

SUSPECTED RESPIRATORY INFECTION COMPLAINT

Initial Date: December 21, 2020

Revised Date:

Section 11-78

This protocol is for trained CIP Paramedics only. If during assessment, procedure, or treatment the patient is found to have a medical emergency in need of hospital treatment, the CIP visit will be suspended, and local MCA protocols utilized.

Purpose: To provide guidelines for CIP paramedics to assess a patient with suspected respiratory infection complaints, provide initial treatment and differentiate between the patients who will require ED evaluation vs, alternatives such as treatment on scene or at alternative destinations.

Aliases: Viral URI, cold, flu.

- I. Follow **CIP Patient General Assessment and Care protocol**
- II. Obtaining additional history and vital signs including the following:
 - a. Time of onset, duration of complaint
 - b. History of previous similar complaints and treatment required
 - c. Presence of systemic symptoms: fever, chills, diaphoresis, weakness, dizziness, changes in mental status, breathing difficulty, chest pain, etc.).
 - d. SpO₂
 - e. **Specimen and Collection protocol**
- III. Patients with any of the following, consider transport to ED **see CIP Medical Direction protocol:**
 - a. Systemic symptoms
 - b. Vital sign changes or instability
 - c. Presence of blood in sputum
 - d. Presence of pain
 - e. Altered level of consciousness
 - f. Hypoxia on room air
 - g. Presence of fever
- IV. On-scene medication administration may include:
 - a. Use of approved MCA protocols and medications up to the extent of standard paramedic treatment according to protocol.
 - b. Fluid
 - i. IV fluid bolus up to a maximum of 2 liters
 1. Caution with CHF and renal patients, consult physician prior to administration
 - c. Antibiotics for suspected respiratory infection upon physician's orders.
 - i. Azithromycin 250 mg tab PO. Two (2) on first day followed by 1 daily for 4 additional days
 - ii. Doxycycline 100 mg tab PO, BID
 - d. Antipyretics/Analgesics
 - i. Acetaminophen 325 mg PO (Max dose 650 mg)



Michigan
COMMUNITY INTEGRATED PARAMEDICINE
Treatment Protocol
SUSPECTED RESPIRATORY INFECTION COMPLAINT

Initial Date: December 21, 2020

Revised Date:

Section 11-78

- ii. Ibuprofen 200 mg PO (Max dose 600 mg)
- V. Counsel/Educate
 - a. PO recommendations
 - b. When to contact a health care provider