

Drips requiring OLMC

Adult Amiodarone Drip

Dose is 0.5-1 mg/min

Step 1

Determine Concentration

Mix 90 mg (1.8 mL) of Amiodarone in 50 mL NS
(must use 60 drop set)

Step 2

Determine Rate

| | Dose in mg/min | | |
|------------------|----------------|------|----|
| | 0.5 | 0.75 | 1 |
| Drops/ minute | 17 | 25 | 33 |

* Amiodarone is stable for only 2 hours when mixed in a plastic IV bag

Adult Amiodarone Infusion

Infuse 150 mg over 10 minutes

For VT, WCT of unknown origin and pre-excited A-fib (A-fib with WPW)

Step 1

Determine Concentration

Mix 150 mg in 50 mL NS (must use 10 drop set)

Step 2

Determine Rate

Rate is drops per minute using a 10 drop set

Dose in ml/min

50 mL / 10 min

50 Drops/ minute

Adult Dopamine Infusion

Step 1

Determine concentration

Range of Infusion 5-20 mcg/kg/min
Mix 400 mg Dopamine in 250 mL NS (use 60 drop set)

Step 2

Determine Rate

Rate is drops per minute with a 60 drop set

| Weight in KG | 40 | 45 | 50 | 55 | 60 | 65 | 70 | 75 |
|--------------|----|----|----|----|----|----|----|----|
| 5 mcg | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 10 mcg | 15 | 17 | 19 | 21 | 22 | 24 | 26 | 28 |
| 15 mcg | 22 | 25 | 28 | 31 | 34 | 37 | 39 | 42 |
| 20 mcg | 30 | 34 | 38 | 41 | 45 | 49 | 52 | 56 |

| Weight in KG | 80 | 85 | 90 | 100 | 110 | 120 | 130 | 140 |
|--------------|----|----|----|-----|-----|-----|-----|-----|
| 5 mcg | 15 | 16 | 17 | 19 | 21 | 22 | 24 | 26 |
| 10 mcg | 30 | 32 | 34 | 38 | 41 | 45 | 49 | 52 |
| 15 mcg | 45 | 48 | 51 | 56 | 62 | 68 | 73 | 79 |
| 20 mcg | 60 | 64 | 68 | 75 | 82 | 90 | 98 | 105 |

Drips requiring OLMC

Adult Epinephrine Drip

Dose is 2-10 mcg/min

Step 1

Determine Concentration

Mix 2 mg of Epinephrine 1:1,000
in 250 mL NS (must use 60 drop set)
(concentration is 8mcg/ml)

Step 2

Determine Rate

| | Dose in mcg/min | | | | | | | |
|------------|-----------------|----|----|----|----|----|----|----|
| | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 10 |
| Drops /min | 15 | 22 | 30 | 37 | 52 | 60 | 67 | 75 |

Adult Lidocaine Infusion

Range of Infusion 2-4 mg/min

Step 1
Determine Concentration

Mix 1 gm Lidocaine in 250 mL NS
(must use 60 drop set)

Step 2
Determine Rate

Rate is drops per minute with a 60 drop set

Dose in mg/min

| 2 | 3 | 4 |
|----|----|----|
| 30 | 45 | 60 |

Drops/ minute

ALS Cardiac Arrest Checklist:

- Pit crew positions identified
- Continuous compressions being performed
- ITD in place w/light activated
- BVM is attached to oxygen and flowing
- Monitor visible and in paddles mode
- BVM mask attached to tubing if not being used
- ETCO2 waveform is present and being monitored
- IV/IO access has been obtained
- Gastric distention has been considered/addressed
- Family is receiving care and is at the patient's side
- Code Commander is identified and positioned at the monitor

