




STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin
Governor

Karen L. Bowling
Cabinet Secretary

MEMORANDUM

DATE: August 7, 2013
TO: All EMS Providers
FROM: Michael Mills, DO FACEP 
RE: Summary of Protocol Changes

Several members of the EMS community have reviewed the current protocols and provided constructive feedback. The summary of protocol changes is listed below. Special thanks go to Chad Pittinger, D.J. Weller, Justin Koper, David Cutright, Stephanie Watson, Michael Wiedeman, Marsha knight, Michael Angelucci, Anthony McDaniel, Deena Glover, Kelly Fenton, Mike Jenkins, Shirley Morrison, Mike Alt, Richard Cluff and the Jefferson County Protocol Committee for their review and recommendations.

Summary of Changes

4213/5213 - Page 1, H. Revised to read "Transport patient as directed in **Protocol 4202/5202**"

4211 - Placed Transcutaneous Pacer outside the box designating need to contact Med-Com. Paramedics do not need to contact Med-Com to utilize pacemaker

Increase heart rate with:

Atropine 0.5 mg IV. May repeat every 3-5 minutes up to a maximum dose 3 mg. Atropine administration should not delay implementation of external pacing for patients.

Transcutaneous Pacer: * If Atropine ineffective, patient with poor perfusion, or high degree AV Block

6104 - Edited SPECIAL NOTES: #2 to read - "If tension pneumothorax develops in a patient with a sealed sucking chest wound, attempt to resolve by releasing air from the seal." Removed "*prior to decompressing chest*".

6204 - Removed referral to non-existent protocols in the (If Suspected **CARDIAC CAUSE** then consider) box. Removed 6208, 6211, 6303.

4101/5101 - Changed "if breathing adequate" to "if breathing adequately" in C.3.

4104/5104 – Special notes: 3. Added DECOMPRESS. Sentence now reads "It is not appropriate to needle decompress a simple pneumothorax."

5104 – A. "Perform TAMP Protocol" now correctly points to protocol 5101.

5208 - In the "Immediate Synchronized Cardioversion" box the Perform MAMP line now correctly points to protocol 5201.

5201 – Page 1.D. Gray box now outlines need to contact Med-Com prior to initiating IV.

6202- Page 2.F. This has been changed to "Also evaluate the patient for possible treatment with Continuous Positive Airway Pressure per CPAP Protocol 8301 if agency has optional CPAP equipment and contact Medical Command."