



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

3B – DYSPNEA – UNCERTAIN ETIOLOGY ADULT & PEDIATRIC

TREATMENT PRIORITIES

- Vital signs (including EtCO₂, if equipped)
- Oxygenation support
 - > O₂ by NC, NRB
 - > BVM, Bi/CPAP, ETT if indicated
- Ventilation support
 - > BVM, Bi/CPAP, ETT if indicated
- Nebulization therapy
 - > Albuterol

EMD

ADVISE TO AVOID PHYSICAL EXERTION OR ENVIRONMENTAL STRESS (TEMP EXTREMES).
ADVISE PT SELF-ADMINISTRATION OF MEDICATIONS (eg. ALBUTEROL INHALER)
IF PREVIOUSLY PRESCRIBED FOR SIMILAR SYMPTOMS

EMERGENCY MEDICAL DISPATCHER

EMERGENCY MEDICAL RESPONDER

EMT

EMT-INTERMEDIATE 85

ADVANCED EMT

PARAMEDIC

EMR	EMT
GENERAL SUPPORTIVE CARE OBTAIN VITAL SIGNS O ₂ VIA NC, NRB, OR BVM AS APPROPRIATE APPLY CARDIAC MONITOR (if equipped) ADULT: OBTAIN 12-LEAD ECG & TRANSMIT TO RECEIVING EMERGENCY DEPARTMENT (if equipped) ASSIST PT WITH PT'S OWN ALBUTEROL INHALER/NEBULIZER (when applicable) EMT OR HIGHER LICENSE: MEASURE END-TIDAL CO ₂ & MONITOR WAVEFORM CAPNOGRAPHY (if equipped) ADULT: APPLY Bi/CPAP IF INDICATED (if equipped) ADULT & PEDIATRIC WEIGHT ≥ 15 kg: NEBULIZED ALBUTEROL 5 mg OR LEVALBUTEROL 2.5 mg PEDIATRIC WEIGHT < 15 kg: NEBULIZED ALBUTEROL 2.5 mg OR LEVALBUTEROL 1.25 mg MAY REPEAT ALBUTEROL OR LEVALBUTEROL ENROUTE X 1 AS NEEDED PLACE SUPRAGLOTTIC AIRWAY IF INDICATED & ONLY IF BVM VENTILATIONS INEFFECTIVE	

EMT-I85	AEMT
ADULT: INTUBATE IF INDICATED PER APPLICABLE PROTOCOLS 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 IF NO SIGNS OF PULMONARY EDEMA	

PARAMEDIC

ADULT: MEDICATION-ASSISTED INTUBATION IF INDICATED PER PROTOCOL 2G
CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)