

ORANGE COUNTY EMERGENCY MEDICAL SERVICES BASE HOSPITAL TREATMENT GUIDELINES CRUSH INJURIES - ADULT/ADOLESCENT

BH-T-20 Page:

Date: 04/01/13

BASE GUIDELINES

- 1. Determine ALS Standing Order treatments/procedures rendered prior to base hospital contact. Use ALS standing order as guidelines for treatments/procedures not initiated prior to base hospital contact.
- 2. BH-T-20/SO-T-20 Crush Injuries- Adult/Adolescent orders apply to crush injury of muscular regions of the legs, pelvis, arms, and shoulders and do not apply to isolated crush injuries of hands or feet. Treat hand or foot crush injuries as isolated skeletal fractures per BH-T-05/SO-T-05 General Injury and Trauma-Adult/Adolescent.
- 3. For continued signs of hypovolemia or poor perfusion;
 - Continue Normal Saline as a wide open infusion to attain or maintain perfusion.
- 4. For continued uncontrolled pain when BP greater than 90 systolic:
 - ► May repeat or give Fentanyl 50 mcg IV/IM or Morphine Sulfate 5 mg IV (or IM if formulation used approved for IM use), repeat once after 3 minutes for continued pain if systolic BP greater than 90 (maximum total dose of Fentanyl 200 mcg, Morphine 20 mg).

ALS STANDING ORDER

- 1. Assist ventilation with BVM when indicated.
- Obtain pulse oximetry; if oxygen saturation less than 95%, administer:
 - High flow oxygen by mask as tolerated.
- IV/IO access in unaffected limb and administer:
 - ▶ 250 mL Normal Saline bolus, prior to release of compression force.
- For signs of hypovolemia or poor perfusion;
 - Continue Normal Saline as a wide open infusion to attain or maintain perfusion.
- For possible hyperkalemia:
 - Albuterol 6 mL (5 mg) nebulized continuous inhalation as tolerated.
- If crush injury duration greater than one (1) hour:
 - Sodium bicarbonate (NaHCO3) one 50 mL prefilled syringe IV/IO.
- 7. For pain (systolic BP > 90):
 - ▶ Morphine sulfate 5 mg (or 4 mg carpuject) IV (alternate route of IM may be used if formulation approved for IM use), may repeat once after 3 minutes for continued pain.

OR

- ► Fentanyl 50 mcg IV/IM(alternate route 100 mcg IN), may repeat once after 3 minutes for continued pain.
- Release compression and extricate patient.
- Non-compressive splints and dressings as needed.
- 10. Keep affected limb at level of the heart to decrease edema.
- 11. ALS escort to nearest ERC or contact Base Hospital if patient meets PTRC criteria.

Approved:

