

SPEMS Protocol Changes
Advanced EMT (AEMT)
3/1/20 to 2/28/21

PROTOCOL CHANGES

- **Every Page**
 - Changed dates at bottom of each page
- **Cover Page**
 - Signature with March 1, 2020 date
 - Protocols will expire February 28, 2021
- **Throughout Protocols**
 - Removed all references to 2015 AHA Guidelines and replaced with Current AHA Guideline
- **Page P-2 Table of Contents**
 - Page numbers adjusted for changes
- **Page P-5 Medical Control Authorization Skills Proficiency Requirements**
 - Added pleural decompression to the list of required skills
 - Makes consistent with the SPEMS Skills Proficiency Form
- **Page P-16 Continuous Waveform Capnography**
 - Removed reference to induced hypothermia as it is no longer needed
 - Added to the indications: “Patients with dyspnea, head injuries, or any condition in which the AEMT feels would allow better monitoring and treatment of the patient”
- **Page P-21, P-22 and P-23 Spinal Precautions**
 - Formally called Spinal Clearance
 - Changes terminology to reflect Spinal Motion Restriction (SMR) rather than spinal immobilization
 - Use of a LSB or other rigid device no longer indicated in most cases
 - If spinal clearance cannot be achieved, the patient should have a c-collar applied and be placed on the stretcher with head elevated 20 to 30 degrees unless contraindicated.
 - **NOTE: All EMS personnel MUST carefully read and understand this protocol.**
- **Page P-53 BLS Equipment**
 - Addition of 25- START Triage Tags (START= Simple Triage and Rapid Transport)
 - Required by TDSHS rules for each ambulance to carry the 25 triage tags
- **Page P-56 Signature Page**
 - Date changed to 3/1/2020
 - EMS Director MUST sign
- **Throughout Treatment Algorithms**
 - Changed the date on the bottom to read 03/01/2020
 - Updated reference page numbers
 - Changed all references to 2015 AHA CPR guidelines to “Current” AHA CPR guidelines
- **Page 2 Trauma**
 - Reference in boxes “Spinal Motion Restriction as indicated (P-21 thru P-23)”
- **Page 3 Trauma (Cont’d)**
 - Reference in boxes “Spinal Motion Restriction as indicated (P-21 thru P-23)”
- **Page 5 Near Drowning**
 - Restated first box to state “Protect Cervical Spine as Appropriate (P-21 thru P-23)”
- **Page 10 LVAD page 1**
 - In History box, changed “End stage renal failure” to “Late stage heart failure”
 - Was a typo

- **Page 16 Fever/Sepsis Algorithm**
 - Updated the Pediatric Abnormal Vital Signs Box on top left
- **Page 17 Hazardous Materials**
 - Inserted box that states “Paraquat Poisoning, Do Not Give Supplemental Oxygen”

PROTOCOL SUPPLEMENT CHANGES:

- **Throughout Supplement**
 - Date of 3/1/2020 throughout
- **Page i Table of Contents**
 - Page numbers adjusted
- **Drug Index**
 - **Throughout Index**
 - Added IO to all IV push to maintain consistency. Any drug that can be given IV push can be given IO
 - Corrected numerous typos
 - **Page S-5 Adenosine**
 - Added to contraindications: Wolff-Parkinson White (WPW) Syndrome
 - **Page S-15 Epinephrine 1:1,000**
 - Separated 1:1,000 from 1:10,000 to avoid confusion
 - Inserted IM dosages for ECA, EMT, and AEMT
 - **Page S-16 Epinephrine 1:10,000**
 - Separated 1:1,000 from 1:10,000 to avoid confusion
 - **Page S-18 Etomidate**
 - Changed indication from “Chemical Sedation” to “To facilitate Pharmacological Assisted Intubation (PAI)”
 - **Page S-19 Fentanyl**
 - Corrected IN dose to state “2mcg/kg per single dose with max of 100mcg”
 - **Page S-34 Oral Glucose**
 - Corrected route to state “Buccal” rather than oral
 - **Page S-39 Succinylcholine**
 - Changed indication from “Chemical Sedation” to “To facilitate Pharmacological Assisted Intubation (PAI)”