| | |
|---|---|
| <input type="checkbox"/> HYPOVOLEMIA | <input type="checkbox"/> TABLETS/TOXINS |
| <input type="checkbox"/> HYPOXIA | <input type="checkbox"/> TAMPONADE |
| <input type="checkbox"/> HYDROGEN IONS (ACIDOSIS) | <input type="checkbox"/> TENSION PNEUMOTHORAX |
| <input type="checkbox"/> HYPOTHERMIA | <input type="checkbox"/> THROMBOSIS (MI) |
| <input type="checkbox"/> HYPER/HYPOKALEMIA | <input type="checkbox"/> THROMBOSIS (PE) |
| <input type="checkbox"/> HYPOGLYCEMIA | <input type="checkbox"/> TRAUMA |

| | Sign | 0 Points | 1 Point | 2 Points |
|--------------------|--|--|---------------------------------|-----------------------------|
| A | Appearance (Skin Color) | Blue-gray, pale all over | Pink except for extremities | Pink over entire body |
| P | Pulse | Absent | <100/min | >100/min |
| G | Grimace (Reflex Irritability) | No response to stimuli | Grimaces in response to stimuli | Sneezes, coughs, pulls away |
| A | Activity (Muscle Tone) | Absent, flaccid | Arms and legs flexed | Active movement |
| R | Respiration | Absent | Slow, irregular | Good, crying |
| 1 Minute | | ⇒ 10 Infant is in best possible condition | | 5 Minutes |
| _____ | | ⇒ 7-9 Infant is slightly depressed but near normal | | _____ |
| _____ | | ⇒ 4-6 Infant is moderately depressed | | _____ |
| _____ | | ⇒ 0-3 Infant is severely depressed | | _____ |
| _____ | | | | _____ |
| <i>Total</i> _____ | | | | <i>Total</i> _____ |

✂

Asthma Checklist:

- ETCO₂, Pulse Ox, Cardiac Monitor
- Albuterol/Atrovent Administered
- CPAP @ 5 cm H₂O with Albuterol
- Consider Magnesium if refractory

Suspected Cardiac Chest Pain Checklist:

- Rapid ECG criteria/acquisition
- ASA (if not allergic) chewed
- Oxygen titrated >95% <100%
- IF STEMI:
 - ⇒ Symptomatic and ≥ 1 mm ST elevation in 2 contiguous leads and no STEMI Alert exclusions (CS – 33)
 - ⇒ Immediate packaging/transport
 - ⇒ Declare STEMI Alert
 - ⇒ Defer additional treatment until enroute
- NTG SL and paste if:
 - ⇒ SBP >100
 - ⇒ No allergies to NTG
 - ⇒ No Viagra/Levitra last 24 hrs
 - ⇒ No Cialis last 48 hrs
 - ⇒ IV as time permits
- Fentanyl for persistent pain
- Contact receiving facility

CHF Checklist:

- Absence of fever
- Oxygen
- CPAP
- NTG for HTN
- Dopamine & Fluids for hypotension
- MI Considered
 - ⇒ 12-Lead
 - ⇒ ASA

First Responder Cardiac Arrest Checklist:

- Pt moved to adequate working area
- Communications advised CPR in progress
- Pit crew positions identified
- Continuous compressions being performed
- ITD in place w/light activated
- BVM is attached to oxygen and flowing
- AED Applied
- Sufficient personnel or additional requested

GCS:

Eyes Open

- Spontaneous (4)
- To Voice (3)
- To pain (2)
- None (1)

Best Verbal

- Oriented (5)
- Confused (4)
- Inappropriate (3)
- Garbled (2)
- None (1)

Best Motor

- Obeys (6)
- Pain-Local (5)
- Pain withdrawal (4)
- Pain-Flexion (3)
- Pain-Extended (2)
- None (1)

Induced Hypothermia Checklist:

Meets criteria for induction: ROSC (and)

- ⇒ ≥12 years old
- ⇒ Non-traumatic cause
- ⇒ No suspected hemorrhagic cause
- ⇒ Temp > 34 C
- ⇒ Unable to follow commands

