

NEAR-DROWNING

APPROVED: Gregory Gilbert, MD EMS Medical Director
Louise Rogers Interim EMS Administrator

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Information Needed:

- Description and temperature of fluid in which submerged
- Length of time submerged
- Depth and mechanism of injury
- Possibility of alcohol or other drugs/medications involved

Objective Findings:

- Evidence of head and/or neck trauma
- Neurologic status: monitor on a continuous basis
- Respiratory: rales or signs of pulmonary edema, respiratory distress

Treatment:

- Routine Medical Care
- Oxygen as indicated
- Pulse oximetry
- Stabilize spine prior to removing patient from water if there is any suggestion of neck injury
- If other trauma is suspected, refer to the appropriate Trauma protocol
- If hypothermic, see Hypothermia Protocol
- If dysbarism is suspected, see Decompression Illness protocol
- Wet clothing should be removed
- Advanced airway intervention, as necessary
- Cardiac monitor
- Consider IV access
- Consider CPAP

Precautions and Comments:

- Beware of neck injuries; collar and backboard can be applied in the water
- Be prepared to manage vomiting. Patient on spine board should be prepared for log-rolling
- All near drownings or submersions less than an hour should be transported.
- Any patient can deteriorate rapidly
- If the patient is hypothermic, defibrillation may be unsuccessful until the patient is warmed
- Alcohol/drugs may interfere with respiratory drive and/or cardiac rhythm
- Ensure that trained water rescuers are on scene if necessary