NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

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Subject:

Treatment Guidelines – ALS

Toxic Gas Inhalation

Associated Policies:

I. Priorities

- A. ABC's.
- B. Determine degree of physiologic distress: respiratory rate > 20, use of accessory muscles, cyanosis, inadequate ventilation, depressed level of consciousness.
- C. Maintain airway, oxygen therapy, and ventilation support.
- D. Rapid transport, if unconscious or conscious with progressive symptoms.

II. Toxic Gas Inhalation

Respiratory distress caused by inhalation of toxic gases by history. Suspect carbon monoxide with history of fire in an enclosed space, symptoms of headache, dizziness, or cherry-red coloration of mucous membranes (late sign).

- A. Remove patient from toxic environment with attention to safety of rescue personnel.
- B. Oxygen high flow. If carbon monoxide suspected, consider 100% via non-rebreathing mask.
- C. Cardiac monitor.
- D. Pulse oximetry.
- E. Contact base hospital.
- F. IV access TKO.
- G. If wheezing, consider Albuterol per Policy # 5329

Approved:	J' -	Date: 4/25/24
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