






FIELD POLICY/PROTOCOL	2020 SUMMARY OF FIELD MANUAL UPDATE PROPOSALS (5/31/2019)	REASON FOR CHANGE/EVIDENCE/OTHER NOTES
Miscellaneous		
Staff Directory (p. VI)	MODIFY Directory	Modify with new staff
Abbreviations (p. VIII)	MODIFY/ADD/REMOVE Abbreviations	Add Falck (FLK) and others, Clean up old abbreviations
General Section		
ASSAULT/ABUSE/DV (p. 5)	ADD if a rescuer knows or reasonably suspects a person suffering from any wound or other physical injury inflicted upon the person where the injury is the result of <u>assaultive or abusive conduct</u> , notify Law Enforcement.	AB 1973 extends "reporting duties" of EMTs and Paramedics
BURN PATIENT CARE (p. 7)	$\frac{\text{Weight in kg} \times \text{TBSA} (\%)}{8} = \text{rate (mL/HR)}$ MODIFY PRE-HOSPITAL FLUID FORMULA	Aligns fluid administration IAW with ATLS guidelines
 VIDEO TRAUMA PATIENT CRITERIA (p. 26)	REMOVE Anticoagulation from Step 4 Special Patient Considerations Trauma Criteria	<u>Out-of-Hospital Triage of Older Adults With Head Injury: A Retrospective Study of the Effect of Adding "Anticoagulation or Antiplatelet Medication Use" as a Criterion</u> Ann Emerg Med. 2017 Aug;70(2):127-138. For individuals who did not have steps 1 to 3 trauma criteria, nearly 30% had anticoagulant or antiplatelet use. 9% of these patients had intracranial hemorrhage, but a much smaller proportion (3%) died or had neurosurgery during hospitalization.
TXA (p. 28)	<ul style="list-style-type: none"> MODIFY to "suspected" cervical cord injury ADD to Inclusion Criteria "Other <i>massive uncontrolled</i> hemorrhage (e.g. GI bleeding, dialysis shunt bleeding, vaginal bleeding, post-partum hemorrhage, etc.)" 	Wien Klin Wochenschr (2017) 129:303-316 DOI 10.1007/s00508-017-1194-y "TXA has been used for decades to prevent and treat clinically relevant hyperfibrinolysis (HF) and more generally for the prevention and treatment of bleeding due to a variety of causes."
Adult/Pediatric Sections		
 VIDEO Acute Stroke (Adult p. 30)	MODIFY Time of Onset "must be within 24 hours, observed by a reliable witness or reported by a reliable patient (for thrombolysis)"	<ul style="list-style-type: none"> The patient may be a reliable historian Extending Time of Onset to 24 hours includes patients with unknown time of onset including "wake-up" strokes DAWN Trial, N Engl J Med 2018; 378:11-21, "Among patients with acute stroke who had last been known to be well 6 to 24 hours earlier and who had a mismatch between clinical deficit and infarct, outcomes for disability at 90 days were better with thrombectomy plus standard care than with standard care alone."
 VIDEO Pain Management (Adult p. 41, Pediatric p. 66)	<ul style="list-style-type: none"> ADD Ketorolac (Toradol) for Adults only ADD Pain Management Algorithm to Adult and Pediatric Protocols 	<ul style="list-style-type: none"> Ketorolac is a NSAID that provides a non-narcotic pain management option for adults Algorithm format clarifies protocols (Ketamine is proposed to be added to 2021 protocol)
Respiratory Depression (Adult p. 44, Pediatric p. 72)	MODIFY algorithm and format, no substantive changes	Modified format clarifies protocols
 VIDEO Seizure (Adult p. 49, Pediatric p. 76)	<ul style="list-style-type: none"> MODIFY Midazolam Administration for Status Seizures <ul style="list-style-type: none"> MODIFY Adult IM/IN dose to 10 mg MODIFY Adult preferred route to IM MODIFY Pediatric IM dose to 0.2 mg/kg MAINTAIN Pediatric preferred route of IN (0.2 mg/kg) 	<u>Intramuscular versus Intravenous Therapy for Prehospital Status Epilepticus (RAMPART)</u> , N Engl J Med 2012; 366:591-600 "For subjects in status epilepticus, intramuscular midazolam is at least as safe and effective as intravenous lorazepam for prehospital seizure cessation."
