| ermont EMS Statewide Protocols | | | | | |
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| **Protocol** | **Name** | **Section** | **Change** | **Date** | **Classification** |
| 1.0 | Routine Patient Care | Circulation | Changed first subbullet to read "Apply a topical hemostatic agent, in combination with direct pressure, for wounds in anatomical areas where tourniquets cannot be applied and sustained direct pressure alone is ineffective or impractical. Only apply topical hemostatic agents in a gauze format that supports wound packing. Only utilize topical hemostatic agents which have been determined to be effective and safe in a standardized laboratory injury model." | 11/13/2014 | Clinical |
| | | Circulation | Change the name of Protocol 6.6 Tourniquet and Hemostatic Agent | 1/13/2015 | Grammatical |
| | | Disability Assessment | Changed 3rd and 4th bullets to reference spinal motion restriction. | 1/13/2015 | Clinical |
| | | Major Multiple System Trauma | Change long board to spinal motion restriction | 1/13/2015 | Clinical |
| 1.1 | Routine Patient Care - EMR | Circulation | Changed first subbullet to read "Apply a topical hemostatic agent, in combination with direct pressure, for wounds in anatomical areas where tourniquets cannot be applied and sustained direct pressure alone is ineffective or impractical. Only apply topical hemostatic agents in a gauze format that supports wound packing. Only utilize topical hemostatic agents which have been determined to be effective and safe in a standardized laboratory injury model." | 11/13/2014 | Clinical |
| | | Circulation | Change the name of Protocol 6.6 Tourniquet and Hemostatic Agent | 1/13/2015 | Grammatical |
| | | Scope of Practice | Change the name of Protocol 6.6 Tourniquet and Hemostatic Agent | 1/13/2015 | Grammatical |
| | | Disability Assessment | Second bullet: added "unless patient is alert and spontaneously moving neck without pain." Removed same on 2/10/15 | 1/13/2015 & 2/10/15 | No change |
| 2.1 | Adrenal Insufficiency | Paramedic | Added alternative injectable steroids. Added IO as a delivery method. | 1/13/2015 | Clinical |
| 2.2A | Allergic Reaction/Anaphylaxis - Adult | AEMT | Dropped reference to Epi (1:1,000) in favor of only autoinjector administration; readded it 1/13/15. | 11/13/2014 & 1/13/15 | Clinical |
| | | EMT and AEMT | Dropped (EpiPen) reference. More than one autoinjector manufacturer now, and epinephrine autoinjector is a clearly defined clinical term | 12/4/2014 | Clinical |

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| | | Paramedic | Changed second bullet from mixing to infusion with pump. Drop reference to Methylprednisolone. Struck "severe" from 2nd bullet re refractory to IM epi. Added nebulized epinephrine as alternative to DuoNeb. Added "to treat puritis (itching)" to Diphenhydramine bullet. Added "For Bronchospasm" to the DuoNeb bullet. Modified Epi dosing to 3 mg (3 mL) in 3 mL normal saline via nebulizer. | 1/13/2015 & 2/10/15 | Clinical |
| | | Pearls | Added last bullet to Pearls "Consider patients with history of asthma as having a high risk of anaphylaxis." | 1/13/2015 | Clinical |
| 2.2P | Allergic Reaction/Anaphylaxis - Pediatric | EMT | Changed weight from "between 10 kg and 35 kg." to "less than 25 kg." | 11/13/2014 | Clinical |
| | | AEMT | Changed weight range as referenced above. Removed reference to Epi (1:1,000). Readded on 1/13/15. Added epi via nebulizer. Added "May repeat x 2 as needed." to bolus for hypotension. | 11/13/2014 & 1/13/15 | Clinical |
| | | EMT and AEMT | Dropped (EpiPen) reference. More than one autoinjector manufacturer now, and epinephrine autoinjector is a clearly defined clinical term | 12/4/2014 | Clinical |
| | | Pearls | Added last bullet to Pearls "Consider patients with history of asthma as having a high risk of anaphylaxis." 2/10/15: Replaced Pearls with NH pearls. | 1/13/2015 & 2/10/15 | Clinical |
