ALS STANDING ORDERS:

1. Monitor and document cardiac rhythm with rhythm strip.
2. Pulse oximetry; if room air oxygen saturation less than 95%:
   - High-flow oxygen by mask or nasal cannula at 6 l/min flow as tolerated.
3. If chest discomfort or acute shortness of breath reported, consider 12-lead to evaluate for acute MI.
4. Assess for signs of hypovolemia; if hypovolemia suspected and lungs clear on auscultation and no signs of CHF:
   - Normal Saline, infuse 250 mL; because of high risk for developing CHF, give only one 250 mL bolus in the field and during infusion, reassess for evidence of developing rales or worsened shortness of breath.
5. ALS escort to nearest available ERC.