LCFD OFFLINE MEDICAL CONTROL

Protocol 914: INTRAOSSEOUS VASCULAR ACCESS "E-Z (I/O) or Illinois Bone Needle"

ADVANCED EMT / PARAMEDIC (LCFD RESCUE/AMBULANCE PERSONNEL ONLY)

RATIONAL:

This protocol is for the LCFD Paramedic/ Advanced EMT assigned to an Ambulance or Rescue and addresses the establishment of I/O access in the adult/pediatric patient where venous access cannot be rapidly obtained. The "E-Z IO" or Illinois Bone needle will provide a rapid alternative means of vascular access into the bone marrow of the proximal tibia or proximal humerus in the critically unstable adult, or in a cardiac arrest patient. The tibial marrow space serves as a "non-collapsible vein" and provides access to the general circulation for the administration of all ACLS resuscitation drugs and IV fluids.

INDICATIONS:

Attempts at establishing a peripheral line have failed (2 attempts, or 90 seconds or no readily venous access is identified) in the following:

Adult/Pediatric cardiac arrest after attempts at peripheral lines have failed, or no readily venous access is identified.

Consider the Illinois bone needle (18 ga.) in neonates (< 30 days of life).

An E-Z IO may be placed in a conscious patient under the following circumstances:

- Pt. is deemed critically ill/injured with unstable vital signs
- No peripheral vascular access is readily accessible
- Follow the above listed procedure concerning placement
- 2% preservative and epinephrine free lidocaine (intravenous lidocaine) will be used

EQUIPMENT-ADULT

- E-Z IO or Illinois bone needle
- Alcohol preps and gloves
- E-Z stabilizer and tape
- · IV tubing
- · 1000 ml bag of NS
- · 10 ml prefilled NS syringes
- Pressure bag