

**Treatment Protocols****Date: 07/01/2023*****Drowning/Near Drowning – Pediatric*****Policy #9090P****Pediatric BLS Standing Orders**

- **Universal Patient Protocol**
- Ensure patent airway, suction PRN
- Intervene PRN per **Airway Policy**
- Spinal motion restriction PRN per **Spinal Motion Restriction Policy**
- Monitor O2 saturation, aggressively treat hypoxia or increased WOB
- Give oxygen and/or ventilate PRN
- Keep patient warm
- All patients should be evaluated in the hospital, **BHP**
- Blood glucose PRN
- Refer to **Poisoning** and **Trauma Policies** as needed
- End tidal capnography

**Pediatric LALS Standing Orders**

- Establish IV PRN

**Wheezing**

- Albuterol – per dosing chart via nebulizer MR x1 **BH**

**Hypotension**

- Follow **Shock Protocol**

**Pediatric ALS Standing Orders**

- Monitor EKG
- IV/IO PRN
- Capnography

**Refer to Airway Policy****Wheezing**

- Albuterol – per dosing chart via nebulizer MR x1

**Hypotension**

- 10-20 mL/kg NS IV bolus; titrated to age-appropriate systolic BP MR x1
- Use Shock Protocol for persistent hypotension

**Nausea and/or Vomiting**

- Ondansetron 0.1 mg/kg, max 4 mg - IV/IO/IM/ODT PRN MR x1

**Pediatric Base Hospital Orders**

- **BH** – Repeat albuterol weight based nebulized
- **BH** – Repeat NS bolus IV/IO PRN hypotension

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<b>Notes:</b>
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| <ul style="list-style-type: none"><li>• <b>BHP</b> - All patients should be evaluated in the hospital. Consult with BHP if requested for AMA.</li></ul> |
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APPROVED:

Signature on File

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