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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. |
| **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**. |