



# EMS System for Metropolitan Oklahoma City and Tulsa 2017 Medical Control Board Treatment Protocols



Approved 3/8/17, Effective 5/1/17, replaces all prior versions

## 12E – CYANIDE ADULT & PEDIATRIC

**TREATMENT PRIORITIES**

1. Personal safety
2. Patient safety
3. Cardiac arrest resuscitation (if applicable)
4. Oxygenation/Ventilation
5. Hydroxocobalamin administration
  - Enclosed space?
  - Soot in mouth/nose?
  - Altered mental status?

**EMD**

DIRECT TO MOVE AWAY FROM SUSPECTED SOURCE  
IF SAFE TO DO SO  
CPR BY EMD INSTRUCTION (if applicable)  
IF AWAKE, AVOID PHYSICAL EXERTION  
OR ENVIRONMENTAL STRESS (TEMP EXTREMES).

**EMERGENCY MEDICAL DISPATCHER**

**EMERGENCY MEDICAL RESPONDER**

**EMT**

**EMT-INTERMEDIATE 85**

**ADVANCED EMT**

**PARAMEDIC**

EMR	EMT
MAINTAIN PERSONAL & PATIENT SAFETY RESUSCITATION PER SECTION 4 (CARDIAC ARREST) PROTOCOLS (if applicable) GENERAL SUPPORTIVE CARE OBTAIN VITAL SIGNS O <sub>2</sub> HIGH LITER PER MINUTE FLOW (15 LPM +) VIA NRB, OR BVM AS APPROPRIATE APPLY CARDIAC MONITOR (if equipped)	
<b>EMT OR HIGHER LICENSE:</b> MEASURE END-TIDAL CO <sub>2</sub> & MONITOR WAVEFORM CAPNOGRAPHY (if equipped) <b>ADULT:</b> APPLY Bi/CPAP IF INDICATED (if equipped)	
PLACE SUPRAGLOTTIC AIRWAY IF INDICATED & ONLY IF BVM VENTILATIONS INEFFECTIVE	

EMT-I85	AEMT
<b>ADULT:</b> INTUBATE IF INDICATED IV/IO ACCESS – START TWO LINES <b>ADULT:</b> IV NS TKO IF SYS BP ≥ 100 mmHg WITHOUT HYPOTENSIVE SYMPTOMS <b>ADULT:</b> IV NS 250 mL BOLUS IF SYS BP <100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA, <b>ADULT:</b> REPEAT UP TO 2 LITERS NS IF SYS BP REMAINS < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA <b>PEDIATRIC:</b> IV NS TKO IF SYS BP ≥ (70 + 2x age in years) mmHg <b>PEDIATRIC:</b> IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg IF NO SIGNS OF PULMONARY EDEMA	
<b>AEMT or HIGHER LICENSE:</b> <b>ADULT:</b> HYDROXOCOBALAMIN 5 grams IVPB IN 15 MINS – ADMINISTER WITHOUT DELAY FOR HYDROXOCOBALAMIN, USE SEPARATE LINE FROM ALL OTHER MEDICATIONS <b>PEDIATRIC:</b> CONSULT OLMC FOR DIRECTIVES ON HYDROXOCOBALAMIN ADMINISTRATION (RECOMMENDED DOSE AT 70 mg/kg IVPB)	

**PARAMEDIC**

**ADULT:** MEDICATION ASSISTED INTUBATION IF INDICATED  
 CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)