Dane County EMS Newsletter

October, 2020



A County that CARES

2020 has seen great effort put in to ensuring the best possible outcome for patients experiencing cardiac arrest in and around Dane County. Two examples of the county's initiatives include the roll out of highperformance CPR training and cardiac arrest summary feedback to crews after a resuscitation attempt. A significant piece of the chain of survival is bystander CPR.

PulsePoint has become part of the EMS culture throughout Dane County. Launched in early 2015, use of the App continues to grow. Between February and August of 2020, EMS agencies in and around Dane County

attempted resuscitation on 217 cardiac arrest patients. In the same time, 111 devices were alerted to cardiac arrest events though the PulsePoint App. Shown here is a graph of the follower growth in Dane County along with those who have opted in to receive CPR alerts.

29046			3365
14079		 	1474

*Data source for attempted resuscitations is the Dane County Cardiac Arrest Registry to Enhance Survival (CARES) website.

Viz Quiz

- 24 year old male who is complaining of headache, fever, malaise, left eye pain with tearing and redness, feels like vision is a little blurry.
- Noted painful rash develop on his nose yesterday.
- What is the diagnosis? What is the most appropriate field management?
- Are there any specific precautions or concerns for the EMS provider caring for this patient?





https://coreem.net/core/traumatic-ocular-injuries/

September Follow-Up

- Suspected ruptured globe due to foreign body
- Protect the eye from any pressure or inadvertent contact by placing a rigid shield during transport.
- Impaled foreign bodies should be left undisturbed.
- Consider antiemetics if applicable to reduce increased pressure from vomiting.

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Ask the Doc

Non-opioid pain management: Is Toradol the Right Choice? In recent years the use of opioids for pain control by healthcare providers across all aspects of medicine has come under some intense scrutiny (and for good reason). One of the more commonly used medications (and great adjuncts!) for acute pain is ketorolac or more commonly called Toradol. So what do I, as a field provider, need to know about giving a patient Toradol?

In approaching answering this question I think it's useful to do it in the context of the 5 rights of medication administration.

<u>Is this the right medication?</u> Toradol is most commonly used in EMS for those with mild to moderate pain as either a first line pain medication or as a second line medication as an adjunct. Toradol has also been seen to be effective in decreasing fevers though is typically not first line and generally not indicated for this in prehospital care. ¹

<u>Is this the right patient?</u> Specific contraindications include: allergies/hypersensitivities to NSAIDs, recently taken an NSAID, if the patient has a history of peptic ulcers or GI bleed, if there is concerns for an acute potentially serious bleeding issue, if the patient has a history of a bleeding disorder, if the patient is pregnant (which in prehospital medicine this precaution applies to any woman of child bearing age!), or if the patient has a history of or is currently experiencing renal failure (something to consider in patients > 65 years old, those who are potentially septic, or are hypotensive since many of these patients will have an acute kidney injury). Ketorolac is contraindicated in patients <2 years of age and should not be first line in pediatric patients. <u>What's the dose?</u> Please follow your specific protocols. There was a recent research article that demonstrated that lower doses of Toradol may be just as effective as higher doses!!²

<u>How do I give it?</u> You can give Toradol via IV or IM. <u>Can I re-dose?</u> You most certainly can, but only do so every 4-6h. And I hope you're never in a position to be managing someone's pain for that long!³

Toradol is a great medication to use as a first line agent for mild to moderate pain or in conjunction with other pain medications. Just be mindful of making sure you have the right patient without any contraindications!

1. Vargas, R. Evaluation of the antipyretic effect of ketorolac, acetaminophen, and placebo in endotoxin-induced fever. J Clin Pharamcol. 1994 Aug: 34(8):48-53 2. https://rebelem.com/ketorolac-analgesic-ceiling/

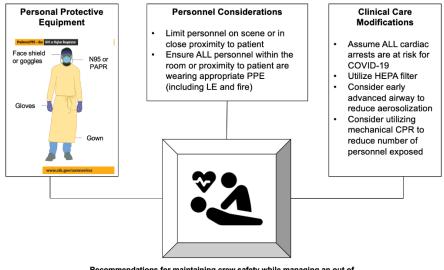
3. FDA information on Toradol:

https://www.accessdata.fda.gov/drugsatfda_docs/label/2013/019645s019lbl.pdf

Have a question you want answered or just an idea for a topic? Email us at dcems@countyofdane.com!

Spotlight

With the recent increase in Covid-19 cases, we would like to remind providers how to best keep yourselves and those around you safe.



Recommendations for maintaining crew safety while managing an out of hospital cardiac arrest during the COVID-19 pandemic

Upcoming Events and Training

10/15, 6:30-8:30 pm: SSM Health EMS Monthly Training – "When Hearts Attack" Register at <u>http://bit.ly/ssmemstraining</u>

10/29, 6-7 pm: UW Health EMS Stroke Education Night

Register at uwhealth.org/strokenight

11/4, 6-9 pm: DCEMS CEVO IV Lecture Register through your Director or Training Director

11/5, 6-7 pm: UW Health - STEMI in the COVID-19 Era

Register at uwhealth.org/STEMICOVID

11/12, 6:30-8:30 pm: SSM Health EMS Monthly Training Register at <u>http://bit.ly/ssmemstraining</u>

Thank you for reading! For questions, comments, or feedback you can contact the DCEMS office at <u>dcems@countyofdane.com</u> or by calling 335-8228. All other staff contact information can be found at <u>em.countyofdane.com/EMS/contactus.</u>