- | | |
|---|--|
| <input type="checkbox"/> ITD removed | <input type="checkbox"/> Versed/Vecuronium if not hypotensive (advanced airway only) |
| <input type="checkbox"/> If Lucas used release/retract "pressure pad" | <input type="checkbox"/> Cold fluids/Dopamine for MAP <90 |
| <input type="checkbox"/> Airway confirmed with each move | <input type="checkbox"/> Ice packs applied to neck, axilla, groin |
| <input type="checkbox"/> Oxygen titrated to >95 < 100% | <input type="checkbox"/> Cold saline infused 30ml/kg max 2L |
| <input type="checkbox"/> Continuous ETCO2 | <input type="checkbox"/> Controlled Ventilation < 12 bpm |
| <input type="checkbox"/> 12-Lead ECG | <input type="checkbox"/> Adequate personnel for transport |
| <input type="checkbox"/> Resuscitation Alert/STEMI Alert Declared | <input type="checkbox"/> If loss of ROSC go to appropriate Protocol |

King LT Checklist:

- Test cuff prior and apply lubricant
- Pull jaw forward to open mouth
- Place tip of airway in midline (blue line at corner of mouth)
- Advance airway while rotating to midline
- Advance to hub and inflate cuff
- Withdraw airway while ventilating
- STOP withdrawing when easy ventilation
- Check placement:
 - ⇒ Easy ventilation
 - ⇒ Chest rise
 - ⇒ Breath sounds
 - ⇒ E-Z Cap
- Inflate cuff further as needed

MEDICAL ARREST: Termination of Resuscitation without OLMC Checklist:

- Pt \geq 18 yoa or family of minor is agreeable (consult Commander/DMO)
- Adequate CPR has been administered
- Airway managed with ET, King, Cric
- IV/IO Access has been achieved
- Rhythm appropriate meds/treatment administered
- Persistent (>20 min) Asystole/Agonal rhythm with no reversible causes
- Failure to establish ROSC at any time
- Failure to establish recurring/persistent v-fib
- Arrest not due to suspected hypothermia
- Providers agree with decision to cease efforts

If all of the above are not met contact an on call System Medical Director for termination of efforts.

TRAUMATIC ARREST: Termination/withholding of Resuscitation Checklist:

- Obvious injuries incompatible with life
- Pt is pulseless and apneic on arrival of first Provider **AND**
- Lacks respiratory effort after basic airway maneuvers **AND**
- Lacks organized electrical activity on ECG w/ rate > 40.
- Medical cause of arrest has been considered.

| Parkland Burn Formula | | | | | | | | | | | | | | |
|-----------------------|------|-----|-----|-----|------|------|------|------|------|------|------|------|------|-----|
| Pt weight (kg) | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg | 19kg | 21kg | 23kg | 25kg | 27kg | |
| % BSA | 10% | 8 | 13 | 18 | 23 | 28 | 33 | 38 | 43 | 48 | 53 | 58 | 63 | 68 |
| | 20% | 15 | 25 | 35 | 45 | 55 | 65 | 75 | 85 | 95 | 105 | 115 | 125 | 135 |
| | 30% | 23 | 38 | 53 | 68 | 83 | 98 | 113 | 128 | 143 | 158 | 173 | 188 | 203 |
| | 40% | 30 | 50 | 70 | 90 | 110 | 130 | 150 | 170 | 190 | 210 | 230 | 250 | 270 |
| | 50% | 38 | 63 | 88 | 112 | 138 | 163 | 188 | 213 | 238 | 263 | 288 | 313 | 388 |
| | 60% | 45 | 75 | 105 | 135 | 165 | 195 | 225 | 255 | 285 | 315 | 345 | 375 | 405 |
| | 70% | 53 | 88 | 123 | 158 | 193 | 228 | 263 | 298 | 333 | 368 | 403 | 438 | 473 |
| | 80% | 60 | 100 | 140 | 180 | 220 | 260 | 300 | 340 | 380 | 420 | 460 | 500 | 540 |
| | 90% | 68 | 113 | 158 | 203 | 248 | 293 | 338 | 383 | 428 | 473 | 518 | 563 | 608 |
| | 100% | 75 | 125 | 175 | 225 | 275 | 325 | 375 | 425 | 475 | 525 | 575 | 625 | 675 |

