



North Country EMS Program Agency

“Serving Jefferson, Lewis & St. Lawrence Counties”

Ann M. Smith, EMT-CC, Director
Mysti L. Mattice, Secretary

To: North Country Regional EMS Agencies
From: Ann M. Smith, NCEMSPA Director
Date: October 6th, 2011
Re: NYS Protocol Updates and Regional Policy Statement Changes

- NYS Department of Health released the following BLS Protocol changes which have also resulted in regional changes to our ALS protocols. Please ensure all EMT's in your agency receive this information and your BLS Protocol Books should be updated with the new protocols. The new protocols can be accessed at the following link on the Department of Health Bureau of EMS Website:
http://www.health.state.ny.us/nysdoh/ems/pdf/emt_protocol_updates_2011.pdf
or on the North Country EMS Website under protocols and policy statements:
www.canton.edu/ncems. Enclosed in this mailing you will find a summary of protocol changes.
- As a result of the new 2010 AHA Guidelines and BLS Protocol changes, a number of our Regional Policy Statements have been updated. Enclosed in this mailing you will find a summary of these Policy Statements and their changes. You may find these new Policy Statements under our Policy Handbook located under the Protocols and Policy Statements link on our Website www.canton.edu/ncems
- **ALS providers** please note the changes to the Acute Coronary Syndrome and PEA/Asystole protocols which are reflected in the North Country Regional Policy Statement 11-05 (see above for location of Policy Statements)
- Carthage Area Hospital is now a Medical Control Facility
- Mark Tuttle, EMT-P from Lewis County, has been named by the NYS EMS Council as Advanced Life Support Provider of the Year. Mark is also the Chair of the North Country Regional Emergency Medical Services Council, Lewis County EMS Coordinator, Certified Instructor Coordinator, AHA Instructor and continues to actively provide patient care with Lewis County Search and Rescue, Beaver Falls Fire Department and Evans Mills Ambulance. If you see Mark, please take a moment to congratulate him as he is a well-deserving recipient of this award and his contributions to this region are numerous!!!

CONGRATULATIONS & THANK YOU MARK!

NYS BLS Protocol Change Summary

34 Cornell Drive Canton, New York 13617

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- **M-5 Adult Cardiac Related Problem**
 - Aspirin dose changed to 325 mg- BLS providers should give 324 mg. per new Regional Policy Statement 11-04 (Four 81 mg chewable baby aspirin)
 - BLS providers cannot assist a patient with their prescribed nitroglycerin if a patient has taken an erectile dysfunction medication in the last 72 hours
 - After assisting a patient with their prescribed nitroglycerin they must be reassessed within 2 or 3 minutes
 - If patient continues to have chest pain and systolic BP remains above 120mmhg the EMT-B may assist them with up to two additional doses following the procedures outlined in the protocol. Doses should be no less than 5 minutes from last dose.

- **M-12 Adult Respiratory Arrest/Failure (Non-Traumatic)**
 - Rates of ventilation changed to reflect new 2010 AHA Guidelines
 - Adults: ventilate every 5-6 seconds without an advanced airway in place and every 6-8 seconds if CPR is ongoing and an advanced airway is in place. *(Reminder - compressions should be continuous with no pause for ventilation after an advanced airway is placed)*

- **M-13 Pediatric Respiratory Arrest/Failure**
 - Infants and children: ventilate every 3-5 seconds without an advanced airway in place and every 6-8 seconds with an advanced airway in place. *(Reminder - compressions should be continuous with no pause for ventilation after an advanced airway is placed)*

- **M-14 Cardiac Arrest Adult and Pediatric (Non-Traumatic)**
 - Changes reflect the new 2010 AHA guidelines for CPR
 - All Agencies should ensure providers are updated on the new guidelines by December 31st , 2011 per Regional Policy Statement 11-05

- **T- 2 Bleeding (External)**
 - Hemostatic Gauze added if available
 - Pressure points and elevation removed if direct pressure does not work and severe bleeding persists in a limb apply a tourniquet.
 - All providers should be updated on proper application of a tourniquet.
 - If a commercial tourniquet is used providers within the agency should be trained on use of the specific device and all training records maintained at the agency.

- **T-6 Adult Major Trauma and T-7 Pediatric Major Trauma**
(Including Traumatic Cardiac Arrest)

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- NYS DOH has accepted the Center for Disease Control and Prevention (CDC) Field Triage Decision Scheme and it replaces Major Trauma Criteria as previously listed. Most of the information remains the same but it is provided in a format to assist you in making better triage decisions. The one item missing is the pulse criteria.
- **SC-3 Emergency Childbirth, Resuscitation and Stabilization of the Newborn**
 - Only suction the infants oropharynx if the airway is obstructed or artificial ventilations are required (suctioning of nostrils removed)
 - Removed placing O2 tent for infant who is breathing spontaneously, crying vigorously and has a pulse greater than 100/min.

New Regional Policy Statements

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- **11-02 Medical Control/Destination**
 - North Country EMS is pleased to announce that Carthage Area Hospital is a Medical Control Facility now and the new policy statement reflects this.
- **11-03 Responsibility for ALS Patient Care**
 - Removed information in regards to transferring patients to military providers when being flown by MAST Helicopter which is no longer operational in the region
- **11-04 BLS Aspirin Administration**
 - Dose changed to reflect new NYS Protocols.
- **11-05 2010 AHA Guidelines**
 - All Agencies should ensure that all EMS personnel are updated to 2010 AHA CPR Guidelines
 - ACS Protocol- Aspirin dose changed to reflect NYS BLS Protocol. 324 mg (four- 81-mg chewable baby aspirin)
 - PEA/Asystole Protocol – Atropine removed
 - Recommendations for treatment of patients who have a return of spontaneous circulation added
- **11-06 BLS Administration of Albuterol**
 - Regional protocol removed and policy statement changed to reflect following NYS DOH BLS Protocol SC-4. There has been **no** change in the process for agencies and providers to complete for EMT-B’s to be credentialed to administer nebulized albuterol