

Southern Illinois Regional EMS System

DD-9 OPHTHALMIC EMERGENCIES

ALS/ILS/BLS

Management:

- Patient Assessment and Initial Care protocol
- Oxygen therapy as appropriate
 - 1-6 LPM by cannula: minimal distress.
 - 12-15 LPM by NRB mask: moderate/severe distress with signs of hypoxia.
 - 15 LPM by BVM: inadequate rate/effort, severe distress, unstable.
- Maintain SpO₂ > 94%
- (ALS / ILS) Initiate IV/IO of NS at 20cc/hr. (TKO)
- Initial Ophthalmic Trauma Care:
 - Quickly obtain gross visual acuity in each eye:
 - Light perception
 - Motion
 - Ask to read name badge
 - Assess pain on scale of 0-10.
 - Assess tearing, spasm of lids.
 - Assess for signs of injury:
 - Cornea
 - Conjunctiva
 - Sclera
 - Discourage patient from actions that increase intraocular pressure:
 - Sneezing
 - Coughing
 - Straining
 - Bending at waist
 - Vomiting precautions

Chemical Splash/Burn:

- True emergency:
 - Rapid Transport
- Initial ophthalmic trauma care.
- Thoroughly and continuously irrigate affected eye(s) using copious amounts of saline instilled through IV tubing.
 - Start irrigation ASAP.
 - Continue while en-route to the hospital.

Central Retinal Artery Occlusion:

- Initial ophthalmic trauma care.
- True emergency:
 - Rapid Transport.

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DD-9 OPHTHALMIC EMERGENCIES (continued)

Corneal Abrasions:

- Observe for:
 - Profuse tearing
 - Severe pain
 - Redness
 - Spasm of eye lid
- Initial ophthalmic trauma care.
- Elevate head of stretcher to 45% angle.
- Have patient keep eyes closed:
 - Do not apply eye patch.

Penetrating Injury/Ruptured Globe:

- Observe for signs of:
 - Penetration
 - Peaked pupil
 - Excessive edema of conjunctiva (chemosis).
 - Subconjunctival hemorrhage
 - Blood in anterior chamber (hyphema).
 - Defect on sclera or cornea.
 - Foreign body
 - Impaled object
- Initial ophthalmic trauma care
- Do not remove impaled objects:
 - Do not irrigate eye
- Avoid all pressure on injured eye:
 - Cover with:
 - Cup or metal/plastic protective patch.
 - May patch injured eye or both eyes depending on patient's ability to tolerate bilateral patches.
- Elevate head of stretcher to 45% angle.

ALS/ILS Note:

- Morphine **2 - 10mg** IVP for relief of severe pain per Medical Control.