

WEST MICHIGAN REGIONAL PROTOCOL

DROWNING/NEAR DROWNING PROTOCOL

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Purpose: To provide a process for the assessment and management of drowning or near drowning incidents.

- M B S P**
- I. Assessment Information**
- A. History:
1. Current History: mechanism of injury, submersion time, water temperature, type of water
- B. Specific Objective Findings: vital signs, including breath sounds; signs of trauma
- II. Management**
- A. Establish and maintain the airway with spine stabilization, if risk of trauma. Provide oxygenation and support ventilations as needed.
- B. **If pulse is absent**, CPR per AHA/ARC standards.
1. If submersion time is greater than 2 hours, immediately contact Medical Control for possible referral to the Dead On Scene Policy.
 2. Monitor EKG.
 - a. If monitor or AED indicates defibrillation warranted, defibrillate up to three shocks.
 3. Obtain patient's temperature:
 - a. 4 minutes rectally.
 - b. Axillary site is permissible, but rectal is preferred and is required in transport longer than 15 minutes.
 4. Prevent further heat loss by transport in a warm environment (> than 90° F). Patient should be dry. No other active re-warming unless directed by Medical Control.
 5. **If patient temperature is > 86° F**, go to appropriate Cardiac Arrest Protocol.
 6. **If patient temperature is < 86° F**, refer to Hypothermia/Frostbite Protocol.
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CONTACT MEDICAL CONTROL

7. **Possible orders post-radio contact:**
 - a. Medications or further defibrillation as ordered by Medical Control.
 - b. Immediate transport per area Destination Policy.
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- C. If pulse is present:**
1. Monitor EKG.
 2. Obtain patient's temperature:
 - a. 4 minutes rectally.
 - b. Axillary site is permissible, but rectal is preferred and is required in transfers longer than 15 minutes.
 3. If patient is hypothermic, go to Hypothermia/Frostbite Protocol.
 4. Prevent further heat loss by transport in a warm environment (> 90° degrees F). Patient should be dry. No other active re-warming unless directed by Medical Control.
 5. Continued support of oxygenation and ventilation.
 6. Consider vascular access.
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CONTACT MEDICAL CONTROL

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7. **Possible orders post radio contact:**
 - a. Medications as ordered
 - b. Immediate transport

- M B S P**
- III. **Special Considerations**
 - A. Patient suspected of hypothermia should receive gentle handling, as movement may precipitate VF.

5/12/98