| | | Paramedic | Dropped reference to continuing Epi (1:1,000); readded it 1/13/15. Changed second bullet from mixing to infusion with pump. Drop reference to Methylprednisolone. Struck "severe" from 2nd bullet re refractory to IM epi. To same section, removed " infusion 0.1 – 1 mcg/kg/min, titrated to effect (infusion pump required)." and replaced with "(place 1 mg epinephrine (1:10,000) in 1000 mL 0.9% naCl for 1 microgram/mL). Infuse 0.1 – 2 micrograms/kg/minute via pump until symptoms resolve." Added nebulized epinephrine as alternative to DuoNeb. Added "For puritis (itching)" to Diphenhydramine bullet. Added "For Bronchospasm" to the DuoNeb bullet. For Epi bronchospasm dose, added 1.5 mg (1.5 mL)... | 11/13/14 & 1/13/15 & 2/10/15 | Clinical |
| 2.3A | Altered Mental Status - Adult | AEMT | Changed "D50" to "dextrose" | 12/4/2014 | Clinical |
| | | Pearls | Changed "D50" to "dextrose" | 12/4/2014 | Clinical |
| | | EMT | Changed bullet that begins "Transport patient using cervical…" to "If trauma can be excluded, transport patient in a coma/recovery position. If trauma suspected, see Advanced Spinal Assessment Protocol 6.0." Changed 02 to O2. | 12/4/2014 | Clinical |

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| 2.3P | Altered Mental Status - Pediatric | AEMT | Changed "D50" to "dextrose" | 11/13/2014 | Clinical |
| | | EMT | Changed bullet that begins "Transport patient using cervical…" to "If trauma can be excluded, transport patient in a coma/recovery position. If trauma suspected, see Advanced Spinal Assessment Protocol 6.0." Changed 02 to O2. | 12/4/2014 | Clinical |
| | | Pearls | Changed "D50" to "dextrose" | 12/4/2014 | Clinical |
| 2.5A | Asthma/COPD/RAD - Adult | AEMT and Paramedic | Dropped reference to Epi (1:1,000) in favor of only autoinjector administration. Not using EpiPen reference. More than one autoinjector manufacturer now, and epinephrine autoinjector is a clearly defined clinical term; readded epi 1/13/15. Methylprednisolone is IV/IO/IM. DuoNeb and Albuterol/ipratroprium bromide = 3 doses total. Added Dexamethasone and wording about injectable steroid. Changed first and second bullet of pearls to combine. | 11/13/2014 | Clinical |
| 2.5P & 2.XP | Asthma/Croup/RAD - Pediatric | ~~EMT~~ | ~~Change bullet that begins "Administer oxygen." and add "Maintain O2 saturation >=90%. Delete bullet that begins "For suspected croup…give humidified oxygen" Changed back to 94% on 1/13/15. Took out line about keeping child calm.~~ | 12/4/2014 | Clinical |
| | | ~~AEMT and Paramedic~~ | ~~Dropped reference to Epi (1:1,000) in favor of only autoinjector administration. Not using EpiPen reference. More than one autoinjector manufacturer now, and epinephrine autoinjector is a clearly defined clinical term. Changed AEMT to not routinely establish IV. Changing paramedic meds dosing. Changed pearls~~ | 12/4/2014 | Clinical |
| | | ALL | Adopted NH's draft of asthma, croup, bronchiolitis protocol | 2/10/2015 | Clinical |
| 2.7A | Diabetic Emergencies (Hyperglycemia/Hypoglycemia) - Adult & Pediatric | ALL | Broke out to 4 protocols: Hyperglycemia - Adult; Hyperglycemia - Pediatric (removed dosing chart, red flag and box); Hypoglycemia - Adult; and Hypoglycemia - Pediatric | 1/14/2015 | Clinical |
| 2.9 | Hypothermia (Environmental) - Adult & Pediatric | ALL | Sweeping changes - Now 2 pages. Added significantly to all sections and changed stages chart to include broader descriptions and treatment information. | 1/15/2015 | Clinical |
| 2.10 | Nausea/Vomiting - Adult & Pediatric | AEMT | Moved Ondansetron 4 mg IV/ODT (oral dissolving tablets) from Paramedic to AEMT section for Adults. Dropped IV in favor of just ODT. | 12/4/2014 | Clinical |
| | | Paramedic | Added new first bullet under Adult: "Ondansetron 4 mg IV/IM." | | |

