This standing order is for use when endotracheal intubation is indicated and sedation is required for support of the procedure (usually due to retained muscle tone, “clenched jaw”) or when an intubated patient requires continued ventilation support, but is having difficulty tolerating an endotracheal tube that is in proper position (usually reflex coughing or choking).

**ALS STANDING ORDERS:**

1. Assess perfusion and blood pressure, if systolic blood pressure greater than or equal to 90, consider Sedation:
   - *Midazolam 5 mg IV once*

2. Re-assess blood pressure, if below 90 systolic after midazolam:
   - *Give 250 ml normal saline bolus and reassess blood pressure*

3. Do not extubate patient after midazolam sedation.

4. Notify Base Hospital that sedation has been required to support maintenance of intubation ventilation support.

5. ALS escort to nearest ERC and re-contact Base Hospital as needed.