### BLS Patient Management

- **Establish, maintain, and ensure:**
  - A. A patent and easily managed airway. Use manual maneuvers (head-tilt / chin-lift or jaw thrust), oropharyngeal suction and/or airway adjuncts (OPA / NPAs) as clinically indicated
  - B. Adequate respirations and tidal volume. Use a mouth-to-mask device or bag valve mask (BVM), when clinically indicated. Rescue ventilations via a BVM require the use of a manometer. Waveform / digital capnography is required when paramedics are present
  - C. Controlled bleeding. Use direct pressure and/or pressure dressing(s) and/or tourniquet(s) and/or hemostatic dressing(s), as clinically indicated

- **Oxygen**
  - As clinically indicated. Titrate to maintain, or increase, SpO₂ to a minimum of 94%. A range of 88-92% is acceptable for patients with a history of COPD

- Position the patient as clinically indicated for safety, comfort, and to meet physiologic requirements

- Attach ECG leads to the patient when a paramedic is present

### ALS Patient Management

- **Establish, maintain, and ensure peripheral IV and/or IO access for emergency stabilization, and/or as clinically indicated, in adult and pediatric patients**
  - Consider the need for additional sites as clinically indicated
  - Interpret and continuously monitor ECG, vital signs and SpO₂
  - For nausea and/or vomiting
    - **Adults:** Ondansetron 4 mg PO (1 ODT). **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**
    - **OR**
      - Ondansetron 4 mg (2 mL) IV solution slow IV/IO push or IM. **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**
    - **Pediatrics:**
      - **ADMINISTRATION OF ONDANSETRON ODT TO PATIENTS WEIGHING LESS THAN 10 KG (~22 LBS) IS NOT PERMITTED.**
      - Weight = 10 kg or greater: Ondansetron 4 mg PO (1 ODT). **MAY REPEAT TWICE TO MAX 12 MG. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**
      - **OR**
        - Ondansetron 0.1 mg / kg IV solution slow IV/IO push or IM. **MAX SINGLE DOSE IS 4 MG. MAY REPEAT TWICE. ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).** For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.
INITIAL AND REPEAT ADMINISTRATIONS FOR ADULTS AND PEDIATRICS REQUIRE A BASE HOSPITAL ORDER (BHO).

**Adults**: Diphenhydramine 25-50 mg (0.5 – 1 mL) IM or slow IV/IO push.

**Pediatrics**: Diphenhydramine 1 mg / kg slow IV/IO push. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

**OR**

Diphenhydramine 2 mg / kg IM. **MAX SINGLE DOSE IS 50 MG.** For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.