

Transport the child in a vehicle other than an emergency ground ambulance using a size-appropriate child restraint system.

> **ALTERNATE: Transport** the child in a sizeappropriate child restraint system appropriately installed in the front seat of the ambulance with the airbags turned OFF.

Transport the child in a sizeappropriate child restraint system secured appropriately to the cot.



ALTERNATE: Secure the child to the cot; head first, with 3 horizontal restraints across the torso (chest, waist, and knees) and one vertical restraint across each shoulder.

Adapted from the National Highway Traffic Safety Administration document Working Group Best-Practice Recommendations for the Safe Transport of Children in Emergency Ground Ambulances published in September 2012.

For more information, go to www.nhtsa.gov or contact the Idaho Bureau of EMS & Preparedness, EMS for Children Program at 208-334-4000 or 1-877-554-3367.



For mother and newborn, transport - Yes → patients a mother and a — Yes → the newborn in an appropriate child restraint system that prevents both lateral and forward movement, leaving the cot for the mother.



CHILDREN AND NEWBORNS MUST BE TRANSPORTED IN AN APPROPRIATE RESTRAINT SYSTEM. NEVER TRANSPORT A CHILD IN A PARENT'S ARMS.

If possible, for multiple patients, transport each as a single patient according to the guidance shown on this chart. Transport in the forward-facing EMS captain's chair in a size-appropriate child restraint system.

No

ALTERNATE: When available resources prevent ideal transport including mother and newborn, transport using space available in a non-emergency mode, exercising extreme caution and driving at reduced (below legal maximum) speeds.

Secure the child to a size-appropriate spineboard and secure the spineboard to the cot, head first, with a tether at the foot (if possible) to prevent forward movement. Secure the spineboard to the cot with three horizontal restraints across the torso (chest, waist, and knees) and a vertical restraint across each shoulder.



ALTERNATE: Secure the child to a standard spineboard with padding added as needed and secure the spineboard to the cot, head first, with a tether at the foot (if possible) to prevent forward movement. Secure the spineboard to the cot with three horizontal restraints across the torso (chest, waist, and knees) and a vertical restraint across each shoulder.