TREATMENT PROTOCOL: DECOMPRESSION EMERGENCY

1. Basic airway
2. Spinal immobilization prn
3. Oxygen via non-rebreather mask at 15L/min or greater/pulse oximetry
   DO NOT use oxygen powered breathing devices (i.e., CPAP) on these patients
4. Advanced airway prn
5. Cardiac monitor: document rhythm and attach ECG strip if dysrhythmia identified
6. Venous access prn
7. If hypotensive,
   Normal Saline
   10mL/kg fluid challenge, reassess for pulmonary edema at each 250mL increments
   Stop infusion if pulmonary edema develops
8. ESTABLISH BASE CONTACT (ALL)
9. If hypotensive unresponsive to fluid challenge:
   Push-dose Epinephrine
   Mix 1mL Epinephrine 0.1mg/mL (IV formulation) with 9mL Normal Saline in a 10mL
   syringe. Administer diluted Push-dose Epinephrine 1mL IV/IO every 1-5 minutes,
   titrate to maintain a SBP >90mmHg
10. If active seizure (may include tonic and/or clonic activity or focal seizure with altered
    level of consciousness):
    Midazolam
    2-5mg slow IV push, titrate to control seizure activity
    5mg IN or IM if unable to obtain venous access
    May repeat one time in 5min, maximum total adult dose 10mg all routes
11. Consider hypothermia
12. Base hospital shall contact the Medical Alert Center for on-call physician and patient
    destination