THE ELEPHANT IN THE ROOM

Dhari Alrashed1, Eoin Fogarty FRCEM FACEM2,3*

1 Department of Anaesthesia, Cork University Hospital, Ireland, 2 Emergency Department, Cork University Hospital, Ireland, 3 Emergency Innovation Research Network (EIRN), Cork University Hospital, Ireland.
*eoinmfogarty@yahoo.com

Introduction

Packaging is an important part of transfer medicine.(1) Appropriate packaging in a “layered” manner is widely accepted as a safer way to move patients who may have various cables or tubes attached.(2)

In our practice we use modified ventilator airway tubing, approximately 0.5 metres in length with a slit down the longitudinal axis to contain these cables and/or tubes (Figure 1).

This tubing has become colloquially known as “Elephant tubing”. This tubing is typically used to contain ECG wires and medication giving sets.

The oxygen saturation probe wires and one intravenous access is typically left out during the transfer process in order to be able to access same (Figure 2).

---

Figure 1. Close up view of “elephant tubing”
Acknowledgments
The authors would like to thank Ms. Anna Marie Murphy, National Adult Retrieval Coordinator, Mobile Intensive Care Ambulance Service, National Transport Medicine Program, and Dr. Jason van der Velde, Emergency and Prehospital clinician, Clinical Lead MEDICO, for their work as authors of MICAS/NTMP Standard Operating Procedure 'Packaging the critically ill Patient' and education programme for 'Inter hospital retrieval / transfer'.

References

Figure 2. Demonstrated placement of “elephant tubing” during transfer.