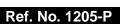
DEPARTMENT OF HEALTH SERVICES COUNTY OF LOS ANGELES

Treatment Protocol: GI / GU EMERGENCIES



- 1. Assess airway and initiate basic and/or advanced airway maneuvers prn (MCG 1302)
- 2. Administer **Oxygen** prn (MCG 1302)
- 3. Initiate cardiac monitoring prn (MCG 1308)
- 4. Establish vascular access prn (MCG 1375)
- For poor perfusion (MCG 1355):
 Normal Saline 20mL/kg IV rapid infusion per MCG 1309
 For persistent poor perfusion, treat in conjunction with TP 1207-P, Shock/Hypotension
- 6. Assess and document pain (MCG 1345) If abdominal or pelvic pain during pregnancy, or vaginal bleeding with known or suspected pregnancy treat per TP 1217-P, Pregnancy Complications Consider the following Provider Impressions: If abdominal or pelvic pain – document Abdominal Pain/Problems If pain in penis, scrotum or testes in a male or complaints of vaginal symptoms in a female, or if for sexual assault – document Genitourinary Disorder
- 7. For pain management: refer to *MCG* 1345, *Pain Management* Dose per *MCG* 1309
- 8. For nausea or vomiting in patients ≥ 4years old: Ondansetron 4mg ODT
- 9. Consider the following Provider Impressions:
 - If nausea or vomiting present in the absence of abdominal pain or diarrhea document Nausea / Vomiting •
 - If vomiting blood or coffee ground material and/or tarry/black stools document Upper GI Bleeding
 - If vaginal bleeding without known pregnancy document Vaginal Bleeding
 - If diarrhea without hypotension document Diarrhea
 - If bleeding per rectum document Lower GI Bleeding @

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SPECIAL CONSIDERATIONS

- When evaluating an infant or child with vomiting, the presence of bile (green vomitus) in the vomit is a surgical emergency and must be taken as a sign of a life-threatening condition. These patients need rapid transport to the closest EDAP.
- 2 For both upper and lower GI bleeding, if abdominal pain is also present, document GI bleeding as primary provider impression and abdominal pain as secondary provider impression.