Fluid quantity is amount (in mL's) to be infused during the first hour after injury

This infusion chart should be kept together and/or laminated back to back

| Parkland Burn Formula Continued | | | | | | | | | | | | | |
|---------------------------------|------|------|------|------|------|------|------|------|------|------|-------|-------|-------|
| Pt weight (kg) | 30kg | 35kg | 40kg | 45kg | 50kg | 55kg | 60kg | 70kg | 80kg | 90kg | 100kg | 110kg | 120kg |
| % BSA | 10% | 75 | 88 | 100 | 113 | 125 | 138 | 150 | 175 | 200 | 225 | 250 | 300 |
| | 20% | 150 | 175 | 200 | 225 | 250 | 275 | 300 | 350 | 400 | 450 | 500 | 600 |
| | 30% | 225 | 263 | 300 | 338 | 375 | 413 | 450 | 525 | 600 | 675 | 750 | 900 |
| | 40% | 300 | 350 | 400 | 450 | 500 | 550 | 600 | 700 | 800 | 900 | 1000 | 1200 |
| | 50% | 375 | 438 | 500 | 563 | 625 | 688 | 750 | 875 | 1000 | 1125 | 1250 | 1500 |
| | 60% | 450 | 525 | 600 | 675 | 750 | 825 | 900 | 1050 | 1200 | 1350 | 1500 | 1800 |
| | 70% | 525 | 613 | 700 | 788 | 875 | 963 | 1050 | 1225 | 1400 | 1575 | 1750 | 2100 |
| | 80% | 600 | 700 | 800 | 900 | 1000 | 1100 | 1200 | 1400 | 1600 | 1800 | 2000 | 2400 |
| | 90% | 675 | 788 | 900 | 1013 | 1125 | 1238 | 1350 | 1575 | 1800 | 2025 | 2250 | 2700 |
| | 100% | 750 | 875 | 1000 | 1125 | 1250 | 1375 | 1500 | 1750 | 2000 | 2250 | 2500 | 3000 |

Fluid quantity is amount (in mL's) to be infused during the first hour after injury

Pediatric Amiodarone Infusion

(for VT or WCT of unknown origin with pulses) **Dose 5mg/kg over 20 minutes**

Max dose 150 mg

Step 1
Determine Concentration

Concentration: XX mg amiodarone in 50 mL NS

XX mL amiodarone in 50 mL NS

| | | | | | | | | |
|----------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg |
| mg amiodarone | 15 | 25 | 35 | 45 | 55 | 65 | 75 | 85 |
| mL amiodarone | 0.3mL | 0.5mL | 0.7mL | 0.9mL | 1.1mL | 1.3mL | 1.5mL | 1.7mL |

| | | | | | | | | |
|----------------------|-------|-------|-------|-------|-------|------|------|------|
| Pt Weight | 19kg | 21kg | 23kg | 25kg | 27kg | 30kg | 33kg | 36kg |
| mg amiodarone | 95 | 105 | 115 | 125 | 135 | 150 | 150 | 150 |
| mL amiodarone | 1.9mL | 2.1mL | 2.3mL | 2.5mL | 2.7mL | 3mL | 3mL | 3mL |

Step 2
Determine Rate

Rate is drops/minute with a 60 drop set

| | |
|--------------------------|--------------------------|
| Dose in mL/minute | |
| 50 mL / 20 min | 150 Drops/ minute |

Pediatric Calcium Gluconate Infusion

Dose 20 mg/kg over 5 minutes

Max dose 1 gram

Step 1

Determine Concentration

Concentration: XX mg Calcium Gluconate in 50 mL NS
(must use 10 drop set)

| | | | | | | | | |
|------------|-------|-----|-------|-------|-------|-------|------|-------|
| Pt Weight | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg |
| mg Calcium | 60 | 100 | 140 | 180 | 220 | 260 | 300 | 340 |
| mL Calcium | 0.6mL | 1mL | 1.4mL | 1.8mL | 2.2mL | 2.6mL | 3mL | 3.4mL |

mL Calcium using 1 gram/10 mL packaging

| | | | | | | | | |
|------------|-------|-------|-------|------|-------|------|-------|-------|
| Pt Weight | 19kg | 21kg | 23kg | 25kg | 27kg | 30kg | 33kg | 36kg |
| mg Calcium | 380 | 420 | 460 | 500 | 540 | 600 | 660 | 720 |
| mL Calcium | 3.8mL | 4.2mL | 4.6mL | 5mL | 5.4mL | 6mL | 6.6mL | 7.2mL |

