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 Executive Director

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 Medical Director

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PEDIATRIC HEAD – NECK – FACIAL TRAUMA

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as a patient treatment standard for EMTs and Paramedics within their scope of practice .
- III. PROTOCOL:

STANDING ORDERS	
ASSESS	CAB
SECURE AIRWAY/INTUBATE	Using the simplest effective method while maintaining c-spine. A BLS airway with objective evidence of good ventilation and oxygenation is adequate and acceptable. Consider intubation. Refer to General Procedures Protocol 554.00.
C-SPINE IMMOBILIZATION:	If indicated, refer to General Procedures Protocol 554.00
OXYGEN:	Oxygen deliver as appropriate
POSITION:	Elevate the heads of brain injured patients, if patient exhibits no signs of shock.
IV/IO ACCESS:	TKO with microdrip tubing and volume control chamber
DRESS & SPLINT	As needed.
PAIN MANAGEMENT	Refer to Pain Management Protocol 555.43
CONSIDERATIONS	<p>Avulsed Tooth - Place tooth in milk, normal saline, saline soaked gauze or a commercial "tooth saver."</p> <p>Eye Injuries - Cover with a non-contact dressing, such as a paper cup. Do not apply direct pressure to eye and <u>do not</u> attempt to replace partially torn globe.</p> <p>Impaled Object - Immobilize and leave in place. Remove object only if it interferes with CPR, extrication or ventilation.</p>