

MEDICATION	INDICATIONS	PROTOCOL	COMMENTS	CONTRAINDICATIONS
Acetaminophen	Burns Envenomation injury Trauma Pain or discomfort of ?cardiac origin Pain associated with external pacing	S-124, S-129, S-139 S-126 S-127 S-141 S-173	<u>BHPO</u> for: <ul style="list-style-type: none"> Chronic pain states Isolated head injury Acute onset severe headache Drug/ETOH intoxication Multiple trauma with GCS <15 Suspected active labor Maximum total daily dose: 4000mg in 24 hours Give over 15 minutes	Severe hepatic impairment or severe active liver disease Known hypersensitivity or allergic reaction history If known or suspected total dose exceeding 4000mg in a 24-hour period Acetaminophen IV < 2 years of age
ADENOSINE	SVT with no history of bronchospasm or COPD	S-127, S-163	BHO for patients with history of bronchospasm or COPD	Second or third degree AV block Sick Sinus Syndrome (without pacemaker)
ALBUTEROL	Respiratory distress ?Asthma/COPD/respiratory origin Allergic Reaction Burns Suspected hyperkalemia in hemodialysis patient in presence of widened QRS complex or peaked T waves	S-122, S-131, S-136, S-162, S-167 S-124, S-170	Inhalation continuous via O ₂ powered nebulizer	Avoid in croup
AMIODARONE	VT with a pulse VF/pulseless VT after 1 st shock is	S-127 S-163	Cardioversion first if unstable with severe symptoms	

COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES
 POLICY/PROCEDURE/PROTOCOL
 SUBJECT: TREATMENT PROTOCOL – ALS MEDICATION LIST

No. P-115
 Page: 2 of 4
 Date: 07/01/2018

MEDICATION	INDICATIONS	PROTOCOL	COMMENTS	CONTRAINDICATIONS
	still refractory			
ASPIRIN	Pain/discomfort of ?cardiac origin	S-126		
ATROPINE SULFATE	Unstable Bradycardia Organophosphate poisoning	S-127, S-134, S-150, S-163, S-165		Asystole
ATROVENT	Respiratory distress ?Asthma/COPD/respiratory origin Allergic reaction	S-122, S-136, S-167	Added to first dose of Albuterol via continuous O ₂ powered nebulizer	
BENADRYL (DIPHENHYDRAMINE)	Allergic reaction, acute Anaphylaxis Extrapyrmidal reaction	S-122, S-134, S-162, S-165	IV - administer slowly	
CALCIUM CHLORIDE	Suspected hyperkalemia in hemodialysis patient in presence of widened QRS complex or peaked T waves Crush injury (adult)	S-131 S-139	Give IV over 30 seconds	
CHARCOAL (no Sorbitol)	Ingestion	S-134, S-165	Poison control contact not required prior to Charcoal administration for ingestion of drugs on the following list if not vomiting: Acetaminophen, colchicine, beta blockers, calcium channel blockers, salicylates, valproate, oral anticoagulants (including anticoag rodenticides), paraquat, amanita mushrooms. Assure patient has gag reflex and	Isolated alcohol, heavy metal, caustic agents, hydrocarbons or iron ingestion

COUNTY OF SAN DIEGO EMERGENCY MEDICAL SERVICES
 POLICY/PROCEDURE/PROTOCOL
 SUBJECT: TREATMENT PROTOCOL – ALS MEDICATION LIST