Step 2

Determine Rate

Dose in mL/min
50 mL / 5 min

100 Drops/minute

Pediatric Calcium Gluconate Infusion

Dose 50 mg/kg over 5 minutes

Max dose 1 gram

Step 1

Determine Concentration

Concentration: XX mg Calcium Gluconate in 50 mL NS
(must use 10 drop set)

| | | | | | | | | |
|------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg |
| mg Calcium | 150 | 250 | 350 | 450 | 550 | 650 | 750 | 850 |
| mL Calcium | 1.5mL | 2.5mL | 3.5mL | 4.5mL | 5.5mL | 6.5mL | 7.5mL | 8.5mL |

mL Calcium using 1 gram/10 mL packaging

| | | | | | | | | |
|------------|-------|------|------|------|------|------|------|------|
| Pt Weight | 19kg | 21kg | 23kg | 25kg | 27kg | 30kg | 33kg | 36kg |
| mg Calcium | 950 | 1000 | 1000 | 1000 | 1000 | 1000 | 1000 | 1000 |
| mL Calcium | 9.5mL | 10mL | 10mL | 10mL | 10mL | 10mL | 10mL | 10mL |

Step 2

Determine Rate

Dose in mL/min

50 mL / 5 min

100 Drops/minute

Pediatric Dextrose Administration

Dose 0.5-1.0 gram/kg

If less than 30 days or 9 kg, mix in 25 mL NS
If greater than 30 days or 9 kg, mix in 50 mL NS

| | | | | | | | | |
|-----------------------|---|------|------|------|------|------|------|------|
| Patient weight | 3kg | 3kg | 5kg | 5kg | 7kg | 7kg | 9kg | 9kg |
| Desired dose | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G |
| Grams D50 | 1.5 | 3 | 2.5 | 5 | 3.5 | 7 | 4.5 | 9 |
| mL D50 | 3mL | 6mL | 5mL | 10mL | 7mL | 14mL | 9mL | 18mL |
| | Mix in 25 mL NS (waste 25 mL of 50 mL bag) | | | | | | | |
| Patient weight | 11kg | 11kg | 13kg | 13kg | 15kg | 15kg | 17kg | 17kg |
| Desired dose | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G |
| Grams D50 | 5.5 | 11 | 6.5 | 13 | 7.5 | 15 | 8.5 | 17 |
| mL D50 | 11mL | 22mL | 13mL | 26mL | 15mL | 30mL | 17mL | 34mL |
| | Mix in 50 mL NS | | | | | | | |
| Patient weight | 19kg | 19kg | 21kg | 21kg | 23kg | 23kg | 25kg | 25kg |
| Desired dose | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G |
| Grams D50 | 9.5 | 19 | 10.5 | 21 | 11.5 | 23 | 12.5 | 25 |
| mL D50 | 19mL | 38mL | 21mL | 42mL | 23mL | 46mL | 25mL | 50mL |
| | Mix in 50 mL NS | | | | | | | |
| Patient weight | 27kg | 27kg | 33kg | 30kg | 33kg | 33kg | 35kg | 35kg |
| Desired dose | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G | 0.5G | 1G |
| Grams D50 | 13.5 | 25 | 15 | 25 | 16.5 | 25 | 17.5 | 25 |
| mL D50 | 30mL | 50mL | 30mL | 50mL | 33mL | 50mL | 35mL | 50mL |
| | Mix in 50 mL NS | | | | | | | |

