

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





Approved 11/9/16, Effective 2/1/17, replaces all prior versions

3F – DYSPNEA – BRIEF RESOLVE UNEXPLAINED EVENT (BRUE) PEDIATRIC LESS THAN 1 YEAR OF AGE

EMERGENCY MEDICAL TREATMENT PRIORITIES **DISPATCHER EMD EMERGENCY MEDICAL** 1. Vital signs **RESPONDER** (including EtCO2, if equipped) 2. Oxygenation support KEEP PATIENT FREE FROM INJURY HAZARDS O₂ by NC, NRB AVOID PLACING ANYTHING IN MOUTH **EMT** BVM if indicated PLACE IN POSITION OF RESPIRATORY COMFORT 3. Ventilation support **EMT-INTERMEDIATE 85** BVM if indicated 4. Transport for further evaluation ADVANCED EMT **PARAMEDIC EMR EMT** GENERAL SUPPORTIVE CARE **OBTAIN VITAL SIGNS** O2 VIA NC, NRB, OR BVM AS APPROPRIATE HISTORY TO DEFINE IF BRUE - CYANOSIS? CHANGE IN BREATHING? MOTOR TONE LOSS OR STIFFNESS? ALTERED MENTAL STATUS? NO OTHER EXPLANATION FOR SYMPTOMS? DOES BRUE = LOW RISK? - SINGLE EVENT TODAY? EVENT LESS THAN 1 MINUTE? NO PRIOR EVENT? GESTATIONAL AGE AT BIRTH >32 WEEKS? AGE NOW > 2 MOS? NO CPR GIVEN? NORMAL EXAM? DOES BRUE = HIGH RISK? - "NO" TO A LOW RISK ITEM ABOVE? FAM HX OF SUDDEN CARDIAC DEATH? SOCIAL ENVIRONMENT CONCERNING FOR POSSIBLE CHILD ABUSE? ***OLMCP CONSULT REQUIRED IF PARENT/GUARDIAN REFUSAL OF TRANSPORT IF BRUE = HIGH RISK APPLY CARDIAC MONITOR (if equipped) **EMT OR HIGHER LICENSE:** MEASURE END-TIDAL CO₂ & MONITOR WAVEFORM CAPNOGRAPHY (if equipped) **EMT-185 AEMT** IV ACCESS IF INDICATED IV NS TKO IF SYS BP \geq (70 + 2x age in years) mmHg IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg IF NO SIGNS OF PULMONARY EDEMA **PARAMEDIC** CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)