ADULT SKILLS

**Cardioversion – Synchronized** (after x3 BHPO)
Unconscious SVT
Unstable VT
Unconscious Atrial Fibrillation/Atrial Flutter with HR ≥180

**Chest Seal**
Occlusive dressing designed for treating open chest wound

**Continuous Positive Airway Pressure**
Age ≥15 years
Respiratory distress: CHF, COPD, asthma, pneumonia, or drowning
Moderate to severe respiratory distress. Retractions/accessory muscle use AND
RR ≥25/min OR SpO₂ <94%

**Defibrillation**
VT (pulseless) / VF
Repeat prn

**External cardiac pacemaker**
Unstable narrow complex bradycardia with pulse, refractory to atropine
Wide complex bradycardia

**Glucose Monitoring**
Hypoglycemia (suspected)
Hyperglycemia (suspected)

**Hemostatic Gauze**
Life-threatening hemorrhage in the trauma patient when tourniquet cannot be used or to
supplement tourniquet

**Indwelling Devices**
Use pre-existing external indwelling vascular access devices as primary vascular access if
needed for definitive therapy

**Intraosseous Infusion**
Fluid/medication administration in acute status patient when needed for definitive therapy and
unable to establish venous access

**Intubate (ET/Stomal/ETAD/Perilaryngeal)**
Apnea or ineffective respirations for unconscious adult patient or decreasing LOC
**Magill Forceps with direct Laryngoscopy**
Airway obstruction from foreign body with decreasing LOC or unconscious

**Nasogastric/Orogastric Tube Insertion**
Gastric distention interfering with ventilation

**Needle Thoracostomy**
Severe respiratory distress with unilateral, diminished breath sounds and systolic BP <90

**Re-alignment of Fracture**
Grossly angulated long bone fracture with gentle unidirectional traction if necessary for splinting

**Tourniquet**
Apply tourniquet in severely injured extremity when direct pressure or pressure dressing fails to control life-threatening hemorrhage. (Attempt to control life-threatening hemorrhage with direct pressure or pressure dressing not required prior to tourniquet application in a mass casualty.)

**Valsalva Maneuver**
SVT
<table>
<thead>
<tr>
<th>MEDICATION</th>
<th>DOSAGE / ROUTE / INDICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetaminophen</td>
<td>For treatment of pain as needed</td>
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</table>
| Albuterol        | Burns (respiratory distress with bronchospasm)  
                   Respiratory distress ?non-cardiac  
                   Allergic reaction in presence of respiratory distress  
                   Suspected hyperkalemia in the symptomatic patient (widened QRS complex and peaked T-waves)                                                                  |
| Amiodarone       | Stable Ventricular Tachycardia (VT)  
                   Reported/witnessed ≥ x2 AICD firing, or ≥1 AED shock delivered                                                                                                                                                      |
| ASA              | Discomfort/Pain of suspected cardiac origin or discomfort/pain relieved with NTG SL (prior to arrival or EMS administered)                                                                                                 |
| Atropine         | Unstable Bradycardia  
                   Organophosphate poisoning                                                                                                                                                                                                  |
| Atrovent         | Respiratory distress ?non-cardiac  
                   Allergic reaction in presence of respiratory distress                                                                                                                                                                    |
| CaCl₂            | Symptomatic patient with suspected hyperkalemia (widened QRS complex or peaked T-waves)                                                                                                                                       |
| Charcoal         | Oral ingestion of poison or overdose if ingestion within one hour for uncomplicated ingestion of drug on the following list: Acetaminophen, colchicine, beta blockers, calcium channel blockers, salicylates, valproate, oral anticoagulants (including anticoag rodenticides), paraquat, amanita mushrooms (if not vomiting) |
| D₅₀              | Hypoglycemia  
                   Symptomatic patient with Altered LOC unresponsive to oral glucose agents                                                                                                                                               |
| Diphenhydramine  | Extrapyramidal reactions  
                   Allergic reaction/anaphylaxis                                                                                                                                                                                              |
<p>|                     (Benadryl) |                                                                                                                                                                                                                           |
| Epinephrine 1:10,000 | Cardiac arrest                                                                                                                                                                                                              |</p>
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| Epinephrine 1:1,000 | Allergic reaction:  
Acute (facial/oral angioedema, bronchospasm or wheezing)  
Anaphylaxis (shock or cyanosis)  
?Respiratory Distress (?non-cardiac), consider if severe or inadequate response to Albuterol/Atrovent and if no known cardiac history, history of hypertension, or BP <150 or <40 yrs and history of asthma |
| Fentanyl Citrate | For treatment of pain as needed with systolic BP ≥100  
Discomfort/pain of suspected cardiac origin where systolic BP ≥100 |
| Glucagon        | Symptomatic patient with altered LOC with blood glucose of <60, unresponsive to oral glucose agents or if no IV |
| Ketamine        | For treatment of pain in the adult patient for traumatic injury, burns, or envenomation, with systolic blood pressure ≥ 100 |
| Lidocaine       | Stable VT  
Reported/witnessed ≥ x2 AICD firing, or ≥1 AED shock delivered |
| Midazolam (Versed) | Generalized seizure lasting ≥5 minutes  
Recurrent tonic-clonic seizure without lucid interval  
Eclamptic seizure  
Pre-cardioversion for conscious VT  
Excited Delirium  
Combative patient  
Discomfort associated with pacing  
Conscious VT prior to synchronized cardioversion |
| Morphine        | For treatment of pain as needed with systolic BP ≥100  
Discomfort/pain of suspected cardiac origin where systolic BP ≥100 |
| Narcan          | Symptomatic ?opioid OD with respiratory rate <12 (use caution in opioid dependent pain management patients) to drive the respiratory rate |
| NTG             | Pain or discomfort of cardiac origin if BP ≥100  
Respiratory distress ?CHF/cardiac origin  
Fluid overload in hemodialysis patient |
### MEDICATION

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| Normal Saline                | Definitive therapy  
Crush injury with extended compression ≥2 hours of extremity or torso  
CVA: 250ml fluid bolus IV/IO with clear lungs to maintain BP ≥120  
Symptomatic ?Stimulant Intoxication  
?aortic aneurysm  
Shock: hypovolemia  
Shock: anaphylaxis, neurogenic  
Shock: ?cardiac etiology, septic  
Trauma  
Discomfort/pain of ?cardiac origin with associated shock with clear lung sounds  
Dysrhythmias with clear lung sounds  
Burns ≥20% partial thickness or ≥5% full thickness and ≥15 yo |
| Ondansetron (Zofran)         | Nausea or vomiting                                                                                                                                                                                                            |
| Sodium Bicarbonate (NaHCO3)  | Symptomatic patient with suspected hyperkalemia (widened QRS complex or peaked T-waves)  
?Tricyclic OD with cardiac effects (hypotension, heart block or widened QRS)                                                                                     |

**Note:** Maintain previously established, labeled IV solutions, medication delivery systems, and/or other treatment modalities at preset rates.