Drowning

History
- Submersion in water regardless of depth
- Possible trauma to C-spine
- Possible history of trauma ie: diving board
- Duration of immersion
- Temperature of water or possibility of hypothermia

Signs and Symptoms
- Unresponsive
- Mental status changes
- Decreased or absent vital signs
- Vomiting
- Coughing
- Apnea
- Stridor
- Wheezing
- Rhales

Differential
- Trauma
- Pre-existing medical problem
- Pressure injury (diving)
- Barotrauma
- Decompression sickness
- Post-immersion syndrome

Legend

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Universal Patient Care Protocol

Spinal Immobilization Protocol

Cardiac Monitor

Pulse Oximetry Capnography if Available

12-Lead ECG

Consider CPAP if available for respiratory distress

IV Protocol

Consider Albuterol or other Beta-Agonist for respiratory distress

Monitor and reassess

Appropriate Protocol based on symptoms

Notify Destination or Contact Medical Control

Pearls
- **Recommended Exam:** Trauma Survey, Head, Neck, Chest, Abdomen, Pelvis, Back, Extremities, Skin, Neuro
- Have a high index of suspicion for possible spinal injuries
- With cold water no time limit -- resuscitate all. These patients have an increased chance of survival.
- **Some patients may develop delayed respiratory distress.**
- All victims should be transported for evaluation due to potential for worsening over the next several hours.
- **Drowning is a leading cause of death among would-be rescuers.**
- **Allow appropriately trained and certified rescuers to remove victims from areas of danger.**
- With pressure injuries (decompression / barotrauma), consider transport to or availability of a hyperbaric chamber.