



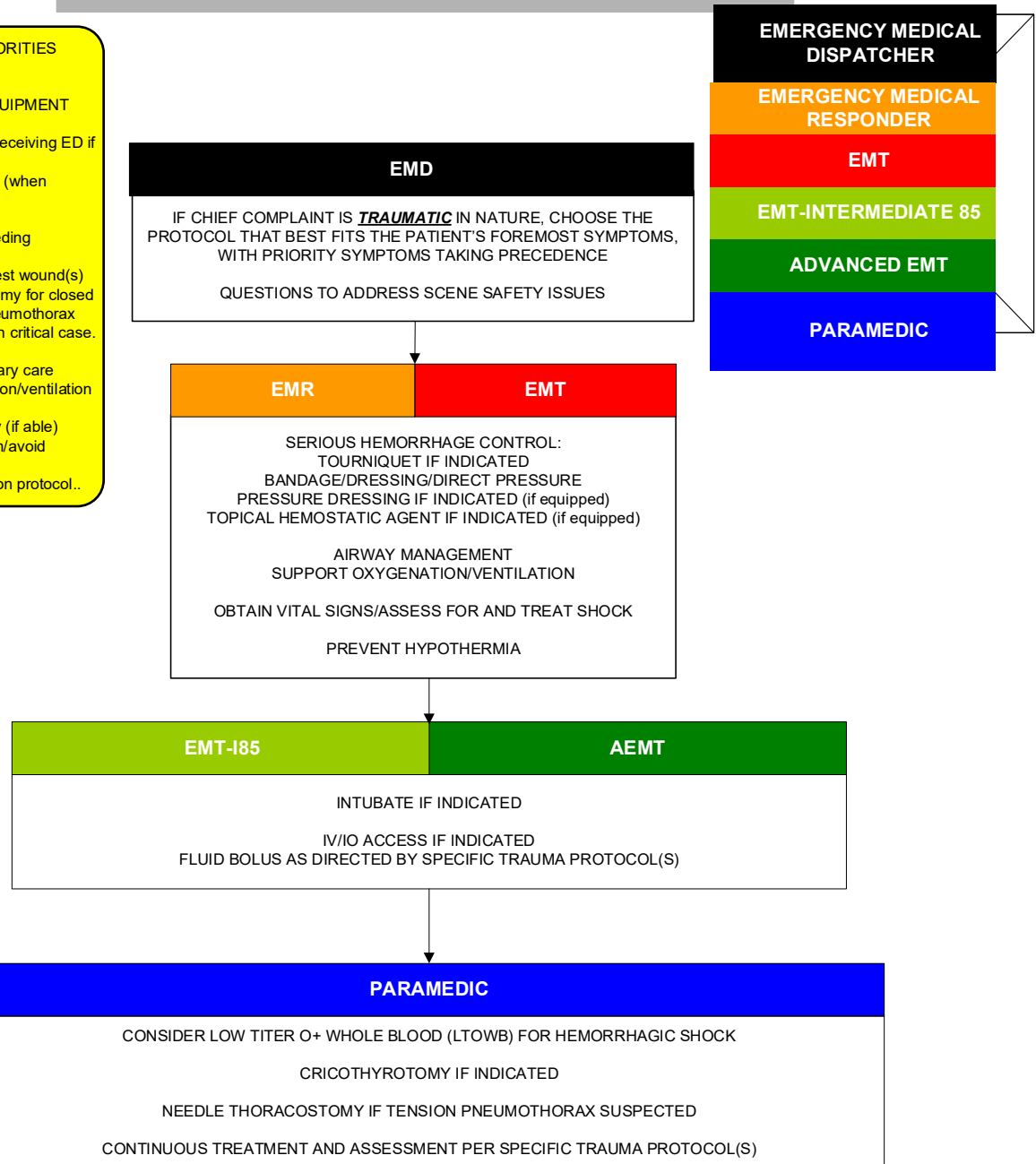
EMS System for Metropolitan Oklahoma City and Tulsa 2026 Medical Control Board Treatment Protocols



Approved 9/17/25, Effective 1/15/26, replaces all prior versions

1D - TRAUMA AND HYPOVOLEMIC SHOCK SUPPORTIVE CARE ADULT & PEDIATRIC

- TREATMENT PRIORITIES**
1. Assessment:
 - SCENE SAFETY
 - PROTECTIVE EQUIPMENT
 - Primary Survey
 - "Trauma Alert" to receiving ED if indicated
 - Secondary Survey (when appropriate)
 2. Primary Survey Care:
 - Control major bleeding
 - Open airway
 - Seal "sucking" chest wound(s)
 - Needle thoracostomy for closed chest tension pneumothorax
 3. Minimize scene time in critical case.
 4. Enroute Care:
 - Reassess all primary care
 - Support oxygenation/ventilation
 - Vascular access
 - Secondary Survey (if able)
 - Keep patient warm/avoid hypothermia
 5. Hospital per destination protocol..



1. Clinical Operational Note (All Field Provider Levels): The practice of EMS medicine is built upon the foundation of "taking medical care the patient". To achieve this objective, appropriate equipment (airway equipment kit, med/trauma equipment kit, suction device, patient packaging equipment) should be brought to the patient's side per Protocol 14J – Scene Coordination to minimize critical treatment delays.

2. Maximum pediatric medication dosing equals standard adult dosing.