Pediatric Dopamine Infusion

Range of infusion 5-20 mcg/kg/min

Concentration based on (Pt weight in kg x 2) = mg in 250 mL NS

| | | | | | | | | |
|-----------------------------------|---|-------|-------|-------|-------|-------|-------|-------|
| Step 1 Determine Concentration | Concentration: XX mg Dopamine in 250 mL NS | | | | | | | |
| | XX mL Dopamine in 250 mL NS | | | | | | | |
| Pt Weight | 3 KG | 5 KG | 7 KG | 9 KG | 11 KG | 13 KG | 15 KG | 17 KG |
| mg Dopamine | 6 | 10 | 14 | 18 | 22 | 26 | 30 | 34 |
| mL Dopamine | 0.2 mL | 0.3mL | 0.4mL | 0.5mL | 0.6mL | 0.7mL | 0.8mL | 0.9mL |

mL Dopamine based on 40 mg/mL packaging

| | | | | | | | | |
|--------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 19 KG | 21 KG | 23 KG | 25 KG | 27 KG | 30 KG | 33 KG | 35 KG |
| mg Dopamine | 38 | 42 | 46 | 50 | 54 | 60 | 66 | 70 |
| mL Dopamine | 1mL | 1.1mL | 1.2mL | 1.3mL | 1.4mL | 1.5mL | 1.7mL | 1.8mL |

| | | | | | | | | |
|--------------------------|--|----|----|----|-----|-----|-----|--|
| Step 2 Determine Rate | Rate is drops/minute with a 60 drop set | | | | | | | |
| | Dose in mcg/kg/min | | | | | | | |
| | 5 | 7 | 10 | 12 | 15 | 17 | 20 | |
| Drops/minute | 38 | 53 | 75 | 90 | 113 | 128 | 150 | |

Pediatric Epinephrine Infusion

Range of infusion 0.1-1.0 mcg/kg/min

Step 1 Determine Concentration Concentration is patient weight in kg x 0.08 = mg Epi in 250 mL NS

Concentration: X.X mg Epi 1:1000 in 250 mL NS

| | | | | | | | | |
|-----------|------|------|------|------|-------|-------|-------|-------|
| Pt Weight | 3 KG | 5 KG | 7 KG | 9 KG | 11 KG | 13 KG | 15 KG | 17 KG |
| mg Epi | 0.2 | 0.4 | 0.6 | 0.7 | 0.9 | 1 | 1.2 | 1.4 |

| | | | | | | | | |
|-----------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 19 KG | 21 KG | 23 KG | 25 KG | 27 KG | 30 KG | 33 KG | 35 KG |
| mg Epi | 1.5 | 1.7 | 1.8 | 2 | 2.2 | 2.4 | 2.6 | 2.8 |

Step 2 Determine Rate Rate is drops/minute with a 60 drop set

Dose in mcg/kg/min

| | | | | | | | | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Drops/minute | 0.1 | 0.2 | 0.3 | 0.5 | 0.7 | 0.8 | 0.9 | 1 |
| Drops/minute | 19 | 38 | 56 | 94 | 131 | 150 | 169 | 188 |

Pediatric IV Maintenance Fluids

| Patient Weight | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg |
|--------------------------|-----|-----|-----|-----|------|------|------|------|
| Maintenance in mL/hr | 12 | 20 | 28 | 36 | 42 | 46 | 50 | 54 |
| gtts/min with 60 gtt set | 12 | 20 | 28 | 36 | 42 | 46 | 50 | 54 |
| 1.5 x Maintenance | 18 | 30 | 42 | 54 | 63 | 69 | 75 | 81 |
| gtts/min with 60 gtt set | 18 | 30 | 42 | 54 | 63 | 69 | 75 | 81 |

| Patient Weight | 19kg | 21kg | 23kg | 25kg | 27kg | 30kg | 33kg | 35kg |
|--------------------------|------|------|------|------|------|------|------|------|
| Maintenance in mL/hr | 58 | 61 | 63 | 65 | 67 | 70 | 73 | 75 |
| gtts/min with 60 gtt/set | 58 | 61 | 63 | 65 | 67 | 70 | 73 | 75 |
| 1.5 X Maintenance | 87 | 92 | 95 | 98 | 101 | 105 | 110 | 113 |
| gtts/min with 60 gtt/set | 87 | 92 | 95 | 98 | 101 | 105 | 110 | 113 |

