



## 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

### 13D – COMPLICATIONS OF PREGNANCY ADULT & PEDIATRIC

#### TREATMENT PRIORITIES

1. Vital Signs
2. Dextrose for hypoglycemia
3. Magnesium for eclampsia

#### EMD

ADVISE TO AVOID PHYSICAL EXERTION  
OR ENVIRONMENTAL STRESS (TEMP EXTREMES).

EMERGENCY MEDICAL  
DISPATCHER

EMERGENCY MEDICAL  
RESPONDER

EMT

EMT-INTERMEDIATE 85

ADVANCED EMT

PARAMEDIC

EMR

EMT

GENERAL SUPPORTIVE CARE  
OBTAIN VITAL SIGNS  
O<sub>2</sub> VIA NC or NRB AS INDICATED  
APPLY CARDIAC MONITOR/OBTAIN 12-LEAD ECG (if equipped)  
TRANSMIT 12-LEAD ECG TO RECEIVING EMERGENCY DEPARTMENT

DETERMINE BLOOD GLUCOSE  
**HYPOGLYCEMIA CARE:**  
IF GLUCOSE <50 mg/dL, 1 tube ORAL GLUCOSE (15 grams) PO

EMT-I85

AEMT

IV ACCESS  
**HYPOGLYCEMIA** (GLUCOSE <50 mg/dL)  
D10 I/PB WIDE OPEN UP TO 250 mL OR  
D25 IV/IO UP TO 100 mL OR D50 IV/IO UP TO 50 mL  
IF NO VASCULAR ACCESS OBTAINED & IF IO SEEMS EXCESSIVE TO CLINICAL STATUS:  
GLUCAGON: 1mg IM  
REPEAT DETERMINATION OF BLOOD GLUCOSE POST-HYPOGLYCEMIA TREATMENT

PARAMEDIC

**ECLAMPSIA:** MAGNESIUM SULFATE 1 gram IVP/IOP/IM  
MAY REPEAT EVERY 2-3 MINUTES UNTIL SEIZURE ABATES  
MAXIMUM CUMULATIVE DOSE IS 4 grams