



INLAND COUNTIES EMERGENCY MEDICAL AGENCY POLICY AND PROTOCOL MANUAL

Reference No. 15040
Effective Date: 07/01/25
Supersedes: 05/01/24
Page 1 of 2

RESPIRATORY DISTRESS (Authorized Public Safety Personnel)

I. FIELD ASSESSMENT/TREATMENT INDICATORS

- Victim's respiratory (breathing) rate appears slow or shallow; or victim is unresponsive and not breathing.

II. PUBLIC SAFETY INTERVENTION

Slow or Shallow Respiration and/or Decreased Consciousness

- Ensure EMS has been activated using the 9-1-1 system.
- Maintain standard blood and body fluid precautions. Use appropriate personal protective equipment (gloves, face shield).
- Check for responsiveness using verbal or painful stimuli.
- Open the airway using Basic Life Support techniques.
- Place nasopharyngeal/oropharyngeal airway as indicated.
- Administer oxygen using nasal cannula or non-rebreather mask as indicated.
- Place patient on left side to avoid inhaling any possible vomit.
- Report use of nasopharyngeal/oropharyngeal airway or administration of oxygen to EMS field personnel for documentation on the electronic patient care report (ePCR).
- Public safety personnel shall complete report per the public safety agency's policy.

Not Breathing/Unresponsive

- Ensure EMS has been activated using the 9-1-1 system.
- Maintain standard blood and body fluid precautions. Use appropriate personal protective equipment (gloves, face shield).
- Begin CPR (chest compressions with ventilation if bag valve mask (BVM) is available).
- Obtain AED if possible.
- Continue CPR as indicated.
- Place nasopharyngeal/oropharyngeal airway as indicated.
- Administer oxygen using non-rebreather mask or BVM as indicated.
- Consider environmental causes of decreased breathing, such as possible opioid overdose or exposure to nerve agents.

- Report use of nasopharyngeal/oropharyngeal airway or administration of oxygen to EMS field personnel for documentation on the ePCR.
- Public safety personnel shall complete report per the public safety agency's policy.