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| 2.16A | Pain Management - Adult | Paramedic | Added "hypoventilation" before the phrase "allergic to narcotics" in the first bullet | 1/15/2015 | Clinical |
| 2.16P | Pain Management - Pediatric | Paramedic | Added "hypoventilation" before the phrase "allergic to narcotics" in the first bullet | 1/15/2015 | Clinical |
| 2.18A | Seizures - Adult | Paramedic & Pearls | Took out Diazepam PR dosing; Changed Pearl to read Diazepam and lorazepam are" | 2/12/2015 | Clinical |
| 2.18P | Seizures - Pediatric | Paramedic & Pearls | Took out Diazepam PR dosing; Changed Pearl to read Diazepam and lorazepam are" | 1/15/2015 | Clinical |
| 2.19 | Septic Shock - Adult | EMT | Added third bullet "Check finger stick glucose by glucometer." | 1/15/2015 | Clinical |
| 2.19P | Septic Shock - Pediatric | ALL | Adopted NH Pediatric Septic Shock Protocol in entirety | 1/15/2015 | Clinical |
| 2.20A | Shock - Adult | Intro | Added last sentence: "Provide advanced notification to hospitals for all patients with suspected shock." | 1/15/2015 | Clinical |
| | | Paramedic | Add bullet: Check serum lactate (if available and trained). | | |
| | | EMT | Distributive Shock: Changed "immobilization" to "motion restriction" | | |
| | | Paramedic | Distributive Shock: Changed last bullet to read: "For patient with history of adrenal insufficiency, administer stress dose of hydrocortisone 100 mg IV/IM (preferred) or other injectable steroid." | | |
| 2.20A | Shock - Pediatric | Intro | Added last sentence: "Provide advanced notification to hospitals for all patients with suspected shock." | 1/15/2015 | Clinical |
| | | Paramedic | Add bullet: Check serum lactate (if available and trained). | | |
| | | EMT | Distributive Shock: Changed "immobilization" to "motion restriction" | | |
| | | Paramedic | Distributive Shock: Changed last bullet to read: "For patient with history of adrenal insufficiency, administer stress dose of hydrocortisone 100 mg IV/IM (preferred) or other injectable steroid." | | |
| | | AEMT | Cardiogenic Shock: Changed last bullet to read: Contact Medical Control to consider 0.9% NaCl in 10 mL/kg bolus over < 15 min and repeat as tolerated. | | |

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| 4.3 | Musculoskeletal Injuries - Adult & Pediatric | EMT | Changed the bullet that begins "in a patient with a high risk mechanism" to "All patients that have a mechanism of inujry that could cause a spinal injury, including high risk or questionable injury mechanisms, should have a spinal assessment and spinal motion restriction if indicated. See Spinal Motion Restriction Protocol 4.X and Advanced Spinal Assessment Protocol 6.0." Changed name of Tourniquet Protocol to Tourniquet and Hemostatic Agent. | 12/4/2014 & 1/15/15 | Clinical |
| | | Pearls | Remove "long and short" from the first bullet. Removed first sentence from first bullet, regarding spinal immobilization devices. | 12/4/2014 & 2/11/15 | |
| 4.7X | Spinal Motion Restriction | New Protocol | | 11/25/2014 | Clinical |
| | | Edits to New Protocol | Added ", unless patient is alert and sponaneously moving neck" to 3rd bullet. Switched the words lift-and-slide tecnique and log roll in 10th bullet | 12/9/2014 | |
| | | Edits to New Protocol | Moved "Perform advanced spinal assessment" bullet to second position. Removed last bullet under red flag box that began "Patients without any findings…" | 12/4/2014 | |
| | | Edits to New Protocol | EAP: Third bullet under patients requiring spinal motion restriction: changed to "by using lift-and-slide or log roll technique" instead of "by using lift-and-slide technique and log roll." 2/11/15: Replaced this entire section with NH draft language. | 1/15/2015 & 2/11/15 | |
