

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



**EMS S**ECTION

Approved 11/9/16, Effective 2/1/17, replaces all prior versions 13D - COMPLICATIONS OF PREGNANCY **EMERGENCY MEDICAL ADULT DISPATCHER EMERGENCY MEDICAL** RESPONDER TREATMENT PRIORITIES **EMD EMT EMT-INTERMEDIATE 85** 2. Dextrose for hypoglycemia ADVISE TO AVOID PHYSICAL EXERTION 3. Magnesium for eclampsia OR ENVIRONMENTAL STRESS (TEMP EXTREMES). **ADVANCED EMT PARAMEDIC EMR EMT** GENERAL SUPPORTIVE CARE **OBTAIN VITAL SIGNS** O2 VIA NC or NRB AS INDICATED APPLY CARDIAC MONITOR/OBTAIN 12-LEAD ECG (if equipped) TRANSMIT 12-LEAD ECG TO RECEIVING EMERGENCY DEPARTMENT DETERMINE BLOOD GLUCOSE HYPOGLYCEMIA CARE: IF GLUCOSE <50 mg/dL, 1 tube ORAL GLUCOSE (15 grams) PO **EMT-185 AEMT** IV ACCESS HYPOGLYCEMIA CARE: IF GLUCOSE <50 mg/dL, D50 1 mL/kg IVP UP TO 50 mL  $\,$ GLUCAGON 1 mg IM IF NO VASCULAR ACCESS OBTAINED **PARAMEDIC** ECLAMPSIA: MAGNESIUM SULFATE 1 gram IVP/IOP MAY REPEAT EVERY 2-3 MINUTES UNTIL SEIZURE ABATES MAXIMUM CUMULATIVE DOSE IS 4 grams