

**SPEMS Protocol Changes
Paramedic (EMT-P)
3/1/21 to 2/28/22**

PROTOCOL CHANGES

- **Every Page**
 - Changed dates at bottom of each page
- **Cover Page**
 - Signature with March 1, 2021 date
 - Protocols will expire February 28, 2022
- **Page ii List of Services**
 - Updated to current list
- **Page P-15 Transportation Guidelines**
 - Insertion of a No Diversion Policy that states:
 - 7. No Diversion Policy:

Note: This policy has been adopted by TSA-B and applies to all facilities in which SPEMS EMS services transport to; even those outside of the TSA-B region.
 - is policy has been adopted by RAC-B and applies to all facilities in which SPEMS EMS services transport to; even those outside of the SPEMS service area.
 - a. Hospitals will no longer be able to divert 911 responses due to ED overcrowding
 - b. SPEMS EMS services will honor patient requests to facility of their choice or transport patients to the appropriate facility for their specific needs. If EMS is told to divert, they will only follow this order if it is in the patient's best interest (divert a burn patient to UMC, a pediatric patient to a children's hospital, major trauma to a designated trauma center).
 - c. Hospitals will only be allowed to divert EMS in the case of an internal disaster (fire, flood, active shooter, etc.)
 - d. Facilities who do not have all services may divert based on lack of ability to meet the patient's needs (STEMI, acute stroke or major trauma).
 - e. This does not apply to EMS services providing interhospital transfers.
- **Page P-20 PAI Using Norcuron**
 - Changed adult dose of Fentanyl to 2.5 to 5mcg/kg
 - Changed pediatric dose of Fentanyl to 1 to 2mcg/kg
- **Page P-21 PAI Using Rocuronium**
 - Changed adult dose of Fentanyl to 2.5 to 5mcg/kg
 - Changed pediatric dose of Fentanyl to 1 to 2mcg/kg
- **Page P-22 PAI Using Succinylcholine**
 - Changed adult dose of Fentanyl to 2.5 to 5mcg/kg
 - Changed pediatric dose of Fentanyl to 1 to 2mcg/kg
- **Page P-26 Pain Management**
 - Number 1: Changed dose of Fentanyl to state "**Fentanyl** 2.5 to 5mcg/kg, IV/IO, to a max of 100mcg per single dose for adults. For pediatrics > than 2 years of age, administer 1-2mcg/kg slow IV/IO push to a max of 100mcg. Paramedics may choose a lower dose for adults and pediatrics at the Paramedic's discretion"
 - Number 9: Changed dose of Fentanyl to state "For treatment of cardiac chest pain, **Morphine** is the drug of choice. However, if the patient is allergic to **Morphine**, then **Fentanyl** may be utilized at 2.5 to 5mcg/kg, IV/IO, to a max of 100mcg per single dose for all adults. Paramedics may choose lower dose at the Paramedic's discretion (See Cardiac Chest Pain Algorithm Page 11)"

- **NOTE:** the IN dosage of Fentanyl has NOT changed. Paramedics should not lower the dose of Fentanyl given via the intranasal route
- **Page P-65 Signature Page**
 - Date changed to 3/1/2021
 - EMS Director MUST sign
- **Throughout Treatment Algorithms**
 - Changed the date on the bottom to read 03/01/2021
- **Page 1 Burns**
 - Adult dosage of Fentanyl changed to 2.5 to 5mcg/kg (still with a max of 100mcg per single dose)
 - Pediatric dosage of Fentanyl changed to 1 to 2mcg/kg (still with a max of 100mcg per single dose)
- **Page 3 Trauma (Continued)**
 - Adult dosage of Fentanyl changed to 2.5 to 5mcg/kg (still with a max of 100mcg per single dose)
 - Pediatric dosage of Fentanyl changed to 1 to 2mcg/kg (still with a max of 100mcg per single dose)
- **Page 9 Bradyarrhythmia-Adult**
 - Dosage of Atropine changed to Atropine 1mg, IVP, every 3-5 minutes, to a max of 3mg
- **Page 10 Bradyarrhythmia-Pediatric**
 - Maximum single dose of Atropine changed to 1mg (instead of 0.5mg)
- **Page 11 Cardiac Chest Pain**
 - Fentanyl box at lower center: dosage of Fentanyl changed to 2.5 to 5mcg/kg (still with a max of 100mcg per single dose)
- **COVID-19 Addendum packet is attached at the end of the normal Protocols**

PROTOCOL SUPPLEMENT CHANGES:

- **Throughout Supplement**
 - Date of 3/1/2021 throughout
- **Page S-8 Atropine**
 - Changed adult dosage to 1mg per dose to a maximum of 3mg total dose
 - Changed pediatric to reflect 1mg per single dose
- **Page S-19 Fentanyl**
 - Changed adult IV/IO dose to 2.5 to 5mcg/kg to a max of 100mcg
 - Changed pediatric IV/IO dose to 1 to 2mcg/kg to a max of 100mcg
 - Added statement “Paramedics may choose a lower IV/IO dose for adults and pediatrics at the Paramedic’s discretion”
- **Page S-41 Versed**
 - Corrected typo on dosage of Versed for pediatric chemical restraint to read 0.1mg/kg to a max of 5mg (not 10mg)
- **Adult Drug Charts**
 - Updated dosage of Atropine
 - Update dosages of Fentanyl
- **Pediatric Drug Charts**
 - Updated dosage of Atropine
 - Updated dosages of Fentanyl