



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

3J – NEBULIZATION THERAPY ADULT & PEDIATRIC

EMERGENCY MEDICAL RESPONDER
EMT
EMT-INTERMEDIATE 85
ADVANCED EMT
PARAMEDIC

EMR may only assist with patient's own nebulizer

Indications:

1. Dyspnea – Uncertain Etiology
2. Dyspnea – Asthma
3. Dyspnea – Chronic Obstructive Pulmonary Disease (COPD)
4. Acute Allergic Reactions
5. Bronchospasm from toxic inhalations

Contraindications:

1. Non-bronchospastic respiratory distress (eg. clear presentation of CHF)

Technique:

- A. Assemble nebulization device.
 - B. Fill nebulization chamber with medication to be nebulized.
 - C. Initiate 6-10 lpm O₂ flow if using hand-held nebulization device or via face mask.
 - D. Place nebulization chamber “in-line” with respiratory circuit if using nebulization via Bi/CPAP, supraglottic airway or endotracheal tube. Use continuing pre-nebulization lpm flow of O₂ to deliver nebulized medication through the respiratory circuit.
- Repeat steps B – D as patient condition indicates per applicable protocol(s).