



Intraosseous Access

CRITERIA

- Cardiac Arrest (medical or traumatic)
- Profound hypovolemia with alteration of mental status
- Patient in extremis with immediate need for delivery of medications and or fluids

CONTRAINDICATIONS:

- Suspected narcotic overdose and/or hypoglycemia are **relative contraindications** for the use of intraosseous access.
- Fracture of the bone selected for IO infusion (consider alternate site)
- Excessive tissue at insertion site with the absence of anatomical landmarks (consider alternate site)
- Previous significant orthopedic procedures, IO within 24 hours, prosthesis; (consider alternate site)
- Infection at the site selected for insertion (consider alternate site)
- Severe osteoporosis or other bone degenerative conditions
- Intraosseous access is not appropriate for prophylactic access

PROCEDURE

- Identify the need for IO access. Consider IV prior to IO
- Insert the IO device according to the manufacturer's recommendation
- Flush IO site with **10 mL of 0.9% Normal Saline** to ensure patency and clear IO pathway
- Initiate IO infusion. A pressure infuser may be necessary to maintain flow rates **ADULT ONLY**.
Pressure infuser is contraindicated in Pediatrics
- **Lidocaine 1 mg/kg IO not to exceed 40 mg** titrated to pain effect. **NOTE: This dosing is not considered an antidysrhythmic**
- Apply wrist band provided with IO device