

## Class 3 IFT-Paramedic Treatment Protocol

# 3101

### **Volume Expander**

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This protocol covers blood, blood products, and colloid volume expanders. **All of these components must be infusing prior to transport.** Blood must be infusing via the appropriate tubing with normal saline IV spiked for infusion after the transfusion is complete. Colloid volume expanders may be re-administered and titrated by the Class 3 IFT-Paramedic (C3-IFT-P).

#### A. Perform **Class 3 IFTA Protocol 9203**.

- B. Treatment for whole blood, packed red blood cells, platelets, fresh frozen plasma, and other blood components or elements:
  - If patient condition or diagnosis requires the administration of more than one already infusing blood product, contact **Medical Command** for aeromedical or CCT ground transport arrangements.
  - 2. Continue the infusion rate as set by the **sending physician**. All blood products are monitor only for the C3-IFT-Paramedic.
  - 3. Monitor and document vital signs every 15 minutes during infusion.
  - 4. When transfusion is complete, infuse normal saline IV at 100 ml/hr or at a rate ordered by the **sending physician**.
  - 5. Monitor patient closely for nausea, vomiting, chills, fever, itching, rash, dyspnea, back pain, chest pain, or other signs of a transfusion reaction.
  - 6. In the event of a transfusion reaction, discontinue blood product infusion immediately, reassess patient and vital signs, and **contact MCP** for possible management orders.





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- C. Treatment for colloid administration:
  - 1. Colloid volume expanders (Hespan, Plasmanate) can be re-administered, titrated, and monitored by the C3-IFT-Paramedic.
  - 2. In the acute hypovolemic patient, isotonic crystalloid infusion should be considered prior to the administration of IV colloids.
  - 3. Colloid infusions must infuse at the rate set by the **sending physician** and may be re-administered or titrated after **consultation with the MCP**.



- 4. Monitor and document vital signs every 15 minutes during infusion.
- 5. Monitor patient closely for nausea, vomiting, chills, fever, and hives.
- 6. When infusion is complete, infuse normal saline IV at 100 ml/hr or at a rate ordered by the **sending physician**.

# SPECIAL NOTE: Blood and blood products must have been infusing for at least 15 minutes prior to leaving the facility.