Soft Tissue & Orthopedic Injuries

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow **General Pre-hospital Care Protocol**.
2. If appropriate, stabilize cervical spine and immobilize patient per **Spinal Immobilization Procedure**.
3. Assess and maintain adequacy of neurovascular function before and after immobilization.
4. Attempt to control all bleeding.
   A. Utilize direct pressure.
   B. Use dressing and bandaging as needed.
   C. Elevate and immobilize for additional control.
   D. Utilize pressure points if direct pressure fails to control hemorrhage.
   E. Use of tourniquet as indicated according to procedure.
5. Assess pain on 1-10 scale.

PARAMEDIC

PAIN MEDICATION OPTION
(Choose One)

☑ Pre-Medical Control Order
OR
☐ Post-Medical Control Order

NARCOTIC ANALGESIC OPTIONS
(Select Options)

☑ Fentanyl 50 – 100 mcg (1 mcg/kg) IV/IO, may repeat every 5 minutes until maximum of 3 mcg/kg

☑ Morphine Sulfate 2-5 mg (0.05 mg/kg) IV, may repeat dose every 5 minutes until maximum of 20 mg.

6. If Analgesia indicated:
   A. Administer narcotic analgesic per MCA selection.
   B. Reassess and document 1-10 pain score after each dose of analgesia.

MFR/EMT/SPECIALIST/PARAMEDIC

7. Immobilize or splint orthopedic injuries as appropriate
   A. Traction splinting is for isolated femur fractures
   B. Straighten severely angulated fractures if distal extremity has signs of decreased perfusion.
   C. Consider pelvic binder (if available) for suspected pelvis fracture with hypotension.

8. **Partial/complete amputations and/or severe crush injuries**
   A. Cover wounds with sterile gauze dressings moistened with normal saline.
   B. Align in anatomical position if indicated. Splint and elevate extremity.
   C. Recoverable amputated parts should be brought to hospital as soon as possible.
   D. Wrap amputated part in sterile gauze dressing moistened with normal saline. Seal in a plastic bag and, if available, place bag in container of ice and water. DO NOT place part directly on ice or dry ice.
   E. Continuous monitoring of circulation, sensation, and motion distal to the injury during transport.

9. Impaled objects are left in place and stabilized. Removal of impaled objects is only with approval of medical control.

10. Follow local MCA transport protocol.

Post-Medical Control:
PARAMEDIC

1. Consideration sedation per **Patient Sedation Procedure**.