Pediatric Lidocaine Infusion

Step 1

Determine Concentration

Range of Infusion 20-50 mcg/kg/min

Mix 40 mg Lidocaine in 50 mL NS

Step 2

Determine Rate

Rate is drops/minute with 60 drop set

| Dose in mcg/kg/min | 3 kg | 5 kg | 7 kg | 9 kg | 11 kg | 13 kg | 15 kg | 17 kg |
|--------------------|------|------|------|------|-------|-------|-------|-------|
| 20 mcg | 5 | 8 | 11 | 14 | 17 | 20 | 23 | 26 |
| 30 mcg | 7 | 11 | 16 | 20 | 25 | 29 | 34 | 38 |
| 40 mcg | 9 | 15 | 21 | 27 | 33 | 39 | 45 | 51 |
| 50 mcg | 11 | 19 | 26 | 34 | 41 | 49 | 56 | 64 |

| Dose in mcg/kg/min | 19 kg | 21 kg | 23 kg | 25 kg | 27 kg | 30 kg | 33 kg | 36 kg |
|--------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| 20 mcg | 29 | 32 | 35 | 38 | 41 | 45 | 50 | 54 |
| 30 mcg | 43 | 47 | 52 | 56 | 61 | 68 | 74 | 81 |
| 40 mcg | 57 | 63 | 69 | 75 | 81 | 90 | 99 | 108 |
| 50 mcg | 71 | 79 | 86 | 94 | 101 | 113 | 124 | 135 |

Pediatric Magnesium Sulfate Infusion

Range of Infusion 50 mg/kg over 20 min

Max dose 2 grams

Step 1

Determine Concentration

Concentration: XXX mg Magnesium Sulfate in 50 mL NS

(must use 60 drop set)

| | | | | | | | | |
|----------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 3 kg | 5 kg | 7 kg | 9 kg | 11 kg | 13 kg | 15 kg | 17 kg |
| mg MgSO ₄ | 150 | 250 | 350 | 450 | 550 | 650 | 750 | 800 |
| mL MgSO ₄ | 0.3mL | 0.5mL | 0.7mL | 0.9mL | 1.1mL | 1.3mL | 1.5mL | 1.7mL |

mL MgSO₄ using 1 gram/2mL packaging

| | | | | | | | | |
|----------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| Pt Weight | 19 kg | 21 kg | 23 kg | 25 kg | 27 kg | 30 kg | 33 kg | 36 kg |
| mg MgSO ₄ | 950 | 1050 | 1150 | 1250 | 1350 | 1500 | 1650 | 1800 |
| mL MgSO ₄ | 1.9mL | 2.1mL | 2.3mL | 2.5mL | 2.7mL | 3mL | 3.3mL | 3.6mL |

Place in 50 mL NS

Step 2

Determine Rate

| | | |
|----------------|-----|---------------|
| Dose in mL/min | | |
| 50 mL / 20 min | 150 | Drops/ minute |

Pediatric Tylenol Dosing

Step 1
Calculate Dose

Dose 15 mg/kg

Max dose 500 mg

mL based on 80 mg/0.8 mL packaging

| | | | | | | | | |
|----------------|--------|--------|--------|--------|--------|--------|--------|--------|
| Patient Weight | 3kg | 5kg | 7kg | 9kg | 11kg | 13kg | 15kg | 17kg |
| mg dose | 45 | 75 | 105 | 135 | 165 | 195 | 225 | 255 |
| mL dose | 0.45mL | 0.75mL | 1.05mL | 1.35mL | 1.65mL | 1.95mL | 2.25mL | 2.55mL |

| | | | | | | | | |
|----------------|--------|--------|--------|--------|--------|-------|--------|------|
| Patient Weight | 19kg | 21kg | 23kg | 25kg | 27kg | 30kg | 33kg | 35kg |
| mg dose | 285 | 315 | 345 | 375 | 405 | 450 | 495 | 500 |
| mL dose | 2.85mL | 3.15mL | 3.45mL | 3.75mL | 4.05mL | 4.5mL | 4.95mL | 5mL |

