

Southern Illinois Regional EMS System

II-14 ENDOTRACHEAL ADMINISTRATION OF MEDICATIONS

Policy:

- To establish guidelines for endotracheal administration of medications when a patient IV cannot be established in a timely manner during respiratory and/or cardiac arrest scenario.

Equipment:

- Gloves and additional PPE as necessary
- Medication to be administered.
- Syringe to transfer medications or previously prepackaged, assembled syringe with medication.

Procedure:

- Don PPE
- Assemble all necessary supplies and equipment:
- Check for the six rights of medication administration as well as:
 - Expiration date
 - Seal leakage
 - Contamination
 - Abnormal color or cloudiness
- Confirm the order/dosage by writing it down
- Ascertain if the patient has an allergy to the medication or fluid you are to administer
- Prepare the prefilled cartridge or syringe of medication
- Assess patient to determine the necessity for endotracheal administration of medication:
 - Medication cannot be given by intravenous route
 - Medication is compatible with endotracheal administration
- Administer the medication via the ET tube:
 - Total volume instilled should be between:
 - 10 and 20ml in the adult patient
 - 3 and 10ml in the child
 - Dosing per appropriate protocol
- Hyperventilate the patient for 29-30 seconds and remove the bag-valve-mask unit
- Inject the medication into the ET tube
- Reattach the bag-valve-mask unit and promptly resume ventilations
 - Ventilate the patient using 100% oxygen and wait 1-2 minutes before suctioning via the endotracheal tube
- Monitor the patient for:
 - The desired therapeutic effects
 - If patient has any lung capacity compromise, it may be difficult to administer the entire contents of the syringe

Documentation

- Who attempted/performed the task
- Name, concentration and dosage of medication
- Any complications or undesired side effects
- Were desired therapeutic effects attained?
- Time medication administered