compartment while transporting the patient.
 - b. The above requirement for staffing does not apply to the transportation of a patient by an ambulance if the patient is accompanied in the patient



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compartment of the ambulance by an appropriately licensed health professional designated by a physician and after a physician-patient relationship has been established as prescribed. (PA 368, Section 20921(5)).

2. Critical Care Inter-Facility Patient Transport Physician Director/Quality Improvement
 - A. Ambulance services that utilize this protocol must designate a Critical Care Inter-Facility Patient Transport Physician Director.
 - B. The Critical Care Inter-Facility Patient Transport Physician Director will be responsible for:
 - a. Oversight of a quality improvement program for Critical Care Inter-Facility Patient Transports
 - b. Oversight of the training curriculum for EMS personnel Trained under this protocol if not one of the pre-approved programs outlined in this protocol.