GENERAL INJURY AND TRAUMA - ADULT/ADOLESCENT

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Revised: 11/2012

## **ALS STANDING ORDERS:**

## **AIRBAG DEPLOYMENT:**

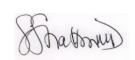
- 1. For eye irritation, brush off any powder around upper face and irrigate copiously with water.
  - →Ask patient if wearing contact lenses and if yes, ask patient to remove lenses if still in place.
- 2. Pulse oximetry; if oxygen saturation less than 95% give:
  - ► High-flow oxygen by mask as tolerated.
- 3. For respiratory distress with wheezes, administer *albuterol*:
  - ▶ Albuterol, Continuous nebulization of 6.0 mL (5 mg) concentration as tolerated.
- 4. Make base contact for any patient who meets Trauma Triage Criteria (OCEMS Policy # 310.30)
- 5. Transport to nearest appropriate PRC (ALS escort if Albuterol required for stabilization).

#### **EXTERNAL BLEEDING / HEMORRHAGE:**

- 1. Apply direct pressure to bleeding site to control blood loss
  - Use of a tourniquet is appropriate when upper or lower extremity hemorrhage cannot be controlled by applying direct pressure to the site of bleeding.
  - Make base contact for any patient who meets Trauma Triage Criteria (OCEMS Policy # 310.30).
- 2. Pulse oximetry; if oxygen saturation less than 95% give:
  - ► High-flow oxygen by mask as tolerated.
- 3. IV access if hypotensive or per paramedic judgment, do not delay transport to establish IVs.
  - ▶ 250 mL Normal Saline IV, continue Normal Saline as a wide open infusion to attain or maintain perfusion.
- 4. ALS escort to nearest appropriate PRC if hypotensive or normal saline infusion required for stabilization.

#### **EYE INJURY:**

- 1. Cover injured eye without applying pressure to the globe.
- 2. Elevate head 30 degrees or more if spinal immobilization is not required.
- 3. *Morphine sulfate* as needed for pain, if BP greater than 90 systolic:
  - ▶ Morphine sulfate 5 mg (or 4 mg carpuject) IV, may repeat once to control pain
- 4. For nausea or vomiting give *Ondansetron (Zofran™)*:
  - ▶ Ondansetron (Zofran™) two 4 mg ODT (tablets) to dissolve orally



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5. Transport to nearest appropriate PRC (ALS escort if medications required).

## **ISOLATED EXTREMITY TRAUMA (Fractures or Amputations) NOT MEETING TRAUMA TRIAGE CRITERIA:**

- 1. Splint or immobilize fractured extremities (note any breaks of skin or open wounds).
- 2. May place cold packs over splinted fracture sites for comfort.
- 3. Morphine sulfate as needed for pain, if BP greater than 90 systolic:
  - ► Morphine sulfate 5 mg (or 4 mg carpuject) IV, may repeat once to control pain
- 4. Transport to nearest appropriate PRC (ALS escort if morphine given).

## IMPALED OBJECTS NOT MEETING TRAUMA TRIAGE CRITERIA:

- 1. Stabilize impaled object in place when possible unless this causes a delay in extrication or transport.
- 2. Remove impaled objects in face or neck ONLY if ventilation is compromised.
- 3. *Morphine sulfate* as needed for pain, if BP greater than 90 systolic:
  - ► Morphine sulfate 5 mg (or 4 mg carpuject) IV, may repeat once to control pain
- 4. Transport to nearest appropriate PRC (ALS escort if morphine given).

#### **GUIDELINES:**

#### **GENERAL:**

- When transporting women on a backboard who are estimated to be 20 weeks or more gestation (2<sup>nd</sup> and 3<sup>rd</sup> trimester) tilt the backboard to the patient's left to maintain a modified left-lateral position.
- Base contact is required for any patient meeting Trauma Triage Criteria (OCEMS Policy # 310.30)

#### AIRBAG DEPLOYMENT:

- Watch for side airbag or secondary airbag deployment.
- Consider potential for eye injuries, blunt force trauma chest injuries.

# ISOLATED SKELETAL TRAUMA (Fractures or Amputations) NOT MEETING TRAUMA TRIAGE CRITERIA:

• For extremity fractures, always note presence or absence of peripheral pulses and sensation.