No. P-115
 Page: 3 of 4
 Date: 07/01/2018

MEDICATION	INDICATIONS	PROTOCOL	COMMENTS	CONTRAINDICATIONS
			is cooperative.	
D ₅₀ (Dextrose 50%) OR D ₁₀ (Dextrose 10%) Peds	Symptomatic hypoglycemia: if BS <60 mg/dL (Neonate <45 mg/dL)	S-123, S-161	Repeat BS not indicated en route if patient improving Repeat BS must be done if patient left on scene and initial was abnormal (AMA/Release)	
DOPAMINE HYDROCHLORIDE	Shock:(anaphylactic, neurogenic) Shock: (?cardiac etiology, septic) Discomfort/Pain of ?cardiac origin with associated shock Unstable Bradycardia (after max Atropine or TCP)	S-138 S-122 S-126 S-127 S-143	Titrate to maintain systolic BP ≥90 not to exceed 120	
EPINEPHRINE	Cardiac arrest Allergic reaction Anaphylaxis Severe Respiratory distress or inadequate response to Albuterol Respiratory distress with stridor	S-127, S-163 S-122, S-162 S-136, S-167 S-170		
FENTANYL CITRATE	Burns Envenomation injury Trauma Pain or discomfort of ?cardiac origin Pain associated with external pacing	S-124, S-170 S-129, S-164 S-139, S-169 S-126 S-127 S-141 S-173	<u>BHPO</u> for: <ul style="list-style-type: none"> Chronic pain states Isolated head injury Acute onset severe headache Drug/ETOH intoxication Multiple trauma with GCS <15 Suspected active labor 	
GLUCAGON	Unable to start IV in patient with symptomatic hypoglycemia if BS <60 mg/dL (Neonate <45 mg/dL)	S-123, S-161		

MEDICATION	INDICATIONS	PROTOCOL	COMMENTS	CONTRAINDICATIONS
LIDOCAINE (XYLOCAINE)	Reported/witnessed ≥ 2 AICD firing Prior to IO fluid infusion in the conscious patient VT with a pulse VF/pulseless VT after 1 st shock is still refractory	S-127, S-163	Adult doses should be given in increments rounded to the nearest 20mg amount In the presence of shock, CHF or liver disease, the repeat bolus is recommended at 10" intervals	Second and third degree heart block and idioventricular rhythm
LIDOCAINE JELLY (2%) optional	Intubation or Nasopharyngeal airway		Apply to ET tube or nasal airway	
MORPHINE SULPHATE (MS)	Burns Envenomation injury Trauma Pain or discomfort of ?cardiac origin Pain associated with external pacing	S-124, S-170 S-129, S-164 S-139, S-169 S-173 S-126 S-127 S-141	<ul style="list-style-type: none"> • <u>BHPO</u> for:Chronic pain states • Isolated head injury • Acute onset severe headache • Drug/ETOH intoxication • Multiple trauma with GCS <15 • Suspected active labor 	
NORMAL SALINE	Definitive therapy	All	Definitive therapy defined as immediate or anticipated immediate need for administration of a fluid bolus or medications	Rales (bolus), except in sepsis (S-143)
NARCAN (NALOXONE HYDROCHLORIDE)	Symptomatic ?opioid OD	S-123, S-161 S-134, S-165	In adults, give for respiratory rate <12	

MEDICATION	INDICATIONS	PROTOCOL	COMMENTS	CONTRAINDICATIONS
NITROGLYCERINE (NTG)	Pain or discomfort of ?cardiac origin Respiratory distress ? CHF/cardiac origin Fluid overload in hemodialysis patient	S-126 S-131 S-136		Suspected intracranial bleed If any patient has taken an erectile dysfunction medication such as Viagra, Cialis, Levitra within 48 hours May encounter patients taking similar medication for pulmonary hypertension, usually Sildenafil (trade name: Revatio). The contraindication still applies.
SODIUM BICARBONATE (NaHCO ₃)	Symptomatic patient with suspected hyperkalemia (widened QRS complex or peaked T-waves) ?Tricyclic OD with cardiac effects (hypotension, heart block or widened QRS) Crush injury	S-134, S-165 S-131 S-139, S-169		
VERSED (MIDAZOLAM)	Pre cardioversion Severe Agitation External Pacemaker post capture Seizure	S-127, S-163, S-142 S-123, S-133, S-134 S-161	<u>BHPO</u> pre cardioversion for A Fib/A Flutter	
ZOFRAN (ONDANSETRON)	Nausea and/or vomiting	S-120 S-141 S-174	<u>BHPO</u> in the pediatric patient with suspected head injury	