OBJECTIVES

- To provide guidelines for provincial bariatric response by outlining bariatric patient subsets, access to bariatric resources, continuity of care, and minimum levels of supporting providers for the care and transport of bariatric patients.

PRINCIPLES

- This policy will provide direction for Alberta Health Services (AHS) Emergency Medical Services (EMS) staff, EMS Operations Supervisors/Managers, and EMS Dispatch, Communications and Deployment Centres on the safe care and transport of bariatric patients for both emergency response and inter-facility transfer. The supporting Provincial Bariatric Response for Ground and Air Ambulance Procedure (PS-EMS-06-01) provides flexibility for frontline practitioners in emergency situations to be able to consider and request additional bariatric support based on patient condition.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).
ELEMENTS

1. Patient Subset

1.1 A bariatric patient is any patient that weighs greater than 150 kg (330 lbs.) and is also broken down into two subsets.

a) **Level 1 Bariatric Patient** means patients weighing (actual or estimate) between 150 kg (330 lbs.) and 225 kg (500 lbs.) and or having an abdominal width greater than 68.58 cm (27 inches).

b) **Level 2 Bariatric Patient** means patients weighing (actual or estimate) greater than 225 kg (500 lbs.)

2. Bariatric Resources

2.1 Bariatric resources, including deployment of resources, vary between zones and refer to all equipment designed to transport bariatric patients. This includes, but is not limited to, dedicated bariatric units, stretchers, tarps or sheets, and expandable stretcher decks.

2.2 **Specialized Bariatric Units** are those units permanently equipped with bariatric specialized equipment, including lift and winch devices, where legislative requirements for minimum aisle way clearances are met.

2.3 EMS Zone Operations and Provincial Air Ambulance Operations will support the Provincial Bariatric Response for Ground and Air Ambulance Policy and Procedure by ensuring **Local Service Standards (LSS)** for deployment of bariatric resources are developed and in alignment.

2.4 AHS EMS (direct delivery and contract service providers) ambulances are not standardized and have differing capabilities concerning the transport of bariatric stretchers or stretchers with expandable bariatric decks. A clearly defined and ongoing inventory of existing bariatric transport capable ambulances is imperative to enable EMS Dispatch, Communications and Deployment Centres to utilize appropriate bariatric resources.

2.5 Legislation requires a licensed ambulance to have minimum aisle way clearances around the stretcher. Whenever a unit does not meet the aisle way standards, it can only be tasked to non-bariatric emergency calls as a first responder. Therefore, EMS may respond units that are equipped with permanent bariatric stretchers or bariatric decks to emergency events for initial care and treatment only of non bariatric patients. A second resource for transport of the non bariatric patient must be dispatched as the initial responding unit cannot transport as long as those bariatric stretchers or bariatric decks remain in place.

2.6 Bariatric patients may be transported with bariatric resources in an emergency situation.
2.7 AHS EMS has been given an exemption specific to transporting non bariatric Inter-Facility Transfer (IFT) patients on units equipped with permanent bariatric stretchers or bariatric decks. If a unit responds on a long distance bariatric IFT, that unit may be used to do a return IFT of a non-bariatric patient. Once the return IFT has been completed and the unit is back at its start station, it remains out of service for all non-bariatric transport events until the standard cot has been re-installed.

3. Communication

3.1 Early communication from requesting health care professionals for emergency response and inter-facility requests is essential for EMS Dispatch, Communications and Deployment Centres to effectively dispatch specialized bariatric resources.

4. Minimum Levels of Supporting Providers

4.1 High potential for injury to both patient and provider requires minimum levels for supporting providers based on the subset of bariatric patient and bariatric equipment used. Minimum supporting provider levels are clearly outlined in the supporting Provincial Bariatric Response for Ground and Air Ambulance Procedure.

<table>
<thead>
<tr>
<th>Level 1 Bariatric Patient –</th>
<th>Level 2 Bariatric Patient –</th>
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<tbody>
<tr>
<td>• Ferno standard or power assisted stretcher with expandable deck or Stryker bariatric stretcher or Specialized Bariatric Unit</td>
<td>• Stryker - Minimum 6 supporting providers</td>
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<td>• Minimum 4 supporting providers</td>
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<th>Level 2 Bariatric Patient –</th>
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DEFINITIONS

Bariatric patient means any patient that weighs in excess of 150 kg (330 lbs.). A bariatric patient is also broken down into two subsets.

1. Level 1 Bariatric Patient means patients weighing (actual or estimate) between 150 kg (330 lbs.) and 225 kg (500 lbs.) and or having an abdominal width greater than 68.58 cm (27 inches).

2. Level 2 Bariatric Patient means patients weighing (actual or estimate) greater than 225 kg (500 lbs.).
Bariatric Resources means all equipment designed or intended to transport bariatric patients. This includes, but is not limited to dedicated units, stretchers, tarps or sheets, and decks.

EMS Dispatch, Communications and Deployment Centres means under the mandate of the Emergency Health Services Act, responsible to receive community requests from EMS and interfacility transport requests from health care sites along with the deployment and dispatching of all ground and fixed wing EMS resources in Alberta through three AHS dispatch centres and three contracted satellite dispatch centres.

EMS staff means all AHS EMS contracted and direct delivery providers, including casual, part-time employees as well as volunteers of EMS.

Health care professional means an individual who is a member of a regulated health discipline, as defined by the Health Disciplines Act or the Health Professions Act, and who practices within scope and role.

Local Service Standards (LSS) (Practice Support Document) means a document that is used to implement details of how work will be done at a service level. A LSS can be used for one service or for multiple services that share the same need. The services that are to adhere to the LSS will be identified in the Applicability Section.

Long distance bariatric IFT means any IFT where the transporting unit is travelling outside of the community where it is normally located.

Specialized Bariatric Units means those units that are permanently equipped with bariatric specialized equipment, including lift and winch devices, where legislative requirements for minimum aisle way clearances are met.

Supporting providers means all EMS staff as well as external support such as Fire Department personnel and other healthcare providers. Air Ambulance pilots are not considered as supporting providers.

REFERENCES

- Alberta Health Services Governance Documents:
  - Provincial Bariatric Response for Ground and Air Ambulance Procedure (#PS-EMS-06-01)