

CHANGES TO BASIC PATIENT CARE PROTOCOLS 2010

Protocol 4.8: Cardiac Arrest

Under “Physical Assessment, Part B” changed “closed chest massage” to “chest compressions” to reflect current terminology.

Protocol 4.9: Cardiac Symptoms/Acute Coronary Syndrome

Have added wording to stress that women, diabetics, and all adult medical patients over the age of 50 years have an increased danger of coronary artery disease. Also stressed doing an ECG on all adults with epigastric discomfort (if they have the capability).

Added

NOTE:By June 2013 all ALS services must have the ability to obtain 12-lead ECGs. Though not required, BLS services are encouraged to obtain the equipment to perform ECGs.

RESPIRATORY ILLNESS/INFLUENZA..... 4.24

RESPIRATORY ILLNESS/INFLUENZA – MASS CASUALTY EMERGENCY..... 4.25

Protocol 4.28: Stroke

Added that the EMS personnel should attempt to bring a knowledgeable friend or family member with the stroke patient.

Deleted giving oral glucose to the hypoglycemic patient with stroke symptoms (patients with possible stroke should be NPO).

Protocol 4.32: Vomiting

Under “Specific Information Needed” added:

- B. Is the patient nauseated
- C. If vomiting, is the cause known?