



**REHABILITATION / REHYDRATION – ADULT/ADOLESCENT**

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**FS-ARN STANDING ORDERS:**

1. Move to Rehabilitation Area and remove PPE to level of comfort.
2. Have fire-fighting personnel removed to shaded or air cooled setting with fans or increased air flow as available.
3. Encourage oral intake of a minimum of 8 oz. cooled balanced salt solution (sport drink without caffeine, 4%-8% or 0.5 g and 0.7 g carbohydrate per liter of solution). Allow consumption of as much fluid as desired.

Mild Dehydration (able to tolerate oral hydration without vomiting):

1. Within 10 minutes of arrival in the rest and Rehydration Area, conduct a brief, limited medical assessment including vital signs to determine if a more in-depth medical assessment or treatment is needed.
2. If victim is unable to tolerate oral hydration, or vital signs do not normalize (as defined in Policy #310.00), or if temperature is noted to be >101.4 F, classify as moderate/severe dehydration and initiate a Patient PCR (OCEMS Policy # 090.00).

Moderate/Severe Dehydration (Unable to tolerate oral hydration):

1. Establish IV access
  - ▶ *infuse 250 mL Normal Saline bolus, may repeat up to maximum 1 liter to maintain adequate perfusion.*
2. Initiate active cooling measures if body temperature above 98.6 F.
3. Initiate a PCR and arrange ALS transportation to the nearest ERC.

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Approved:

Review Dates:  
Final Date for Implementation: 04/01/2017  
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