**MEMORANDUM**

TO: All MA Licensed Ambulance Services and Accredited EMT Training Institutions

CC: EMCAB Members

FROM: Dr. Jonathan Burstein, OEMS Medical Director

RE: 2023.1 Statewide Treatment Protocols (STPs)

DATE: January 3, 2023

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The Massachusetts Department of Public Health, Office of Emergency Medical Services (the Department) is issuing the 2023.1 Statewide Treatment Protocols as of today.

As a reminder, the .PDF edition continues to be hyperlinked. The Table of Contents is hyperlinked to each individual protocol. Additionally, within each protocol, when a reference is made to another protocol, that, too, is hyperlinked to the appropriate protocol. Finally, the number of the protocol at the top of each page is hyperlinked back to the Table of Contents.

All ambulance services are required to train their EMS personnel and any first responders on their staff they deploy on their ambulances in the updated protocols. The updated protocols may be used by a service once such training is complete and its ambulances appropriately stocked with required medications under the updated Administrative Requirement 5-400, but in any event are mandatory as of April 1, 2023.

The change chart is below:

**Change Chart, OEMS Statewide Treatment Protocols 2023.1**

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| **Protocol Section**  | **Change** |
| Page 2 Cover Page | Updated to add in First Responders (FR) for all protocols that require CPR/AED use, including 1.1, 3.4 A&P, 3.5 A&P, and 4.11. |
| Table of Contents | Updated |
| 1.0 Routine Patient Care | Updated the medication shortage language around replacement; added a definition of pediatric patient as 14 years of age/40 kg, unless otherwise specified in the protocols; added PEEP application of 5mm/Hg for pediatric bag-valve mask (BVM). |
| 1.1 High-Quality CPR Adult | Added FR CPR/AED use  |
| 2.2 Allergic Reaction / Anaphylaxis  | Added oral Benadryl by EMTs for both Adult and Pediatric; Epinephrine 1:10,000 single IV/IO bolus now in paramedic standing orders for those patients that are not responding to IM epinephrine.  |
| 2.7 Hyperthermia | Updated to include on-scene immersion cooling for exertional hyperthermia.  |
| 2.13 Pain and Nausea Management  | Added oral medications by EMT or Advanced EMT; increased the fentanyl dose to a total max of 450mcg; and decreased IM/IN Ketamine dose to now 0.3mg. |
| 2.14 Poisoning/Substance Abuse/Overdose  | Increased limit of dosing of naloxone for all levels to 8mg; restored hydroxocobalamin. |
| 2.15 Seizures- Pediatric | Added allowing EMT-Basics and Advanced EMTs to assist with all forms of diazepam rescue medication; added a Flag Box stating “Watch for respiratory depression and support ventilation as needed.” |
| 3.4 Adult and Pediatric, 3.5 Adult and Pediatric - Cardiac Arrest Protocols | Added FR use of CPR/AED.  |
| 4.8 Spinal Column/Cord Injuries  | Incorporated current selective spine assessment and guidelines for immobilization as standard practice, removing it from medical director options. |
| 4.11 Traumatic Cardiac Arrest | Added FR use of CPR and AED  |
| 5.3 Tracheostomy Tube Obstruction/Management | Clarified language for EMT-Basics and Advanced EMTs to externally clear tracheostomy tubes. |
| 6.3 Selective Spinal Assessment  | Deleted and incorporated into 4.8 Spinal Column /Cord Injuries as the standard of care; subsequent medical director option protocols renumbered.  |
| 6.3 USAR | Renumbered to 6.3; under medication list, deleted all references to medications that were previously unauthorized for use within routine EMS operations, as this is no longer the case. |
| 6.5 Tranexamic Acid (TXA) Glucagon for BLS | Renumbered to 6.4 and added indication for use in post-delivery bleeding.  |
| 6.7 Acetaminophen IV  | Renumbered to 6.6 and routine training removed which is no longer required. |
| 6.10 Glucagon for Hypoglycemia by EMT Basics  | Renumbered to 6.9 and training requirement changed to “upon hire only.” |
| 6.14 Ultrasound Use by Paramedics | Renumbered to 6.13 and added its use for obtaining intravenous (IV) access.  |
| 6.17 NEW Medical Director Option Protocol | 6.17 Bolus IV/IO Nitroglycerin and Infusion for Acute Pulmonary Edema. This is a new medical director option protocol for paramedics only to administer IV/IO nitroglycerin followed by an infusion (by pump only) to patients in acute distress from pulmonary edema.  |
| 7.4 Pediatric Transportation | Added clarifying language about transporting non-patient children. |
| Appendix A1 Interfacility Transfer Guidelines and Protocols | Added clarification of the definition of vasoactive medication; Added to the approved medications list, inhaled or nebulized medications.  |
| Appendix A2 Scope of Practice  | Deleted endotracheal as a medication administration route |
| Appendix A4 | Added a new assessment tool for the deaf and hard of hearing patient.  |

Thank you for your continued collaboration and efforts to effectively serve patients across the Commonwealth. If you have any questions on the 2023.1 Statewide Treatment Protocols, please contact Renée Atherton, NRP, Clinical Coordinator, at renee.atherton@mass.gov.