

Dr. Erin Burnham – Supervising Physician

2014 Changes to Protocols, Procedures and Medications

PROTOCOL CHANGES

- ACLS
 - Inserted Algorithm and removed wordy protocols to align with current ACLS
 - Clean up VF/VT & Asystole/PEA protocols
 - Dysrhythmias
 - Put each dysrhythmia into index TOC to make them easier to locate
 - Change versed dose for premedication
 - Hyperkalemia
- Albuterol for Basics
 - Added albuterol for treatment in both Allergic Reactions and Respiratory Emergencies
- Autonomic Dysreflexia
 - Protocol inserted into Hypertensive Emergency Protocol.
- Cardiac Arrest
 - Update to current ACLS; Passive oxygenation via NC for first 3 rounds
 - Put reference on each ACLS protocol to refer to ROSC
 - Separate ACLS Immediate Post-Cardiac Arrest Care algorithm (page 8 in handbook). (Currently in VF/VT)
 - Created ROSC protocol
 - Peds ROSC - Consider therapeutic cooling per current PALS guidelines
- Chest Pain
 - Added age guideline > 40 y/o since most healthy 20 & 30 year olds do not need evaluation for ACS
- CPAP
 - Added to EMT level in Respiratory Emergency & Drowning
- Diabetic Emergencies
 - Oral and IV Dextrose combined and D10 & D5 added
- Drowning/Submersion
 - Update Protocol to include CPAP
- Etomidate
 - Error in protocol - etomidate cannot be given IM
- Hypertensive Emergency
 - Add in drugs - ie nitropaste for hypertensive emergency with chest pain

- Medicine updates
 - Compared protocols with med sheets. Please pay special attention to errors or discrepancies in doses.
 - Respiratory Emergencies
 - Removed part about Atrovent being withheld if patient on Spiriva. Atrovent will temporarily block receptor that spiriva acts on, but will likely be beneficial in acute exacerbation.
 - RN
 - include note in introduction that RN can function to the level of their training to allow an RN with paramedic training to function at that level.
 - Taser Removal
 - Moved to PROCEDURES and edited
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PROCEDURE CHANGES

- CPAP – Added for EMT level
 - IO – Add humeral IO insertion
 - LVAD – Move to Procedures
 - On scene provider – Clarify to include non-physician providers
 - Tasers – Move Taser Protocol to Procedures & Simplify
 - Trauma System Criteria – Added new state guidelines to Procedures
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MEDICATION CHANGES

- BSS
 - Decreased max dose to 2L Adult or 40 ml/kg Peds 2° data showing excessive fluid resuscitation may be detrimental in Trauma Patients
- D10 Protocol
 - Oral and IV Dextrose combined; D10 and D5 added
- Epinephrine
 - Changed from mandatory consult over 40 to “Use with caution if patient is 50 years or older or has history of heart disease. Consider OLMC consult before administration.”

- Ketamine
 - Changed to show Pregnancy Category B
- Lidocaine
 - Combined lidocaine & premix protocols; Inserted Hixson Lidocaine chart for IO pain dosing
- Nitro Paste (AEMT, EMT-Intermediate, Paramedic)
 - Add for hypertension and chest pain (AEMT level)
- Versed (Paramedic)
 - Decrease seizure and sedation dose; increase induction dose