

## EMS System for Metropolitan Oklahoma City and Tulsa 2022 Medical Control Board Treatment Protocols





**EMT** 

DRAFT Review and Action 5/11/22, Effective 8/1/22, replaces all prior versions

## **9D - PAIN MANAGEMENT MEDICAL EMERGENCY MEDICAL** (ACUTE ONSET & CHRONIC TYPE) **DISPATCHER ADULT & PEDIATRIC** TREATMENT PRIORITIES **EMERGENCY MEDICAL** RESPONDER 1. Vital signs **EMD** 2. Opioid/Opiate analgesia as clinically appropriate per protocol ADVISE TO AVOID PHYSICAL EXERTION **EMT-INTERMEDIATE 85** OR ENVIRONMENTAL STRESS (TEMP EXTREMES). DO NOT MOVE THE PATIENT UNLESS IN DANGER DO NOT ATTEMPT TO SPLINT INJURIES **ADVANCED EMT PARAMEDIC**

**EMR EMT** 

GENERAL SUPPORTIVE CARE (MEDICAL PT) OR TRAUMA AND HYPOVOLEMIC SHOCK SUPPORTIVE CARE (TRAUMA PT) **OBTAIN VITAL SIGNS** 

O2 VIA NC, NRB, OR BVM AS APPROPRIATE APPLY CARDIAC MONITOR (when available)

## **EMT OR HIGHER LICENSE:**

MEASURE END – TIDAL CO<sub>2</sub> & MONITOR WAVEFORM CAPNOGRAPHY (if equipped, \*\* Mandatory use if pt intubated)

**AEMT EMT-185** 

**IV ACCESS** 

ADULT: IV NS TKO IF SYS BP ≥ 100 mmHg WITHOUT HYPOTENSIVE SYMPTOMS

ADULT: IV NS 250 mL BOLUS IF SYS BP < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA ADULT: REPEAT UP TO 2 LITERS NS IF SYS BP REMAINS < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA PEDIATRIC: IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg

REPEAT UP TO 60 mL/kg IF SYS BP REMAINS < (70 + 2x age in years) mmHg & NO SIGNS OF PULMONARY EDEMA

## **PARAMEDIC**

ANALGESIA (IF REQUIRED - PARAMEDIC DISCRETION, PARTICULARLY WITH CHRONIC PAIN SYMPTOMS)

FOR OPIATE USE, ADULT MUST HAVE SYS BP ≥ 100 mmHg; PEDIATRIC MUST HAVE SYS BP ≥ (70 + 2x age in years) mmHg

ADULT: FENTANYL 1 mcg/kg SLOW IVP/IM/IN, MAXIMUM DOSE 100 mcg. MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 3 mcg/kg or 250 mcg WHICHEVER IS LESSER. OR

ADULT: MORPHINE SULFATE 2 - 4 mg SLOW IVP, MAY REPEAT 2 - 4 mg EVERY 5 MINUTES TO A TOTAL OF 10 mg. OR

ADULT: HYDROMORPHONE 0.5 - 1 mg SLOW IVP, MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 2 mg.

PEDIATRIC: OLMCP ORDER ONLY

OLMCP CONSULT IF FURTHER ANALGESIA REQUIRED

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)