SwedishAmerican EMS
STANDING MEDICAL ORDERS
EMT – PARAMEDIC

SMO: Nitrous Oxide (Nitrous Oxide 50% and Oxygen 50%)

Overview: Nitrous Oxide is used to decrease pain and suffering in patients over the age of 16 with multiple trauma, burns, extremity injury, back injury and immobilizing fractures. Nitrous oxide is an anesthetic that can be used as an analgesic when administered in a 50/50 mix (with oxygen).
*****Nitrous Oxide to be used only by approved Provider*****

INFORMATION NEEDED
__Patient age
__Initial Assessment
__History of present event
__ Pain Assessment

OBJECTIVE FINDINGS

__ General appearance
__ Mental status
__ Respiratory rate, Rhythm and pattern
__ Perfusion status

Contraindication
__ Patient with hypersensitivity
__ Altered state of consciousness from head injury, drug or alcohol abuse
__ Inability to comply with instructions
__ COPD
__ Acute pulmonary edema
__ Pneumothorax
__ Maxillofacial injuries
__ Decompression sickness
__ Chest trauma
__ Pregnant patients
__ Air embolism
__ Air transport
__ Undiagnosed abdominal pain or marked distention
__ Hypotension
__ Myocardial infarction

Procedure

__ Complete initial trauma care
__ Assessment should include careful auscultation of lungs
__ Instruct the patient on the use of Nitrous Oxide.
__ Allow the patient to use the Nitrous Oxide.
__ Make sure the ambulance is well ventilated.
__ If patient's condition worsens, discontinue Nitrous Oxide immediately

Documentation of adherence to protocol:

__ When Nitrous Oxide is used a Nitrous Oxide Quality Improvement Form shall be completed by EMS service and sent to SwedishAmerican EMS office (see attached form)

Medical Control Contact Criteria
__ *contact Medical Control if any questions regarding the best treatment options for the patient

PRECAUTIONS AND COMMENTS

__ Onset and Duration
    Takes effect in 1-3 minutes
    Wears off in 1-3 minutes
__ Side Effects
    Light headedness, drowsiness, anxiety, nausea/vomiting, tingling sensation, numbness, slurred speech, dizziness, euphoria
__ Fire Hazard
    Similar to oxygen

SwedishAmerican Hospital
Emergency Medical Services System

Nitrous Oxide QI Form

Patient Name _____ Date _____ Time _____

Patient Transported To _____

ALL BELOW HAVE BEEN RULED OUT:

_____ Head Injury
_____ ETOH Ingestion
_____ Other Drug Ingestion
_____ Maxillofacial Injuries
_____ Pneumothorax / Chest Trauma
_____ Abdominal pain / marked distention
_____ COPD
_____ Pulmonary Edema
_____ Asthma
_____ Pregnancy
_____ Hypotension
_____ Myocardial Infarction
_____ Inability to comply with instructions

	Time	***BP***	***P***	***R***	***LOC***
STARTED					
ENDED					

Was Medical Control on-line or off-line _____

Percentage (%) Concentration: _____

EFFECTIVENESS OF PAIN RELIEF / OTHER PATIENT RESPONSES:

_____

_____

_____

Paramedic Signature: _____

Send this form and copy of run sheet to EMS Coordinator, Swedish American EMS, 1401 East State Street, Rockford, Illinois, 61108 after each call using Nitrous Oxide