Ondansetron

Pharmacological Category: Antiemetic

Indications:

1. Nausea and vomiting

Routes: IV/IM; ODT (for patients ≥ 30 kg)

Contraindications:

1. Patients with Phenylketonuria (PKU)

Precautions:

1. Do not administer ODT to patients that are actively vomiting

Expected effects:

1. Diminished nausea

Side effects:

1. Headache
2. Dry mouth
3. Drowsiness

Notes:

1. Orally Disintegrating Tablet (ODT) is an MCA optional medication and may not be available.

Dosing: NAUSEA & VOMITING

Indication: Nausea & vomiting

Adults administer:

1. Ondansetron ODT 4mg if not actively vomiting and ODT is available.
2. Ondansetron 4mg IV/IM if patient is actively vomiting, vomited post ODT administration, or ODT is not available.
3. May administer a second dose of ondansetron 4 mg (IV/IM only). Total dose (including ODT) not to exceed 8 mg.

Pediatrics administer:

1. Ondansetron according to MI MEDIC cards
2. If MI MEDIC cards are not available administer:
    a. Pediatrics ≥ 30 kg that is not actively vomiting and ODT is available administer:
        i. Ondansetron 4 mg ODT
    b. Pediatrics < 30 kg, or if the patient is actively vomiting, or if the patient vomited post OD administration, or ODT is not available, administer:
        i. Ondansetron 0.1 mg/kg IV/IM, maximum dose of 4 mg.
    c. May repeat ondansetron 0.1 mg/kg IV/IM, maximum dose of 4 mg. Total dose (including ODT) may not exceed 8 mg.

Used in the Following Protocol(s):
Nausea & Vomiting (Section 1 General Treatment)

Pralidoxime

Pharmacological Category: Cholinesterase reactivator

Routes: IV/IM

Indications:
1. Exposure to organophosphate or nerve agents

Expected effects:
1. Decrease in symptoms

Side effects:
1. Blurred vision
2. Headache
3. Dizziness
4. Nausea

Notes:
1. This medication may be part of a Nerve Agent (NA) Antidote kit.
2. When not part of an NA kit, 600 mg pralidoxime (along with 2 mg Atropine) will be administered in place of each NA kit that was to be administered.

Dosing: NERVE AGENT/ORGANOPHOSPHATE PESTICED ESPOSURE
Indication: Symptomatic nerve agent or organophosphate pesticide exposure when a NA Antidote Kt is not available.
Adults and Pediatrics administer:
1. Pralidoxime 600 mg IV/IM for every one (1) NA Kit as required on Chart below.

	Clinical Findings	Signs/Symptoms	Required Conditions	NA Kits To Be Delivered
SELF-RESCUE	**Threshold Symptoms**	• Dim vision • Increased tearing • Runny nose • Nausea/vomiting • Abdominal cramps • Shortness of breath	Threshold Symptoms *-and-* Positive evidence of nerve agent or OPP on site  Medical Control Order	1 NA Kit (self-rescue)
ADULT PATIENT > 8 years of age	**Mild Symptoms and Signs**	• Increased tearing • Increased salivation • Dim Vision • Runny nose • Sweating • Nausea/vomiting • Abdominal cramps • Diarrhea	 Medical Control Order	1 NA Kit
	Moderate Symptoms and Signs	• Constricted pupils • Difficulty breathing • Severe vomiting	Constricted Pupils	2 NA Kits
	Severe Signs	• Constricted pupils • Unconsciousness • Seizures • Severe difficulty breathing	Constricted Pupils	3 NA Kits (If 3 NA Kits are used, administer 1st dose of available benzodiazepine)

PEDIATRIC < 8 years of age	**Pediatric Patient with Non-Severe Signs/ Symptoms**	• *Mild or moderate symptoms as above*	Threshold Symptoms *-and-* Positive evidence of nerve agent or OPP on site  Medical Control Order	1 NA Kit
	Pediatric Patient with Severe Signs/ Symptoms	• Constricted pupils • Unconsciousness • Seizures • Severe difficulty breathing	Severe breathing difficulty Weakness	1 NA Kit

Used in the Following Protocols
Nerve Agent/Organophosphate Pesticide Exposure (Section 10 Special Operations)

