

## TENNESSEE BOARD OF RESPIRATORY CARE

### Position Statement Regarding RRT's Providing IV Care to Pediatric Patients During Transport

It is the Board of Respiratory Care's position that, pursuant to T.C.A. § 63-27-102(4)(A), A registered respiratory therapist may initiate and/or manage intravenous access to a pediatric patient during transport, so long as the following conditions are met:

- a) The patient requires cardio-respiratory care; and
- b) The respiratory therapist is specifically ordered (either verbally or in writing) by a licensed physician to initiate, administer, and/or manage<sup>1</sup> intravenous access on that cardio-respiratory patient as part of the patient's continuum of emergency care; and
- c) The treating respiratory therapist possesses documented training and competency in the initiation and management of intravenous cardio-respiratory medications; and
- d) The supervising physician remains *immediately* available either in person or by telephone throughout the transport of that patient until the patient has reached the medical facility and the RRT is no longer responsible in any way for initiating or managing intravenous access on that patient.

**Adopted by the Board of Respiratory Care on August 21, 2008.**

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<sup>1</sup> For the purposes of this position statement, to "manage" an IV line means to **maintain** the appropriate flow of medications through the patient's IV once the IV has been initiated.