



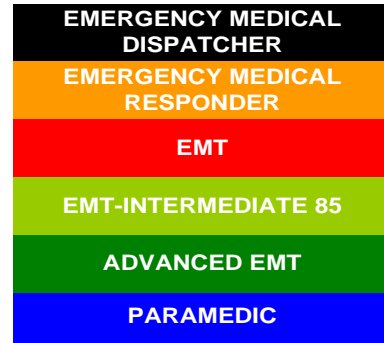
EMS System for Metropolitan Oklahoma City and Tulsa 2017 Medical Control Board Treatment Protocols



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

4I - SPECIFIC CAUSES OF CARDIAC ARREST ADULT & PEDIATRIC

- TREATMENT PRIORITIES:**
1. Circulatory support
 - Chest compression rate 80/min ResQCPR®
 - Chest compression rate 110/min
 - Appropriate compression depth & full recoil
 - Limit pauses in compressions
 - Timely defibrillation (if indicated)
 - Utilize Res-Q-Pod®
 - If hyperkalemia, calcium chloride first medication
 2. Oxygenation/Ventilation support
 - Avoid hyperventilation in rate & volume
 - Use waveform capnography (if equipped)
- **Mandatory use if patient intubated



EMR	EMT
<p>FIND POSSIBLE CAUSES OF CARDIOPULMONARY ARREST & TREAT WHERE APPROPRIATE:</p> <p>HYPOXIA – OXYGENATION/VENTILATION WITH 100% O₂ HYPOKALEMIA – RAPID TRANSPORT PRE-EXISTING ACIDOSIS – OXYGENATION/VENTILATION WITH 100% O₂ PRE-EXISTING HYPOTHERMIA (PROLONGED COLD EXPOSURE) – REWARM PATIENT CARDIAC TAMPONADE – RAPID TRANSPORT THROMBOSIS (AMI OR PE) – RAPID TRANSPORT TRAUMA – SEE APPROPRIATE TRAUMA PROTOCOLS TOXINS/DRUG OVERDOSE – SUSPECTED NARCOTIC/OPIATE ADULT: NALOXONE 2 mg IN, MAY REPEAT ONCE PEDIATRIC: NALOXONE 0.5 mg IN, MAY REPEAT ONCE</p>	

EMT-I85	AEMT
<p>FIND POSSIBLE CAUSES OF CARDIOPULMONARY ARREST & TREAT WHERE APPROPRIATE:</p> <p>HYPOVOLEMIA ADULT: 1 LITER NS IV/IO BOLUS IF NO SIGNS OF PULMONARY EDEMA PEDIATRIC: 20 mL/kg NS IV/IO BOLUS IF NO SIGNS OF PULMONARY EDEMA HYPOGLYCEMIA ADULT & PEDIATRIC WEIGHT ≥25 kg: IF GLUCOSE <50 mg/dL D50 1 mL/kg IVP/IOP UP TO 50 mL PEDIATRIC WEIGHT <25 kg: IF GLUCOSE <50 mg/dL D25 2 mL/kg IVP/IOP UP TO 50 mL CARDIAC TAMPONADE ADULT: 500 mL NS IV/IO BOLUS IF NO SIGNS OF PULMONARY EDEMA PEDIATRIC: 10 mL/kg NS IV/IO BOLUS IF NO SIGNS OF PULMONARY EDEMA</p> <p>ADVANCED EMT OR HIGHER LICENSE: TOXINS/DRUG OVERDOSE – SUSPECTED NARCOTIC/OPIATE ADULT: NALOXONE 2 mg IVP/IOP, MAY REPEAT ONCE PEDIATRIC: NALOXONE 0.5 mg IVP/IOP, MAY REPEAT ONCE</p>	

PARAMEDIC
<p>FIND POSSIBLE CAUSES OF CARDIOPULMONARY ARREST & TREAT WHERE APPROPRIATE:</p> <p>HYPERKALEMIA – CALCIUM CHLORIDE 10 mg/kg IVP/IOP (MAX 1 gram) & SODIUM BICARBONATE 1 mEq/kg IVP/IOP (MAX 50 mEq) PRE-EXISTING ACIDOSIS - SODIUM BICARBONATE 1 mEq/kg IVP/IOP (MAX 50 mEq) TOXINS/DRUG OVERDOSE – SUSPECTED TRICYCLIC ANTIDEPRESSANT - SODIUM BICARBONATE 1 mEq/kg IVP/IOP (MAX 50 mEq) TOXINS/DRUG OVERDOSE – SUSPECTED BETA BLOCKERS ADULT: GLUCAGON 1 mg IVP/IOP PEDIATRIC: GLUCAGON 0.5 mg IVP/IOP TOXINS/DRUG OVERDOSE – SUSPECTED CALCIUM CHANNEL BLOCKERS - CALCIUM CHLORIDE 10 mg/kg IVP/IOP (MAX 1 gram) TENSION PNEUMOTHORAX – NEEDLE THORACOSTOMY (CHEST DECOMPRESSION)</p>