

M A S S A C H U S E T T S

OFFICE OF EMERGENCY MEDICAL SERVICES

DEPARTMENT OF PUBLIC HEALTH

ADMINISTRATIVE REQUIREMENT MANUAL

EFFECTIVE DATE: June 1, 2026

AUTHORIZATION: Susan Lewis, Director

TITLE: Required Medications on Ambulances per Statewide Treatment Protocols

SUPERSEDES: June 16, 2025

Purpose: To define the medications and medication levels ambulances services must carry in order to provide care in accordance with the current Statewide Treatment Protocols (STPs).

Background:

- A. **REGULATORY AUTHORITY:** 105 CMR 170.455, 170.460, 170.470
- B. **AUTHORIZED EQUIPMENT:** Ambulance services must carry medications as required by Statewide Treatment Protocols. Ambulance services must not equip ambulances with medications that are outside of scope of practice of its EMT employees, or outside of the service's level of licensure.
- C. **MAINTENANCE:** All medications must be maintained according to manufacturers' specifications regarding temperature controls and expiration date.
- D. **TRAINING:** Services must complete training and ensure EMTs demonstrate competency in any medication changes for STP v.2026.1 by June 1, 2026. Once a service has successfully trained all of their EMS personnel, they may begin operating under the revised protocols prior to June 1, 2026.

ADVANCED LIFE SUPPORT (ALS-PARAMEDIC LEVEL) MEDICATION LIST

VERSION 2026.1

ALL of the following medications are required (in addition to those required for ALS-Advanced and Basic Life Support [BLS] vehicles):

REQUIRED MEDICATIONS		
Medication Name	Suggested Concentration	Minimum quantity per vehicle
Adenosine (Adenocard)	6mg/2mL	36mg
Amiodarone	150mg/3mL	450mg
Atropine Sulfate	1mg	3mg
Calcium Chloride	10% solution—100mg/mL	2g
Dextrose 5% * Diluent packaged with norepinephrine		250mL
Diltiazem		100mg
Dopamine ** (typically comes in two options)	400mg/250mL Or 800mg/500ml	1 pre-mixed bag
Epinephrine	1:1000	2mg

Epinephrine	1:10,000 (1 mg pre-filled syringes)	12mg
Fentanyl (Sublimaze)	50mcg/mL	450-900mcg
Furosemide (Lasix)		80mg
Haloperidol (Haldol)	5mg	10mg
Ketorolac	15mg IV or 30mg IM	60mg
Lidocaine HCL	Vials for infusion or pre-mixed bags	2gm/1 bag
Magnesium Sulfate		4g
Methylprednisolone (Solu-Medrol) OR Hydrocortisone (Solu-Cortef)	125mg OR 100mg	125mg OR 100mg
Metoprolol (Lopressor)	5mg	15mg
Midazolam (Versed)	2mg/mL	20mg
0.9% Normal Saline (in sterile packaging)	100mL	2
Nitroglycerin Paste	1 tube	2 doses

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Norepinephrine * (Levophed)	4mg/4mL	4mg
Racemic Epinephrine	11.25mg/2mL	2 doses

Sodium Bicarbonate	2 pre-filled @ 50mL	100 mEq
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OPTIONAL MEDICATIONS

Cyanide antidote kit - 2	Tetracaine - 1	NeoSynephrine/Phenylephrine nasal - 1
Vasopressin – 40 units	Lidocaine jelly - 1	Nerve Agent antidote kit - 2
Tranexamic Acid- 2g /vehicle	Morphine - 20mg/vehicle	Ketamine - 1000mg/vehicle
Acetaminophen IV - 2000mg/vehicle		****Blood Products
***Nitroglycerin for IV Infusion		Hydroxocobalamin - 5-10g/vehicle
*** Antibiotic for IV Infusion	IV Acetaminophen	Calcium Gluconate
Oxytocin – minimum of 30 units	Any other medications, as authorized by OEMS	

* **Dextrose 5%** is not required for services that do not carry norepinephrine. ****Dopamine** must be carried until IV pump available; once a service has IV pumps available, only **Norepinephrine** must be carried. Services with IV pumps in place may carry both Norepinephrine and Dopamine if they wish; however, only Norepinephrine is required.

*** **Nitroglycerin and Antibiotic** for IV use can only be carried and used if IV infusion pump is available.

**** **Blood products** in accordance with Medical Director Option Protocol 6.13

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ADVANCED LIFE SUPPORT (ADVANCED EMT LEVEL) MEDICATION LIST

VERSION 2026.1

ALL of the following medications are required (in addition to those required for BLS vehicles):

REQUIRED MEDICATIONS		
Medication Name	Suggested Concentration/ Formulation	Minimum quantity per vehicle
Dextrose	25g of D10, additional Medication as D10, D25 or D50	50g
Glucagon	1mg	2mg
Ipratropium Bromide (Atrovent) for nebulizer prefilled packaging	500mcg	2000mcg/ 4 doses
Lidocaine HCL 2%	Pre-Filled syringes. 20mg/ml	200mg
0.9% Normal Saline (in sterile packaging)	1000mL 500mL	2 2
3% hypertonic Normal Saline in sterile packaging (packaged separate and distinct from 0.9% Normal Saline)	500mL	1
Nitroglycerin Tabs	1 Bottle or 6 prepackaged units	1 /6 Units
Nitroglycerin Spray	1 Bottle of 400mcg per spray dose	2 Bottles
Ondansetron (Zofran)	4mg ODT prepackaged tablet or 2mg/ml vial for IV	8mg
Diphenhydramine for IV administration	50mg	100mg

MASSACHUSETTS

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BASIC LIFE SUPPORT (BLS) MEDICATION LIST

VERSION 2026.1

ALL of the following medications are required. These medications are to be carried by ALS vehicles at the Advanced EMT and Paramedic levels as well.

REQUIRED MEDICATIONS		
Medication Name	Suggested Concentration/ Formulation	Minimum quantity per vehicle
Epinephrine Auto-Injector OR Epinephrine Check and Inject	Adult and Pedi; 1mg/ml	2 Adult, 2 Pedi 2 kits
Albuterol 2.5mg for nebulizer prefilled packaging and/or metered dose inhaler (MDI)	2.5mg	2 doses
Aspirin (chewable)	81mg Tablets	648mg
Naloxone (prefilled syringe with nasal atomizer)	2mg	20mg
Oral glucose or equivalent	25g	2
Diphenhydramine PO liquid (In addition, a service may carry tablets) with measuring cup for liquid administration	50mg	At least 100mg of medication in a multi-patient liquid form.
Ibuprofen PO liquid (In addition, a service may carry tablets) with measuring cup for liquid administration	200mg	At least 1200mg of medication in a multi-patient liquid form.
Acetaminophen PO liquid (In addition, a service may carry tablets) with measuring cup for liquid administration	1000mg	At least 2000mg of medication in a multi-patient liquid form.

OPTIONAL MEDICATIONS
Glucagon - 2mg/vehicle
Ipratropium - 2000mcg/vehicle
Leave-Behind Naloxone Civilian Kits
Risperidone 2mg - 4mg/vehicle
Olanzapine 5mg - 20mg/vehicle
Epinephrine/Surfactant Nasal Preparation 1mg/spray and 2mg/spray – 2 per vehicle
Buprenorphine - 24mg/vehicle