	2022-2024 EMS Protocol Book Edits	Training Needed
	EMR has been added to all protocols	
	Hypotension defined as: SBP>100, MAP >65, or signs of improved perfusion	
	IV Bolus are not specified throughout protocols	
Policies	Transport Destination - SSM St. Mary's is now Level 2	
	HEMS - map of landing zones was removed	
	Physician Response Vehicle added	
	Criteria for Death and Termination were combined	
	Abandoned infant added	
	Dcoumentation of patient care and vital signs were combined	
	Patient without prototocl was removed	
	Physician Bystander on scene was renamed Medical Provider Bystander	
	Radio Report Format Updated	Х
Adult Medical	Airway Management - updated flow	Х
	RSA - updates to indications and times for each step have been removed	
	Post Airway Sedation - updated flow to be more symptom based	
	Removed Failed Airway as it is included in Airway Management	
	COPD Asthma - MDI added, Racemic Epi added, Epi now a range of 0.3-0.5, Midaz or Ketamine added for CPAP compliance if needed	Х
	Cardiac Arrest - addition of sedation if neede during resusiciation, added info on ECMO consideration, correctable causes on page 2 are sorted by level	Х
	ECPR / ECMO- Age >13 has been updated	
	Post Resuscitation - some additions in order of tx and re-arrest	Х
	Tachy - updated extensively, wide/narrow, Monomorphic/Polymorphic. Vagal maneuvers for A-EMT and above. Reference page 2 was removed	х
	Brady - updated by seperating analgesia/sedation for pacing  Allergic Reaction - flow chart has been divided into Allergic Reaction vs.  Anaphalaxis (no longer mild/moderate/severe)	Х
	Altered Mental Status removed	
	Behavioral/Excited Delirium changed title to Behavioral Emergencies - changes made to no longer differentiate moderate and severe agitation	Х
	Hypertension removed	

	IV Access - allows for viable site IV in cardiac arrest, Lidocaine added for IO	
	OB General - Sends to Seizure protocol vs. listing treatment here. Medical Control needed for Mag Sulfate, Med Control not necessary for TXA	
	Overdose - complete overhaul to simplify	Х
	Carbon Monoxide and Cyanide combined	
	Pain Mgmt - faces removed, moderate/severe combined in flow chart. IN fentanyl now 2mcg/kg, Fentanyl range for IV/IO/IM 0.5-1.0 mcg/kg, Ketamine dose now 0.25mg/kg, Ondansetron dose 0.15mg/kg, Ibuprofen dose 10mg/kg	X
	Seizure - med doses are weight based	
	Sepsis Screen - simplified to 2 steps	Х
	Shock/Hypotension - format changed to be one path but noted to think about Etiologies. Acute Adreanl Insufficiency is also highlighted outside the pearls.  Push dose epi option also added	
	Stroke - calling in stroke alert moved earlier in the flow chart. Not a change but a reminder to use BE-FAST vs. Cincinatti	Х
	Syncope / Near-Syncope added	Χ
	Thrombolytic Screening removed	
Adult Trauma	Destination Determination - a reminder that anyone <18 should go to pediatric trauma center	
	Burn - IV access moved lower in flowchart Adults and Peds	
	Traumatic Cardiac Arrest - Flow chart updated	Х
	Crush - Abnormal EKG removed from flow adults and peds	
	Long Board Selective Spinal Immobilization now called Selective Spinal Motion Restriction - Both Peds and Adults	
	Sexual Assualt removed - refer to protocol based on symptoms and reference policy	
	Shock/Hypotension Trauma updated to allow Norepi or push dose without medical control	
Pediatrics	WMD/Nerve Agent - Removed	
	Airway Management - updated flow similar to adult	
	RSA Peds - updates similar to adult, Ketamine no longer Medical Control	
	Post Airway Sedation - updated flow and allowing Ketamine without Medical Control, Roc can also be considered with medical control	
	Failed Airway - removed	
	Wheezing/Asthma - flow updated	
	Neonatal resuscitation - updated flowchart	

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