**Pre-Eclampsia and Eclampsia**

**Treatment Protocol**

Last Reviewed: **October 4, 2022**

Last Revised: **December 2, 2022**

### 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 using appropriate measures, 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

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

- **Obtain and evaluate blood glucose**

- **Position the patient as clinically indicated for safety, comfort, and to meet physiologic requirements. If tolerated, place the patient in left lateral recumbent position**

- **Decrease stimuli and maintain a quiet, dark environment**

### ALS Patient Management

- **Establish, maintain, and ensure peripheral IV and/or IO access for emergency stabilization, and/or as clinically indicated**

- **Consider the need for additional sites as clinically indicated**

- **Interpret and continuously monitor ECG and vital signs**

- **For suspected pre-eclampsia or eclampsia**
  - *Standing order: may be given prophylactically*
  - Magnesium Sulfate 5 gm (10 mL) IVPB. Infuse in 50-100 mL Normal Saline, administer over 10 minutes. **ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**
  - **OR**
  - Magnesium Sulfate 2.5 gm (5 mL) IM x2. **ADDITIONAL ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**

- **For eclampsia unresponsive to Magnesium Sulfate**
  - **INITIAL AND REPEAT ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).**
  - Midazolam 2.5 mg (0.5 mL) slow IV/IO push
  - **OR**
  - Midazolam 5 mg (1 mL) IM/IN.

### Patient Disposition

- **CONTACT A SINGLE BASE HOSPITAL FOR ALL PATIENTS EXPERIENCING PRE-ECLAMPSIA OR ECLAMPSIA**