

	<b>Department Name Address</b>	<b>ILS</b>	<b>EMT/Intermediate</b>
		<b>Revision #</b>	
		<b>Implementation Date</b>	
<b>Protocol</b>	<b>3.2.31 Near Drowning - Pediatric</b>	<b>Last Reviewed/Update Date</b>	
<b>Author / Owner</b>		<b>Medical Director</b>	

Near drowning patients may or may not be conscious. Regardless of how well a patient has seemed to recover, all near drowning patients must be transported to the hospital. Delayed death or complications due to pulmonary edema or aspiration pneumonia may occur.

1. Baseline care standards.
2. If trauma is suspected, take full cervical spine precautions and immobilize patient.
3. Protect patient from hypothermia.
4. Administer O<sub>2</sub> 15L per minute via mask.
5. Attach pulse oximeter.
6. Initiate IV Normal Saline TKO.
7. Manage airway per protocol.
8. If patient's systolic blood pressure is < 80 mmHG + (years in age x 2):
  - Elevate legs.
  - Administer 20 ml/kg fluid bolus. Repeat to maintain systolic BP >90 mmHg.
9. Call for ALS intercept.
10. Transport to the nearest appropriate hospital.

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*Medical Director's Signature*

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*Date*

Disclaimer:

The protocols have been developed by the North Dakota Department of Health are meant to be used as general guidance for developing protocols for individual emergency medical services agencies. These sample protocols are not meant to be medical or legal advice; nor do they establish standards of care. Each emergency medical services agency must tailor protocols based on their specific needs or capabilities. Local medical directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. directors must be consulted with and approve any protocol(s) prior to becoming operational in an emergency medical services agency. The North Dakota Department of Health make no representation on the accuracy of information contained herein and accepts no liability for any loss or damage arising from any content error or omission.