Prednisone

Pharmacological Category: Corticosteroid, Systemic

Routes: PO

Indications:
1. Allergic Reaction
2. Inflammatory respiratory issues

Contraindications:
1. Hypersensitivity to steroids
2. Known systemic fungal infections
3. Children ≤ 6 years of age
4. Inability to take PO medication

Expected effects:
1. Decreased inflammation

Side effects:
1. Retention of fluids

Notes:
1. Do not cut prednisone tablets

Dosing: ANAPHYLAXIS ALLERGIC REACTION
Indication: If patient is symptomatic of an allergic reaction but not in a severe allergic reaction or anaphylaxis OR after epinephrine administration.
Adults administer:
1. Prednisone tablet 50 mg PO

Pediatrics > 6 years of age administer:
1. Prednisone tablet 50 mg PO

Dosing: ADRENAL CRISIS
Indication: Patients with a known history of adrenal insufficiency, experiencing signs of crisis.
Adults administer:
1. Prednisone tablet 50 mg PO

Pediatrics > 6 years of age administer:
1. Prednisone tablet 50 mg PO

Dosing: ADULT RESPIRATORY DISTRESS
Indication: Respiratory distress patients with wheezing or diminished breath sounds due to asthma or COPD
Adults administer:

1. Prednisone tablet 50 mg PO

Dosing: PEDIATRIC RESPIRATORY DISTRESS, FAILURE, OR ARREST
Indication: Pediatric respiratory distress patients with suspected bronchospasm (wheezing)
Pediatrics > 6 years of age administer:

1. Prednisone tablet 50 mg PO

Used in the Following Protocols
Anaphylaxis/Allergic Reaction (Section 1 General Treatment)
Adrenal Crisis (Section 1 General Treatment)
Respiratory Distress (Section 3 Adult Treatment)
Pediatric Respiratory Distress, Failure or Arrest (Section 4 Obstetrics and Pediatrics)

Sodium Bicarbonate

Pharmacological Category: Alkalinizing Agent; Antacid; Electrolyte Supplement,

Indications:
1. Cardiac arrest in dialysis patient with suspected hyperkalemia
2. Symptomatic tricyclic antidepressant overdose
3. Acidosis related to crush injury
4. Hyperkalemia

Contraindications:
1. Severe pulmonary edema
2. Known Alkalosis

Precautions:
1. Must flush IV line between medications
    a. Calcium and epinephrine are not compatible with sodium bicarbonate
2. Administer slowly

Dosing: GENERAL CRUSH INJURY
Indication: If extrication is prolonged, and/or hyperkalemia is suspected.
Adults administer:
1. Sodium bicarbonate 100 mEq IVP prior to extrication. May repeat 50 mEq/hr IVPB or slow IVP

Pediatrics administer:
1. Sodium bicarbonate according to MI MEDIC cards
2. If MI MEDIC cards are not available administer Sodium bicarbonate 1 mEq/kg (max dose 50 mEq) IVP

Dosing: POSIONING/OVERDOSE/ENVIRONMENTAL EXPOSURE GENERAL CRUSH INJURY
Indication: symptomatic tricyclic antidepressant ingestions (tachycardia, wide complex QRS)
Adults administer:
1. Sodium bicarbonate 50 mEq IV. Repeat as needed

Pediatrics administer:
1. Sodium bicarbonate according to MI MEDIC cards.
2. If MI MEDIC cards are not available administer Sodium bicarbonate 1 mEq/kg IV. Repeat as needed

Dosing: ADULT CARDIAC ARREST
Indications: Cardiac arrest with known or highly suspected tricyclic antidepressant overdose or known or highly suspected hyperkalemia (e.g., dialysis patient, EKG changes)
Adults administer:

1. Sodium bicarbonate 1 mEq/kg IV/IO

Dosing: PEDIATRIC CARDIAC ARREST
Indication: Cardiac arrest with hyperkalemia (renal failure)
Pediatrics administer:
1. Sodium bicarbonate according to MI MEDIC cards
2. If MI MEDIC cards are not available administer Sodium bicarbonate 1 mEq/kg IV/IO

Used in the Following Protocols:
General Crush Injury (Section 2 Trauma and Environmental)
Poisoning/Overdose/Environmental Exposure (Section 2 Trauma and Environmental)
General Cardiac Arrest (Section 5 Adult Cardiac)
Pediatric Cardiac Arrest – General (Section 6 Pediatric Cardiac)