



Prehospital Care Bundles

The MLREMS Prehospital Care Bundles have been created to provide a simple framework to help EMS providers identify the most critical elements when caring for a patient. These bundles do not replace protocol, but are designed to assist quality assurance and performance evaluations as we work collectively to optimize the delivery of prehospital medicine. As the science and evidence changes, so will these care bundles.

The New York State Collaborative Protocols and the MLREMS Care Bundles are intended to improve patient care by prehospital providers. They reflect current evidence and the consensus of content matter experts. The Collaborative Protocols and the MLREMS Care Bundles are intended to provide principles and direction for the management of patients that are sufficiently flexible to accommodate the complexity of care in the prehospital environment. No Protocol or Care Bundle can be written to cover every situation that a provider may encounter, nor are they substitutes for the judgement and experience of the provider. Providers are expected to utilize their best clinical judgement to deliver care and procedures according to what is reasonable and prudent for specific situations. However, it is expected that any deviations from protocol shall be documented along with the rationale for such deviation.

**NO PROTOCOL OR CARE BUNDLE IS A SUBSTITUTE FOR
SOUND CLINICAL JUDGEMENT.**



Suspected Opioid Overdose Care Bundle

Suspected Opioid Overdose

| Metric | Goal |
|------------------------------|---|
| Manage the Airway | Maintain patent airway with adjunct as necessary |
| Support Breathing | Support ventilation and oxygenation as necessary |
| Support Circulation | Support circulation as necessary; start CPR when indicated |
| Naloxone Administration | Consider naloxone administration if inadequate respiratory effort |
| Re-assess respiratory effort | Consider re-dosing naloxone per protocol if respiratory effort remains compromised |
| Suicide Screening | Assess intent of opioid overdose |

Theory/Evidence

Manage the Airway

- Opioid overdoses cause apnea and maintaining a patent airway is the first essential step in supporting respiration.

Support Breathing

- While maintaining a patent airway, ventilate and oxygenate per protocol.

Support Circulation

- Support airway, breathing and circulation before administering naloxone.

Naloxone Administration

- Administer to reverse the respiratory depression of the suspected opioid overdose. The goal of naloxone administration is to restore adequate, spontaneous respiratory effort, not to regain consciousness.

Re-assess Respiratory Effort

- Re-evaluate respiratory effort after the administration of naloxone to determine if additional doses are indicated. The duration of action of naloxone is shorter than some opioids.

Suicide Screening

- Patients who are suicidal must be transported to the hospital for appropriate psychiatric evaluation; involve law enforcement as appropriate.