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| **BLS Treatment** |
| * Assess circulation, airway, breathing, and responsiveness.
* Position of comfort. Position supine as tolerated if SBP < 90 or dizzy.
* NPO. Unless otherwise noted
* Oxygen as indicated; with appropriate adjuncts as indicated.
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| **ALS Treatment****Current American Heart Association Guidelines concerning Emergency Cardiac Care assessments and interventions shall always take precedence over local protocols when there is a conflict concerning techniques of resuscitation.** |
| * **Aspirin**
* 12-lead must be done prior to administration of **Nitroglycerin (NTG)** or **Morphine Sulfate**.
* IV with **Normal Saline** TKO, large bore if possible.
* **Nitroglycerin (NTG)**
* **Morphine Sulfate**
* **Ondansetron**
* **Normal Saline** fluid bolus
* **Dopamine**

**USE 12-LEAD ECG TO DETERMINE SAFETY OF NITROGLYCERIN ADMINISTRATION** * Determine presence of ST elevation in leads II, III and AVF. If ST elevation is present, then apply V4R lead.
* If ST elevation in V4R, DO NOT give **NTG** (in order to maintain RV filling pressure).
* If no ST elevation in V4R and no clinical signs of shock, including SBP < 90 Hg, then it is safe to give **NTG**.
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