Post Resuscitation Checklist:

- ITD Removed
- Oxygen titrated to $>95 < 100\%$
- Fluids and Dopamine considered for MAP <90
- 12-Lead EKG
- Resuscitation Alert/STEMI Alert Declared
- Continuous ETCO₂ monitoring
- Controlled Ventilation < 12 bpm
- Adequate personnel for transport
- Airway placement confirmed with each move

Refusal of Care/Treatment Checklist:

- Pt is ≥ 18 or emancipated minor
- Pt is not suicidal/homicidal
- Pt demonstrates capacity
- Pt understands evaluation is incomplete
- Solutions to obstacles have been sought
- Pt instructed to seek medical attention
- Pt instructed to call back at any time
- Above documented fully in PCR
- In the following high risk situations contact with Medical Control is recommended:
 - ⇒ Age greater than 65?
 - ⇒ Pulse greater than 110 or less than 60?
 - ⇒ Systolic BP greater than 200 or less than 90?
 - ⇒ Respirations greater than 30 or less than 12?
 - ⇒ Serious chief complaint (chest pain, SOB, syncope)
 - ⇒ Significant MOI or high suspicion if injury?
 - ⇒ If it is your impression the patient requires hospital evaluation?

These 2 sections should be kept together and/or laminated back to back

Capacity Checklist:

- Patient is able to express in their own words:
 - ⇒ An understanding of the nature of their illness
 - ⇒ An understanding of the risks of refusal including death
 - ⇒ An understanding of alternatives to EMS treatment/transport
 - ⇒ Pt can provide rationale for refusal and debate this rationale
- A patient with any of the following **MAY** lack decision making capacity and should be carefully assessed for their ability to perform the above.
 - ⇒ Orientation to person, place or time that differs from baseline
 - ⇒ History of drug/alcohol ingestion with appreciable impairment such as slurred speech or unsteady gait
 - ⇒ Head injury with LOC, amnesia, repetitive questioning
 - ⇒ Medical condition such as hypovolemia, hypoxia, metabolic emergencies (e.g., diabetic issues); hypothermia, hyperthermia, etc.
- If any question exists about their capacity contact Medical Control

✂

Perform a Rapid 12 Lead on any patient > 20 years old with the following:

- Suspected cardiac patient
 - ⇒ Pain between navel and jaw
 - ⇒ Pressure, discomfort, tightness or heartburn
 - ⇒ “Heart racing”, “palpitations”, or “heart too slow”
 - ⇒ CHF signs and symptoms
- Electrical injuries
- Syncope
- Severe Weakness if > 45 years old
- New onset stroke symptoms
- Difficulty breathing (no obvious respiratory cause)
- Suspected overdose
- Patient of any age with any of the above symptoms **AND** history of:
(cardiac, diabetes, obese, family history of early CHD, or recent cocaine use)

Restraints Checklist:

- All other calming attempts have failed
- Adequate personnel to effect restraint (PD preferred)
- After restraint placed in supine position
- PD immediately available if handcuffed
- EMS personnel in constant attendance
- Chemical sedation administered
- Continuous SaO₂, ETCO₂, Monitor
- Continuous assessment of neurovascular status
- Adequate personnel for transport
- Excited Delirium considered
- Documentation:
 - ⇒ Efforts prior to restraint
 - ⇒ Time of restraint
 - ⇒ Chemical sedation
 - ⇒ Continuous monitoring
 - ⇒ PMS evaluation

Stroke Checklist:

- Time patient last seen normal < 8 hrs
- Blood glucose >50 < 300
- Cincinnati Prehospital Stroke:
 - ⇒ Facial droop
 - ⇒ Arm drift
 - ⇒ Slurred speech
- Declare STROKE ALERT
- ID family/historian to accompany
- Scene time < 15 min