

EL DORADO COUNTY EMS AGENCY

FIELD POLICIES

Effective: July 1, 2011

Reviewed: N/A

Revised: July 1, 2016

Scope: BLS Personnel



EMS Agency Medical Director

BLS MEDICATION ADMINISTRATION

POLICY:

BLS personnel are authorized to administer only oxygen and oral glucose according to County protocol. BLS personnel may **assist** a patient for whom a physician has prescribed medication in the administration of his/her own medications such as nitroglycerin, epinephrine, albuterol, etc.

Information regarding administration of the following medications:

NITROGLYCERIN (NTG)

General Info:

NTG is a vasodilator taken as a sublingual tablet or spray to treat angina pectoris and myocardial infarction. NTG may have a hypotensive effect.

Considerations:

- Take blood pressure (BP) before and after each administration of NTG.
- If BP is less than 120 systolic, discourage patient use unless the patient's physician gives verbal orders to the patient knowing the BP is less than 120 systolic.
- NTG tablets should be placed under the patient's tongue and be allowed to dissolve; NTG sprays can be sprayed anywhere in the patient's mouth (1 spray equals 1 dose); do not shake spray canister. Limit doses of NTG to three.

Indications for BLS Personnel:

- Chest pain in patients with known coronary artery disease

Side effects:

- Hypotension /Flushing
- Headache
- Nausea/Vomiting
- Dizziness

Contraindications:

- Blood pressure < 120 systolic
- Patients taking erectile dysfunction medications (i.e., Viagra, Cialis, or Levitra) within the last 48 hours

Precautions:

- Monitor the patient's vital signs closely
- Limit doses to 1 every 5 minutes unless otherwise directed by a physician (Max. of 3)
- If side effects become severe, have patient discontinue use

EPINEPHRINE (Epi-Pen, Adrenaline)

General Info:

Epinephrine (Adrenaline) is a naturally occurring chemical in the human body that increases the heart rate, respirations, blood pressure, and dilates the bronchioles in the lungs. During anaphylaxis, massive amounts of histamine are released into the body causing hypotension, bronchospasm and/or laryngeal edema; epinephrine can reverse these potentially fatal effects. Epinephrine is prescribed to people who have had previous allergy problems to a specific allergen. It comes in the form of an automatic injecting syringe that will inject a pre-

measured dose. The preferred location for injecting epinephrine is the patient's thigh, although the deltoid (shoulder/upper arm) muscle may also be used if the thigh is inaccessible.

Indications for BLS Personnel:

- Severe anaphylaxis

Signs and symptoms of severe anaphylaxis may include:

- Severe dyspnea
- Severe hypotension
- Difficulty swallowing/hoarseness with upper airway swelling

Side effects of epinephrine:

- Cardiac arrhythmias /Tachycardia/ Tremors
- Hypertension

INHALERS/BRONCHODILATORS**General Info:**

There are many different types of inhalers used by respiratory patients in the field; typically these inhalers are either bronchodilators or steroid type medications. BLS personnel may encounter patients, who for physical reasons cannot self-administer these medications. It is allowable that if a patient is unable to self-administer a physician prescribed medication the BLS personnel may assist.

Indications for inhaler assistance by BLS personnel:

- Severe dyspnea secondary to asthma or chronic obstructive pulmonary disease (COPD)

Precautions:

- Avoid over-usage of inhaler by patient

Side effects:

- Cardiac arrhythmias/tachycardia/palpitations
- Tremors

Contraindications:

- Known over-usage of inhaler

ASPIRIN (ASA)**General Info:**

In cardiac patients low doses of aspirin can thin the blood and improve coronary perfusion. Studies have shown that in the acute stages of myocardial infarction the administration of aspirin may reduce mortality by as much as twenty-three percent. Doses are normally 1-2 baby aspirin tablets (80 mg each) taken once a day.

Indications for BLS Personnel:

- Chest pain of suspected cardiac origin

Side Effects:

- Nausea/Vomiting
- Exacerbation of gastric ulcer

Contraindications:

- Patients with a known sensitivity or allergy to aspirin

- Administration of aspirin within the last twelve (12) hours
- History of gastric/peptic ulcers

ORAL GLUCOSE SOLUTION**General Info:**

In known diabetic patients who have an altered level of consciousness who are suspected to be hypoglycemic oral glucose can provide a rapid source of cell saving blood sugar. A single 15 gram tube may be given if the patient can self administer. Repeat with a second 15 gram tube if patient doesn't respond to the first tube in 10 minutes.

Indications for BLS personnel:

- Known or suspected diabetics who are conscious but confused, lethargic, irritable, or dizzy

Side Effects:

- Nausea

Contraindications:

- Patients who cannot self administer
- Patients with an impaired gag reflex
- Unresponsive patients