NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

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Subject:

Treatment Guidelines - ALS

Gastrointestinal Bleeding

Associated Policies:

I. Priorities

- A. ABC's.
- B. Identify signs of shock.
- C. Identify signs of active critical bleeding Vomiting fresh blood (Hematemesis), passing of fresh blood in feces (Hematochezia) or both.
- D. Obtain medical history including of previous GI bleeding, cirrhosis and current medications.
- E. Identify additions signs of bleeding source (upper or lower GI bleeding) "Coffee ground" emesis, or melena.
- F. Rapid transport, if unconscious or conscious with progressive symptoms.

II. Gastrointestinal Bleeding

- A. Ensure patent airway. Have suction ready for active hematemesis.
- B. Oxygen per Policy # 6030.
- C. IV access with large gauge catheter fluid bolus 250cc-500cc for hypotension. If time allows obtain a second IV.
- D. Zofran per Policy # 5438 for nausea and/or vomiting.
- E. Notify receiving hospital early for unstable patients with signs of active bleeding.

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