

Protocol Input from 2016-2018 Version

Section	Page	Protocol	Comment	Workgroup Input
Policy	7	DNR	give more detail in regards to DNR death in front of ems crew w/out ALS assistance, process if this happens	
Policy	8	Child/Elder	spelling - 6th paragraph may should be many	
Policy	8	Child/Elder	concern remains in the wording of RARE instance at bottom of page	
Medical	29	Post RSA	can give morphine and midaz 3 total times?	
Medical	30	Failed Airway	fix this page, it says no more than 2 total, but then lets you do 3 total. Also next to BVM on failed, add successful next to 93% to indicate if BVM works, stay with BVM	
Medical	35	asystole	Bicarb for suspected acidosis?	
Medical	36	Vfib/Vtach	add blood glucose as a consideration	

Medical	36	Vfib/Vtach	should the CPRx2minutes after defibrilate be there? Or should it just move to either CPR or CCR	
Medical	37	post ROSC	discussion on induced hypothermia	
Medical	38	Chest Pain	add a pearl about giving EMS dose of ASA even if patient took own	
Medical	40	Narrow Tach	Doesn't address WPW arrhythmias	
Medical	41	Wide Tach	spelling - bottom of page says narrow	
Medical	41	Wide Tach	review stable wide, for someone in stable v-tach, can we discuss amiodarone vs. SVT tx	
Medical	41	Wide Tach	says amiodorone over 10 minutes but doesn't say what to mix it in	
Medical	41	Wide Tach	should there be a defibrilate after the NS bolus with torsades?	
Medical	44	Allergic Reaction	only albuterol vs. Duoneb? Reason?	
Medical	52	Labor	remove "once cord stops pulsating" in cord box	

Medical	53	Newly Born	healthy babies on cardiac monitor and pulseox??	
Medical	66	Refusal after EMS treatment	Needs to address refusal after glucagon (BLS providers)	
Medical	67	Hypo	spelling - pearls, methlprenidsolone spelling error	
Trauma	72	trauma destination	step 4 - the decision tree seems to requirree you to contact medical control, without exception and for any level of acuity (no matter how minor) if the patient meets certain criteria - as written this could require a call for a 56y/o sprained ankle, 10 month old with low grade fever, etc.	
Trauma	91	TASER	spelling - Pyschiatric (PP-)	
Special	95	Public Safety Rehab	Reference NFPA earlier to assure we match standard	
Peds Medical	104	Asystole - Peds	bicarb dose is inconsistent with PALS, should be 1mEq/Kg, not 2	

Peds Medical	106	Neo ROSC	same bicarb dose issue	
Peds Medical	107	Post ROSC Peds	pearls speaks to calling MC to discuss therapeutic hypothermia, is that the term vs. induced?	
Medical	161	Narrow and Wide	unstable, imminent arrest sends medic to synchronized cardioversion procedure, need to be sure energy levels are listed.	
Procedure	161	Cardioversion	add doses	
Procedure	163	CPR	should address infant and neonate, also the peds cardiac arrest gives the peds ventilation rate but not infant	
Procedure	168	remote ischemic conditioning	a lot of clarification points also, was this used should it stay in the next version?	
Procedure	182	VAD	links don't work	
Procedure	183	Wound Care	add hemostatic info and wound packing	
Pharm	213	Morphine	spelling - perform/provide	
Pharm	214	Naloxone	spelling - perform/provide	
Pharm	214	Naloxone	add may repeat # and time between	

Pharm	218	Bicarb	spelling - hyperaldosteronism spelled wrong	
Medical	35 & 36	asystole and vfib	bicarb dose doesn't match - also there is a dash in asystole and a AND in vfib	
Medical/Trauma	NA	Pain	too many options, too many differences	
Trauma			Permissive hypotension discussion	
Policy			should we have a policy on service animals in ambulance?	
Procedure			add igel	
Policy			should we have a PPE policy, reference PPE book? Should we note wearing a mask with Cancer patients?	
Medical			TXA discussion	
Medical			dual synchronized shock discussion?	
Procedure			add Soft T instructions	
Medical			add more clarity to total number of doses allowed, ie. Epi, naloxone, etc. and time to wait between	
Medical			can we add alcohol wipe inhalation for nausea	I know this sounds crazy, but google it - this is being done in areas around the state apparently. Might be an option for our non medic agencies

Medical			should we add a Perivable protocol?	
Medical			Overdose section - a list of drugs that fall into each category would be helpful (ie. Opiate = morphine, vicodin, etc.	
Medical			should we add nitrous for pain	
Pharm		Famotidine	dilution not necessary	per all three hospital pharmacies the dilution is not needed
OTHER??			weight based fentanyl, INH, wide complex/narrow no lead elsewhere cardioversion joules, cardiac arrest vs. vfib protocol issue, ask for evaluation Medic exam, pain management - 4mg odan is weight based oops?	