

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8068.04
	<u>PROGRAM DOCUMENT:</u> General Medical Complaint	Initial Date:	01/24/19
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Signature on File

Signature on File

EMS Medical Director

EMS Administrator

Purpose:

- A. To establish a treatment standard for adult patients who have a general medical complaint not covered by any other treatment policy.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Protocol:

1. ABC's/Routine Care-Supplemental O₂ as necessary to maintain SPO₂ ≥ 94%. Use the lowest concentration and flow rate of O₂ possible.
2. Identify any potential illness or injury and treat per appropriate policy.
3. If the patient has ALOC, consider possible causes using AEIOU-TIPS:
 - A – Alcohol, abuse of substances
 - E – Electrolytes
 - I – Infection
 - O – Oxygen (hypoxia), overdose
 - U – Uremia
 - T – Trauma, tumor, child maltreatment, toxic substance (or adverse reactions to medications)
 - I – Insulin (hypoglycemia)
 - P – Poisoning, Psych
 - S – Seizures, Sepsis, Stroke, Subarachnoid Hemorrhage
4. Consider ALS assessment as appropriate per county policies

NOTE: This policy is intended for medical complaints that do not fit in any other treatment category after careful assessment of general or non-specific medical complaints for specific causes. EMS personnel should be able to articulate the need for treatment. Any ALS intervention must be directed by another treatment policy. Transport as appropriate.

Cross Reference: PD# 8002 – Diabetic Emergency (Hypoglycemia/Hyperglycemia)
 PD# 8003 – Seizures
 PD# 8004 – Suspected Narcotic Overdose
 PD# 8015 – Trauma
 PD# 8018 – Overdose and/or Poison Ingestion

PD# 8020 – Respiratory Distress: Airway Management
PD# 8026 – Respiratory Distress
PD# 8038 – Shock
PD# 8060 – Stroke