

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



W ENIS SECTION

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

13E - PELVIC PAIN **ADULT & PEDIATRIC EMERGENCY MEDICAL DISPATCHER EMERGENCY MEDICAL EMD RESPONDER** TREATMENT PRIORITIES Supportive care **EMT** ADVISE TO REST IN COMFORTABLE POSITION 2. IVF if needed for hypotension ADVISE NO FOOD OR DRINK ADVISE TO AVOID MOVEMENT UNLESS NECESSARY **EMT-INTERMEDIATE 85 ADVANCED EMT PARAMEDIC EMR EMT** GENERAL SUPPORTIVE CARE **OBTAIN VITAL SIGNS** O2 VIA NC OR NRB, AS APPROPRIATE REPORT ANY CONCERNS/SUSPICIONS OF SEXUAL ASSAULT TO RECEIVING FACILITY PERSONNEL NAUSEA/VOMITING ADULT/PEDIATRIC: ISOPROPYL ALCOHOL PADS HELD 1 TO 2 CM BELOW THE NARES (MAX 3 PADS EVERY 15 MINUTES)

EMT-185 AEMT

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 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 & NO SIGNS OF PULMONARY EDEMA

PARAMEDIC

ANTIEMETIC (IF ACTIVELY VOMITING)

ADULT: ONDANSETRON 4 mg IVP/ODT. MAY REPEAT ONCE IN 10 MINUTES

PEDIATRIC: ONDANSETRON 0.1 mg/kg IVP TO A MAXIMUM SINGLE DOSE OF 4 mg
IF AGE >2 years, MAY GIVE ONDANSETRON 4 mg ODT

ANALGESIA (IF REQUIRED)

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

 $\begin{array}{c} \textbf{ADULT:} \ \ \text{HYDROMORPHONE 0.5-1 mg SLOW IVP} \\ \text{MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 2 mg.} \end{array} .$

PEDIATRIC: OLMCP ORDER ONLY

OLMCP CONSULT IF FURTHER ANALGESIA REQUIRED

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)