

	1707	Heparin infusions
Nor-Cal EMS Policy & Procedure Manual	Treatment Guidelines	
Effective Date: 01/01/2025	Next Revision: 01/01/2028	
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE	

Signed transfer order from the transferring physician must provide for maintaining a specified infusion rate via pump that the Paramedic is trained and comfortable operating

Prior to transport confirm:

The Heparin shall be started prior to transport
The '5 rights' of medication administration
Verify infusion rate

Medication concentration will not exceed 100 Units/cc of IV fluid (25,000 Units/250 ml or 50,000 Units/500 ml). INFUSION RATES MAY NOT EXCEED 1600 Units/hr.

Required during transport:

Continuous ECG, SPo2, required with vital signs being obtained every 15 minutes. IV site examined for infiltration at a minimum of every 15 minutes throughout the duration of the transfer.

A second IV site for other medications/fluids is preferred to be started prior to transport.

If Paramedic feels that level of care is out of his/her ability to safely transport, they may refuse transfer.

Infusion rate must remain constant during transport with no regulation being preformed except for discontinuation of the infusion per physician order (as in bleeding complication)

If medication administration is interrupted (infiltration, accidental disconnection, malfunctioning pump, etc.), the paramedic may restart the line and continue as delineated in the transfer orders.

If a pump failure occurs and cannot be corrected, the paramedic is to discontinue infusion and **consult physician**.