



ORANGE COUNTY EMERGENCY MEDICAL SERVICES
Prehospital Standing Orders / Treatment Guidelines
DECOMPRESSION SICKNESS / AIR EMBOLISM
(Adult / Adolescent)

#: E-010
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Original Date: 11/86
Revised: 10/01/2026

Notes/Definitions

- Early recognition, high concentration oxygen administration, supportive care, and rapid transport are essential to reduce complications and improve outcomes.

Base Hospital Contact Required

BLS Interventions

- Refer to OCEMS General BLS Standing Orders SO-BLS.
- Spinal motion restriction if diving or shore-break accident suspected.
- Administer 100% O₂ via mask as soon as possible.
- Prevent and treat hypothermia by removing wet clothing and initiating rewarming when appropriate.

ALS Interventions

- Cardiac monitoring.
- 12-lead ECG if applicable.
- Establish IV / IO access.
- Consider advanced airway management.
- Provide IV hydration to prevent bubble formation:
 - ▶ **Normal Saline 250 mL IV / IO bolus**
- If hypotensive (Systolic BP < 90) or signs of shock noted after initial IV NS bolus given:
 - ▶ **Normal Saline 250 mL IV / IO bolus** – may repeat up to a total of 1 liter to maintain adequate perfusion
 - ▶ **Push Dose Epinephrine 1.0 mL (10 mcg) IV / IO** – every 3 minutes, titrate to SBP > 90
- Treat for nausea and vomiting if not suspected or known to be pregnant:
 - ▶ **Ondansetron (Zofran) 8 mg ODT** - once
 - ▶ **Ondansetron (Zofran) 4 mg IV** – may repeat once after 3 minutes
- Treat for seizure activity:
 - ▶ **Midazolam 10 mg IM** – once (preferred route)
 - ▶ **Midazolam 5 mg IV / IN / IO** – if unable to deliver IM; may repeat once after 3 minutes

Transport Consideration

- ALS escort to nearest appropriate ERC identified by the **Base Hospital**.

Additional Considerations

- Onset of signs and symptoms of air embolism is rapid versus decompression sickness which may be delayed as much as 48 hours.
- Obtain diving history if available:
 - Type of dive
 - Type of gas used
 - Depth
 - Bottom time

Approved:

[Signature] MD

Review Date: 04/26

Final Date for Implementation: 04/01/2027



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- Number of dives
- Surface intervals
- Onset of symptom time

Base Hospital

- If mechanism or history is unclear, err on the side of transport to a Trauma Center.
- In remote areas, the Base Hospital may facilitate transport to the Catalina Hyperbaric Chamber from the field as needed.
 - Arrangements for emergency hyperbaric treatment of dive illness should be made by the contacted Base Hospital or receiving ERC by contacting the following:
 - ❖ Catalina Chamber 24-hour hotline: (310) 510-1053
 - ❖ Los Angeles County EMS Agency Medical Alert Center: (866) 940-4401
- Helipad Coordinates for the Catalina Chamber LZ are:
 - 33° 26' 41.171" N
 - 118° 29' 00.841" W
 - (Use WGC 84 Coordinate System)

Cross References:

SO-BLS General BLS Standing Orders

SO-M-035 Respiratory Distress

SO-M-040 Seizure / Convulsions

SO-M-045 Shock (Symptomatic Hypotension)

SO-M-060 Nausea / Vomiting

PR-030 Endotracheal Intubation (including EtCO₂)

PR-135 Supraglottic Airway Device Placement – Adult/Adolescent

PR-230 Preparation and Administration of Push Dose Epinephrine - Adult/Adolescent

Approved:

Review Date: 04/26

Final Date for Implementation: 04/01/2027