



EMS System for Metropolitan Oklahoma City and Tulsa 2024 Medical Control Board Treatment Protocols



Approved 11/08/23, Effective 1/15/24, replaces all prior versions

TREATMENT PRIORITIES

1. Assess scene safety
2. Safety of self
3. Safety of public safety professionals
4. Safety of patient
5. Treat Hyperactive Delirium with severe agitation

7C – CHEMICAL RESTRAINT ADULT & PEDIATRIC

EMERGENCY MEDICAL DISPATCHER
EMERGENCY MEDICAL RESPONDER
EMT
EMT-INTERMEDIATE 85
ADVANCED EMT
PARAMEDIC

EMR	EMT
<p>ASSIST IN PHYSICAL CONTROL OF PATIENT FOR PARAMEDIC TO ADMINISTER CHEMICAL RESTRAINT</p> <p>USE ADEQUATE NUMBERS OF PUBLIC SAFETY PROFESSIONALS TO MINIMIZE RISK OF INJURY TO SELF AND OTHERS</p> <p>UNLESS UNSAFE TO DO SO, PERFORM THE FOLLOWING POST- CHEMICAL RESTRAINT: GENERAL SUPPORTIVE CARE – DO NOT LEAVE PATIENT ALONE</p> <p style="margin-left: 40px;">OBTAIN VITAL SIGNS</p> <p style="margin-left: 40px;">O₂ VIA NC or NRB AS APPROPRIATE</p> <p style="margin-left: 40px;">APPLY CARDIAC MONITOR (if equipped)</p> <p style="color: red; text-align: center;">EMT OR HIGHER LICENSE:</p> <p>MEASURE END-TIDAL CO₂ & MONITOR WAVEFORM CAPNOGRAPHY (if equipped, **Mandatory use if pt intubated))</p>	

EMT-I85	AEMT
<p>IV ACCESS IF PT TEMPORARILY COOPERATIVE</p> <p>DO NOT RISK SELF INJURY WITH NEEDLESTICK IN IV ACCESS IF PT COMBATIVE</p>	

PARAMEDIC
<p>CHEMICAL RESTRAINT:</p> <p>ALL PATIENTS REQUIRING CHEMICAL RESTRAINT ARE TO BE PHYSICALLY RESSTRAINED AS WELL</p> <p>ADULT: MIDAZOLAM 0.1 mg/kg IM/IVP/IN/IOP TO MAX OF 5 mg. MAY REPEAT ONCE.</p> <p style="text-align: center;">OR</p> <p>ADULT: DIAZEPAM 5 mg IVP/IOP or 10 mg IM IF MIDAZOLAM NOT AVAILABLE. MAY REPEAT ONCE.</p> <p style="text-align: center;">OR</p> <p>ADULT: LORAZEPAM 2 mg IVP/IOP/IM IF MIDAZOLAM NOT AVAILABLE. MAY REPEAT ONCE. (MIDAZOLAM STRONGLY PREFERRED DUE TO MOST RAPID ONSET OF ACTION OF BENZODIAZEPINE OPTIONS)</p> <p style="text-align: center;">PLUS.</p> <p>ADULT: HALOPERIDOL 5 mg IM</p> <p>PEDIATRIC: MIDAZOLAM 0.1 mg/kg IM/IVP/IN/IOP TO MAX OF 5 mg.</p> <p style="text-align: center;">OR</p> <p>PEDIATRIC: DIAZEPAM 0.1 mg/kg TO MAX OF 5 mg IVP/IOP/IM FOR ACTIVE SEIZURE IF MIDAZOLAM NOT AVAILABLE.</p> <p style="text-align: center;">OR</p> <p>PEDIATRIC: LORAZEPAM 0.1 mg/kg TO MAX OF 2 mg IVP/IOP/IM FOR ACTIVE SEIZURE IF MIDAZOLAM NOT AVAILABLE.</p> <p>CONSULT OLMCP IF UNCERTAIN OF ETIOLOGY AND TREATMENT PLAN FOR PSYCHIATRIC PROBLEM OR IF ADDITIONAL CHEMICAL RESTRAINT MEASURES NEEDED</p> <p>CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)</p>