| 5.0 | Airway Management Procedure | Page 2 | Added i-gel to supraglottic airway list. Added high-flow nasal cannula to CPAP paragraph | 1/15/2015 | Clinical |
| 5.1A | Airway Management - Adult | AEMT | Added reference to i-gel. | 1/15/2015 | Clinical |
| | | Paramedic | Added bullet regarding placement of OGT to decompress stomach. (Per DW, OGT, not OGT/NGT.) Added reference to i-gel. | 2/11/2015 & 2/12/15 | |
| 5.1P | Airway Management - Pediatric | Paramedic | Changed this section to be more in line with NH. Added bullet regarding placement of OGT to decompress stomach. (Per DW, OGT, not OGT/NGT.) Added reference to i-gel. | 1/15/2015 & 2/11/15 & 2/12/15 | Clinical |
| 5.10 | Orotracheal Intubation | Paramedic - first page | Removed last sentence from first section. Under Procedure, #4, added line "Use video laryngoscopy, if available and trained." | 2/11/2015 | |
| | | Paramedic - 2nd page | Video-Laryngoscope: added to end of last sentence "and should be used if available and trained." Added line regarding using Percutaneous Cric. | 1/15/2015 & 2/12/15 | Clinical |
| 5.11 | Percutaneous Cricothyrotomy | Paramedic | Procedure: #1 - add sentence "Choose appropriate sized device." | 1/15/2015 | Clinical |
| | | | Indications: remove subbullet "age greater than 10" | | |

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| 6.0 | Advanced Spinal Assessment | Page 1 | Changed purpose statement. Changed "spinal immobilization" to "spinal motion restriction" throughout the protocol. Added reference to 4.7X Spinal Motion Restriction Protocol. Changed "Age less than 9 years." to "Child who cannot participate in assesment." | 11/13/2014 | Clinical |
| | | Page 2 | Eliminated "Unstable Vital Signs Abnormal Peripheral Perfusion" box. Changed "Patient Age <9 Or …" to "Child unable to participate, Or…" | | |
| 6.6 | Tourniquet & Hemostatic Agent | | Added "& Hemostatic Agent" to title. Reworked protocol to include indications and procedures for including topical hemostatic agents. Added External Hemorrhage Control Protocol flowchart to the bottom of the protocol. Added hollow bullet: Consider application of a second tourniquet just proximal to the first for failure to control bleeding. | 11/13/2014 & 2/11/15 | Clinical |
| 6.2 | Adult Medication Reference | Page 2 | Procedure 8, first hollow bullet: Drop 2 - 5 ML. Leave as 20 - 50 mg 2% lidocaine. | 12/4/2014 | Grammatical |
| 6.6 | | Entire Protocol | Changed name of protocol to add "& Hemostatic Agent" Entire protocol has been reworked. | 12/4/2014 | Clinical |
| 8.1 | Air Medical Transport | Clinical Conditions | Added: Burns: Major burns with greater than 20% BSA and/or inhalation injury with risk of airway compromise. | 2/11/2015 | Clinical |
| 8.15 | Resuscitation Initiation and Termination | Page 2 | Under Contact Medical Control to consider…: 3rd subbullet - wording changed to align with Hypothermia Protocol; added "non-hypothermic" to last bullet on page under Paramedic. | 1/15/2015 & 2/12/15 | Clinical |
| 8.15 | Trauma Triage | | Changed FAHC to UVMMC | 2/1/2015 | |
| Appendix 1 | Scope of Practice | | Ondansetron: Added "/IM" option. | 12/4/2014 | Clinical |
| | | | Lidocaine: Removed 2 - 5 ML. Left 20 - 50 mg. | | Grammatical |
| Appendix 3 | | Pediatric Airway | Removed check box under AEMT for King LT-D | 12/16/2014 | Clinical |
| Where to put ?? | Ebola Virus Disease | Entire Protocol | Protocol reworked; modified slightly 1/15/15 to include CDC link. 2/12/15: Page 1, modified contries involved in first box. | 12/5/2014 & 1/15/15 & 2/12/15 | Clinical |
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| Still to come | Changes to Meds Reference; Pediatric Color Coded Appendix; title and numbering changes throughout; link changes throughout. | | | | |

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| 5.X | i-gel Procedure | Entire Procedure | New. | 2/11/2015 | |