

Kittitas County Prehospital Care Protocols

Subject: MULTISYSTEM TRAUMA GENERAL GUIDELINES

General

- A. Establish and maintain airway.
- B. Protect and immobilize C-spine.
- C. Administer O₂ @ 12-15 lpm per non-rebreather mask.
- D. Ventilate or assist ventilations if with BVM and supplemental O₂ @ 12-15 lpm, hypoventilation or apnea is present.
- E. Control severe external hemorrhaging as indicated.
- F. If BP < 90 mm Hg, apply and inflate PASG.
- G. Establish minimum of two large-bore IVs with Normal Saline running at a rate to maintain systolic BP at 90.
- H. Rapid transport to medical facility (spend the minimum necessary time at the scene). Do not delay transport to treat minor injuries or splint minor fractures.
- I. Establish cardiac monitor.
- J. Consider air transport if:
 - 1. Prolonged (>20 minutes) extrication procedures and prolonged transport time (> 30 minutes) is anticipated.
 - 2. Patient condition warrants a trauma center.
 - 3. Landing site is available & securable. Hoist mission will require M.A.S.T.
 - 4. M.A.S.T. may be dispatched prior to medical unit arrival after discussion between en route paramedics and on-scene agency (State Patrol, Sheriff, fire department) regarding resources required at scene. When possible, and medically necessary, the patient(s) should be accompanied in the helicopter by a paramedic. Do not hesitate to direct flight crew to the most appropriate hospital for the patient's medical condition.
- K. Consider placement of endotracheal tube, if indicated. End tidal CO₂ monitor, maintain CO₂ between 35-40.

Effective Date: June 23, 2004

Medical Program Director: