

AMPUTATIONS / TOOTH AVULSIONS

ALL PROVIDERS / EMT

- ☐ Focused history and physical exam
- ☐ Cardiac monitor, ETCO₂, and pulse oximetry monitoring, when available
- ☐ **Treatment Plan**
 - Maintain airway, apply oxygen as needed to maintain SaO₂ 90-94%.
 - Unless this is an isolated injury, consider spinal motion restriction per the *Spinal Motion Restriction Guideline*.
 - Treat for pain and anxiety per the *Pain and Anxiety Management Guideline*.
 - Monitor closely for signs of shock, especially in amputations above the wrist or ankle.
- ☐ **Amputated Body Parts and/or Tissue**
 - Apply direct pressure to control hemorrhage. A tourniquet is frequently required to control hemorrhage from amputation or near-amputation, when direct pressure is ineffective or impractical.
 - If amputation is incomplete, cover stump with sterile dressing saturated in NS, splint affected digit or limb in baseline physiologic position.
 - All easily retrievable tissue should be transported.
 - Rinse part(s) with NS.
 - Wrap tissue in sterile gauze moistened with NS.
 - Place tissue into plastic bag or container.
 - Place bag/container into separate container filled with ice (if available)
 - Do not allow tissue to come into direct contact with ice, do not freeze, and do not submerge in water.
- ☐ **Tooth Avulsion**
 - If tooth is out over 30 minutes, broken, or cannot be re-implanted on scene.
 - Handle tooth by chewing surface only (avoid touching the root).
 - Rinse with water. Do not scrub, dry, or wrap tooth in tissue or cloth.
 - Place tooth in container of (**in order of preference**)
 - Patient's saliva (place in patient's mouth, if patient awake and alert)
 - Alternatively, it may be placed in a container with milk or normal saline
 - If tooth is out less than 30 min, you may attempt re-implantation (only permanent teeth) on scene (primary or "baby" teeth should not be re-implanted).
 - Do not try to re-implant if more than 2 teeth are involved.
 - The tooth must be cleanly avulsed with the entire root present.
 - Only re-implant if it is one of the front 6 upper or lower teeth.
 - Patient must be conscious and cooperative.
 - Gently insert tooth back into the appropriate location without forcing it. Do not worry about positioning well.
- ☐ **Key Considerations**
 - Consider transportation of extremity amputation patients directly to a trauma center.

ADULT

AEMT

- ☐ Advanced airway, vascular access and fluid therapy.

PARAMEDIC

PEDIATRIC (<15 years of Age)

NOTE: Pediatric weight based dosing should not exceed Adult dosing.

AEMT

- ☐ Advanced airway, vascular access and fluid therapy.

PARAMEDIC