

EMS System for Metropolitan Oklahoma City and Tulsa 2025 Medical Control Board Treatment Protocols



Approved 9/04/24, Effective 1/15/25, replaces all prior versions

12E - CYANIDE **ADULT & PEDIATRIC**

TREATMENT PRIORITIES

- 1. Personal safety
- 2. Patient safety
- 3. Cardiac arrest resuscitation (if applicable)
- 4. Oxygenation/Ventilation
- 5. Hydroxocobalamin administration Enclosed space? Soot in mouth/nose? Altered mental status?

EMD

DIRECT TO MOVE AWAY FROM SUSPECTED SOURCE IF SAFE TO DO SO CPR BY EMD INSTRUCTION (if applicable)

IF AWAKE, AVOID PHYSICAL EXERTION OR ENVIRONMENTAL STRESS (TEMP EXTREMES).

EMERGENCY MEDICAL DISPATCHER

EMERGENCY MEDICAL RESPONDER

EMT

EMT-INTERMEDIATE 85

ADVANCED EMT

PARAMEDIC

EMT

EMR

MAINTAIN PERSONAL & PATIENT SAFETY

RESUSCITATION PER SECTION 4 (CARDIAC ARREST) PROTOCOLS (if applicable) GENERAL SUPPORTIVE CARE OBTAIN VITAL SIGNS

O₂ HIGH LITER PER MINUTE FLOW (15 LPM +) VIA NRB, OR BVM AS APPROPRIATE APPLY CARDIAC MONITOR (if equipped)

EMT OR HIGHER LICENSE:

MEASURE END-TIDAL CO₂ & MONITOR WAVEFORM CAPNOGRAPHY (if equipped) ADULT: APPLY Bi/CPAP IF INDICATED (if equipped)

PLACE SUPRAGLOTTIC AIRWAY IF INDICATED & ONLY IF BVM VENTILATIONS INEFFECTIVE

EMT-185 AEMT

ADULT: INTUBATE IF INDICATED

IV/IO ACCESS - START TWO LINES

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 TKO IF SYS BP ≥ (70 + 2x age in years) mmHg
PEDIATRIC: IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg IF NO SIGNS OF PULMONARY EDEMA

AEMT or HIGHER LICENSE:

FOR HYDROXOCOBALAMIN, USE SEPARATE LINE FROM ALL OTHER MEDICATIONS ADULT: HYDROXOCOBALAMIN 5 grams IVPB IN 15 MINS - ADMINISTER WITHOUT DELAY

PEDIATRIC: HYDROXOCOBALAMIN 70 mg/kg IVPB TO A MAX OF 5 grams IN 15 MINS - ADMINISTER WITHOUT DELAY

PARAMEDIC

ADULT: MEDICATION ASSISTED INTUBATION IF INDICATED CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)