

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



EMS Section

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

10P - BLAST INJURY

TREATMENT PRIORITIES ADULT & PEDIATRIC

- 1. SAFETY, SAFETY, SAFETY
- 2. Hemorrhage control
- 3. Assessment/Care for lifethreatening injuries/shock
- 4. Vital signs
- 5. Analgesia (if required)
- 6. Appropriate trauma care destination selection

EMD

OBTAIN AVAILABLE SCENE HAZARD INFORMATION
FOR RESPONDER SAFETY
DO NOT MOVE PATIENTS UNLESS IN DANGER
STABILIZE HEAD AND NECK IN POSITION FOUND
OPEN AIRWAY IF NOT ALERT & INEFFECTIVE BREATHING
CONTROL BLEEDING BY DIRECT PRESSURE

EMERGENCY MEDICAL DISPATCHER EMERGENCY MEDICAL RESPONDER

EMT

EMT-INTERMEDIATE 85

ADVANCED EMT

PARAMEDIC

EMR EMT

SCENE SAFETY CONSIDERATIONS – FLAMMABLE ENVIRONMENT? TERRORISM CAUSE – SECONDARY DEVICES?

MASS CASUALTY INCIDENT MANAGEMENT/TRAUMA AND HYPOVOLEMIC SHOCK SUPPORTIVE CARE

EXPECT HEARING DIFFICULTY/DEAFNESS IN PATIENTS DUE TO PRIMARY BLAST INJURY OF RUPTURED EAR TYMPANUM

APPLY TOURNIQUET FOR HEMORRHAGE UNCONTROLLED BY DIRECT PRESSURE PER PROTOCOL 10H - TOURNIQUET

OBTAIN VITAL SIGNS

O₂ VIA NC, NRB AS APPROPRIATE

SPLINT SUSPECTED FRACTURES INCLUDING JOINT ABOVE AND BELOW AREA OF INJURY COVER AMPUTATED ANATOMY WITH SALINE-MOISTENED GAUZE

PLACE AMPUTATED ANATOMY IN A CLEAN PLASTIC BAG
PLACE AMPUTATED ANATOMY OVER ICE, AVOIDING DIRECT CONTACT OF AMPUTATED ANATOMY WITH ICE
STABILIZE IMPALED OBJECTS

APPLY CARDIAC MONITOR (if equipped)

EMT-I85

AEMT

IV ACCESS (IO IF INDICATED)

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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 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg & NO SIGNS OF PULMONARY EDEMA

PEDIATRIC: REPEAT UP TO 60 mL/kg IF SYS BP REMAINS < (70 + 2x age in years) mmHg & NO SIGNS OF PULMONARY EDEMA

PARAMEDIC

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

ADULT: HYDROMORPHONE 0.5 - 1 mg SLOW IVP, MAY REPEAT EVERY 10 MINUTES TO MAXIMUM CUMULATIVE DOSE OF 2 mg.

PEDIATRIC: OLMCP ORDER ONLY

OLMCP CONSULT IF FURTHER ANALGESIA REQUIRED

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)