

APPROVED: SIGNATURE ON FILE IN EMS OFFICE
Executive Director

SIGNATURE ON FILE IN EMS OFFICE
Medical Director

EFFECTIVE DATE 01/01/2004
SUPERSEDES: _____
REVISED: _____
REVIEW DATE: 01/2009
PAGE: 1 of 1

EXTREMITY TRAUMA

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMT-Is and EMT-Ps in treating patients.
- III. PROTOCOL:

STANDING ORDERS

ABCS

SECURE AIRWAY

As appropriate. Confirm tube placement, if intubated, with end-tidal CO₂ detector and esophageal detector device. **Monitor intubated patients with continuous waveform capnography if available.**

SPINE IMMOBILIZATION

If indicated Refer to ALS Introduction Policy 554.00

OXYGEN

DRESS & SPLINT

- Open or closed femur fractures may be splinted with Hare, Sager, or Cardboard splints after gentle realignment with manual traction. (Morphine should be administered to facilitate muscle relaxation.)
- Minimum traction should be utilized for Hare and Sager to minimize reversal nerve injury.
- Splint dislocations in position found.
- Check neuro-vascular status prior to and after each extremity manipulation.
- Control bleeding with direct pressure.
- Cover exposed bone with saline soaked gauze.
- Angulated long bone fractures may be realigned with gentle axial traction for splinting.
- In cases involving major multi-system trauma, consider "splinting the whole body" by strapping the patient to a back board, rather than splinting each extremity.

IV ACCESS

Rate as indicated

MORPHINE

Up to 5 mg slow IV push, then 2.5 mg increments slow IV (if systolic BP greater than 100), to relieve pain. May give up to 20 mg MS without Base Physician order. May give 5-10 mg IM.

Maximum dose of Morphine for patients without Base Physician contact is 20 mg

CONSIDERATIONS

Amputations - If partial amputation, splint in anatomic position and elevate the extremity. Wrap completely amputated parts in dry sterile gauze, then place parts in a sealed and dry container. Place container in ice, if possible.

BASE PHYSICIAN ORDERS

RELEASE-AT-SCENE

Competent adults with normal vital signs, blood sugar and mental status 10 minutes after ALS intervention, may be released if a cause of their condition and its solution have been identified.

MORPHINE

Additional morphine per Base Physician order.