

### **Medications Administered IV**

Abciximab (ReoPro)  
Adenosine / Adenocard (>1 dose)  
Acetadote IV  
Aggrastat  
Amiodarone  
Atropine  
Ativan IM or IV (>1 dose)  
Brethine  
Calcium Chloride / Gluconate  
Cardene  
Cardizem (>1 dose or drip)  
Corlopam  
CroFab  
D50W (>1 dose)  
Diazepam (for status epilepticus)  
Diltiazem (>1 dose or drip)  
Digibind  
Dobutamine  
Epinephrine or Adrenalin  
Epi SQ for anaphylaxis  
Fenoldopan  
Furosemide >1 dose  
Eptifibatide (Integrilin)  
Esmolol  
Glucagon  
Haldol IV or IM (>1 dose or severe agitation)  
Heparin for PE or ACS  
Insulin Drip  
Isuprel  
Kayexelate for hyperkalemia  
Labetalol (>1 dose)  
Levophed  
Lidocaine (IV not SQ)

- Lopressor (3 doses)  
Lorazepam (for active sz)  
Lovenox (for PE or ACS)  
Mannitol  
Metoprolol (3 doses)  
Mucomyst (PO)  
Naloxone  
Narcan  
Natrekor  
Neosynephrine  
Neseritide  
Nicardipine  
Nipride  
Nitroglycerine  
Nitroprusside  
Norepinephrine  
Octreotide  
Oxytocin  
Phenobarbital (for status epilepticus)  
Pitocin  
Potassium (severe hypokalemia)  
Procainamide  
Pronestyl  
Propanolol  
Sodium Bicarbonate  
Streptokinase  
Terbutaline  
Theophylline  
Thrombolytics (Retavase, TNKase)  
Tirofiban  
Trandate (3 doses)  
Tridil  
Valium (for active sz, or severe agitation)

### **Critical Vital Signs / Labs**

Unstable Vital Signs, consistent with organ failure

- O2 sat <90%
- Respirations >25 or <5
- Signs of distress with breathing (intercostal retractions, nasal flaring, Cheyne-Stokes)
- Temperature >104 or <95
- HR >150 or <40
- Systolic BP > 230 or <70
- Diastolic BP >130 or < 40
- GCS <12

### **Electrolyte Imbalance**

Na <120 or >150

K <2.5 or > 6.5

Ca <6 or >13

Mag <1.5 or >5

Bicarb <10 or >40

PLT <20k

### **Other labs**

- ABG pCO2 <10 or >60  
pO2 <60, pulse ox <90%  
pH <7.25 or >7.6
- Hgb <7
- Trop positive
- WBC <2K or >20K



- **Management Options**

1. Medications - see previous page
2. Procedure may include
  - Non tunneled or triple lumen cath
  - ET intubation / Vent Management
  - Thoracostomy tube
  - Pericardiocentesis
  - Pacemaker Insertion
  - Cardioversion
  - Cricothyrotomy
  - Intraosseous IV
3. Use of Bipap, CPAP or high flow O-mask (100% non rebreather or >40% venti-mask).
4. 2 liter fluid bolus or 20cc/kg in kids
5. Transfuse Blood or blood products in the ER
6. O- blood give to trauma patient

- **Clinical Scenarios:**

1. unstable VS or clinician trying to prevent deterioration
2. Time before and after successful CPR if more than 30 minutes
3. Need for patient to go to the OR immediately (ruptured liver or spleen, perforated viscous, free air or excessive blood, torn thoracic or abdominal aorta, torn pulmonary vasculature or bronchus, extremity or Fournier's gangrene or ruptured esophagus)
4. Trauma related sub-trochanteric hip, femur or pelvic fracture, and/or injury to solid organ with tachycardia or SBP <100
5. Post traumatic quadriplegia or paraplegia or cord hematoma with neurologic complaints
6. Cervical fracture / subluxation with or w/out neurological deficit
7. Stab or gunshot wounds of chest, abdomen, neck or other areas necessitating near immediate OR exploration or repair.
8. Obduntation or other types of significant mental status change secondary to trauma or medical reason.

9. GCS < 12
10. Tension PTX, Large PTX >25%, or hemothorax.
11. Fracture requiring fasciotomy or burn with escharotomy.
12. Angulated fracture / dislocation with skin tenting.
13. Acute STEMI or nSTEMI taken to cath lab
14. Acute STEMI or nSTEMI with thrombolytic meds given in the ER.
15. ACS requiring Heparin and/or Integrillin or ReoPro
16. Accelerated HTN requiring IV vasoactive drugs.
17. Acute thrombotic CVA with thrombolytic meds given in the ER
18. Hemorrhagic CVA or subarachnoid bleed.
19. Traumatic subdural or epidural hematoma and/or depressed skull fx.
20. Chemical cardioversion if CP, SOB, or diaphoresis.
21. Electrical cardioversion on all patients.
22. Bradyarrhythmia requiring external or internal pacemaker (HR <40)
23. Patient unstable (see V/S section of this sheet)
24. Warming blanket for hypothermia (Biar Hugger)
25. Patients who require BiPap, CPAP, or high flow oxygen
26. Patients who require ETT
27. Patients with Dx of PE (with therapy provided)
28. Significant dehydration, sepsis, DKA, rhabdomyolysis or other conditions requiring IV fluid boluses.
29. Treatment of hypo/hyperkalemia, hypo/hypercalcemia, hypo/hyponatremia.
30. Head trauma, drug or ETOH overdoses, status epileptics, allergic reactions, croup or foreign body requiring dry close observation for airway control.
31. Mesenteric Ischemia with abdominal pain and lactic acidosis
32. NG or Gastric lavage for GI bleed or ingestion if abnormal VS
33. Significant trauma secondary to suicidal attempt
34. Venomous snake bite
36. Mesenteric thrombosis
37. Upper airway obstruction with stridor (severe croup / epiglottitis)
38. Anemia with active bleeding
39. Need for more than 1 IV or IM Haldol or Ativan for agitation or violent behavior control.
40. Need for IV acetadote / PO Mucomyst for Acetaminophen OD
41. Sepsis, Bacteremia, Meningitis or other severe infection with IV antibiotic therapy.



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