PEDIATRICS Airway Obstruction (p.62) Neonate Resus (p.67) Poisoning (p. 71) Resp. Depression (p. 74) Resp Distress (p.75-76) Routine Medical Care (p.77)	ADD igel utilization for pediatric patients < 40 kg if BVM ventilation is inadequate	Igel provides a backup advanced airway adjunct for pediatric patients < 40 kg if BVM ventilation is inadequate
Medications (Adult p.41)	<ul style="list-style-type: none"> ADD Ketorolac 15 mg MODIFY Midazolam initial dose 	

Operations Section		
Equipment (p. 98-104)	MODIFY minimum equipment and supply inventory required on ALS and BLS response vehicles	Clarifies equipment specifications associated with 2020 field policy updates
Olanzapine (p.134)	<ul style="list-style-type: none"> REMOVE from CONTRAINDICATIONS - "Agitation requiring restraints" ADD to INDICATIONS - "IAW Restraint Policy (P.111), restraints may be utilized after patient self-administers Olanzapine." 	<p>Patient Preference and Adherence 2012;6 109–125 Orally disintegrating <u>olanzapine review: effectiveness, patient preference, adherence, and other properties</u></p> <p>"Olanzapine is an efficacious and well-tolerated atypical antipsychotic indicated for the treatment of schizophrenia and acute manic or mixed episodes, along with maintenance therapy in bipolar disorder and (in some countries) related psychiatric disorders."</p> <p>"This medication has a favorable risk/benefit profile that has led to it being extensively utilized worldwide."</p>
Procedures		
VIDEO  Advanced Airway (p.116)	ADD iGel Supraglottic Airway as a <u>backup</u> advanced airway adjunct for adult and <u>pediatric</u> patients	<ul style="list-style-type: none"> King LT has theoretic concern regarding impaired internal carotid blood flow Igel provides improved ease of use and more rapid placement Igel has a gastric port
Hemorrhage Control (p.126)	MODIFY Any standard gauze or County-approved hemostatic gauze may be utilized	
Pleural Decompression (p. 132)	REMOVE mid-axillary line (MAL) site, 2 nd ICS-MCL remains	<p><u>J Trauma Acute Care Surg. 2016 Feb; 80(2): 272–277. Needle Thoracostomy: Clinical Effectiveness is Improved Using a Longer Angiocatheter</u> 8 cm angiocatheters are more effective at chest decompression compared to 5 cm at the 2nd ICS-MCL</p> <p><u>Am Surg. 2018 Nov 1;84(11):1750-1755. Failure Rate of Prehospital Needle Decompression for Tension Pneumothorax in Trauma Patients.</u> Using an 8-cm catheter at the 5th ICS AAL, iatrogenic cardiac injury was at risk in 42 per cent of patients</p>
MCI		
MCI (p. 159)	<ul style="list-style-type: none"> ADD Defined MCI Resource Response Packages <i>Note: Immediately cancel assigned resource(s) when no longer required</i> ADD Defined MCI Notifications 	<ul style="list-style-type: none"> To be implemented in 2019 Provides easy ordering of pre-determined MCI Resource Response Packages Provides pre-determined MCI Notifications
CLINICAL PATIENT CARE		REASON FOR UPDATE OR CHANGE
Training Only		
<ul style="list-style-type: none"> Patient Monitoring Reporting Format (p. 136) 	<ul style="list-style-type: none"> ADD - Significantly ill patients, especially those with suspected respiratory, cardiac and neurological related illnesses, should receive appropriate continuous monitoring by EMS personnel until transferred to another appropriate monitor. MAINTAIN Receiving Hospital Report should include VS 	
ePCR Data Collection / Quality Improvement Measures / "How do we know that a change is an improvement?"		
ADD Ketorolac, igel		
Typos / Other		
Table of Contents/Index		