

# Monterey County EMS System Policy



Protocol Number: MP-2  
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## ROUTINE MEDICAL CARE - PEDIATRIC

### BLS CARE

Scene safety and use of universal precautions.

Patient assessment and scene evaluation. Determine the mechanism of injury/nature of illness.  
Determine the number of patients.

Request additional assistance as needed. Consider additional ambulances, law or fire-based resources, EMS Agency support, Environmental Health, and HazMat as needed.

Spinal precautions as appropriate.

Airway management.

Breathing support.

Circulatory support.

Position the patient as appropriate for their condition.

Prepare the patient for transport.

Re-assess the patient.

Maintain warmth.

Document assessment findings and treatments rendered on the First Responder Report.

### ALS CARE

ALS patient assessment and scene evaluation.

Advanced airway management as needed.

Breathing support.

Circulatory support.

Transport. Movement of the patient to the hospital should occur as early as possible.

Venous access and IV fluids as appropriate based on patient condition. Consider **Normal Saline fluid bolus 20cc/kg IV/IO**. May repeat as needed for signs of shock. Pre-existing peripheral indwelling vascular access may be used if unable to establish an IV and IO access is not indicated with base hospital contact.

Re-assess the patient.

Base Station contact or hospital notification.

Document assessment findings and treatments rendered on the Patient Care Report. See Patient Care Report policy for more specific guidance.

## **NOTES:**

Pediatric patients are considered to be eight years of age or younger. Use age of less than 15 to determine if pediatric for trauma classification.

See Airway Management procedure for additional guidance on managing the patient's airway and in providing breathing support.

Oxygen delivery as appropriate for the patient's condition is part of breathing support.

Circulatory support includes patient positioning, control of external bleeding, chest compressions, external cardiac pacing, IV fluids, tourniquets, and/or other activities to assist in maintaining the patient's Blood Pressure at an adequate level.

Patient positioning is an important consideration for airway maintenance, circulatory support, patient comfort, and patient management.

Venous access and IV fluids are appropriate for patients who need fluid replacement, IV medication administration, or where the paramedic believes that the patient may benefit from having IV access in place.

Scene evaluation is important for EMS responder, patient, and bystander safety. The scene should also be evaluated to provide information to better understand the patient's condition.

Patient assessment should include the initial assessment to evaluate for life threats. Life threats must be managed at this point before further examination and the history is obtained. The focused history and physical exam will take place after immediate life threats are managed. Each patient shall have a BP taken to include both the systolic and diastolic measurement as part of their baseline vital signs.

Collect patient medications and bring them to the hospital ED. Document the patient's medications and allergies to medications on the PCR.

If BLS measures are adequate to benefit/improve the patient's condition, and further benefit would not be gained by ALS interventions, do not institute ALS measures.

Follow appropriate treatment protocols based on the patient's presentation. Use of more than one protocol may be required to manage the patient.

Transport of the patient shall be as early as possible. The time on-scene for trauma patients should be 10 minutes or less and 15 minutes or less for medical patients.

Length-based resuscitation tape may be used to determine drug dosages for pediatric patients. This should be considered a guide only and dosages adjusted based on actual weight of the patient as needed.

## Pediatric Vital Signs Chart

AGE	MEAN WEIGHT IN KG.	MINIMUM SYSTOLIC BP	NORMAL HR	NORMAL RR	ET TUBE SIZE
Premature	<2.5	40	120-170	40-60	2.5-3.0
Term	3.5	60	100-170	40-60	3.0-3.5
3 months	6	60	100-170	30-50	3.5
6 months	8	60	100-170	30-50	4.0
1 year	10	72	100-170	30-40	4.0
2 years	13	74	100-160	20-30	4.5
4 years	17	78	80-130	20	5.0
6 years	20	82	70-115	16	5.5
8 years	25	86	70-110	16	6.0
10 years	30	90	60-105	16	6.5
12 years	40	94	60-100	16	7.0