Recommended or Completed Protocol Changes for 2023

1. Geriatric dosing for sedatives and analgesics will be at 50% of the specified adult dose.
2. Remove Vecuronium from the RSI protocol.
3. Make changes to the trauma triage definitions
   1. Death in the same compartment
   2. Definition of difficulty breathing
4. The pediatric dosing for the cyanokit needs to be clarified
   1. Achieving the drip rate with the current drip sets available.
   2. Will add a reminder that the supplied tubing is 20 gtts/ml
5. Recommend agencies should exchange their drug bag at the facility that granted the field term.
   1. This may not be possible if the MCP was at a hospital not participating in the DBEP
6. Where Midazolam is listed as 2 mg, it will increase to 2.5 mg
   1. Pediatrics maximum dosing IV dose up to 2.5 mg.
   2. Pediatric maximum IM dosing will go to 5 milligrams.
7. Change wording in Trauma Triage Protocol 3017 for “Freestanding ED” to “Satellite ED”
8. 1007 – Basic Airway Maintenance – “Patient greater than 2 years old” to “Patient less than 2 years old”
9. Add IM and IN administration to the Fentanyl Drug Formulary
10. Change pediatric lidocaine dose with IOs from 1.5 mg/kg to 0.5 mg/kg in the drug formulary
11. Align DNR rules with recently released JITSO
12. Remove references to prescription requirements for EMTs and nitro administration (already done, but needs added to the 2023 modifications)
13. Mention immediate cooling for treatment of heat-related illness
14. The stroke tab needs a lot of clarification. This has been discussed at multiple meetings, but no real conclusions have been reached.
15. Add MVH-Beavercreek to hospital lists
16. Are we changing the number of lidocaine ampules in the drug bags
17. Reprioritize in the OB tab that non-OB related complaints will be transported to the ED
18. Remove Capnography from the EMR skill set (already done)
19. 5001.4 transport febrile patients over 2 months of age changed to below 2 months of age (already done)
20. Added numbers and info for KHN Springfield
21. Fixed a bunch of typos
22. Updated Drug Bag rules with recommended changes from Drug Bag Committee (already done)

Discussion Topics Still Outstanding

1. i-Gels are now available through the Kettering network for hospital exchange. Do we need to put them in the protocol or mention them in the skill sheets
2. What is “intoxication” and do we need to clarify what competent is. Do we factor in alcohol or should we just be working off of Alert and Oriented x4?
3. Are Pediatric defibrillation setting in line with PALS? Question has been submitted to Children’s, with no answer yet.
4. What is the defined age of pediatric patients? Protocol says 16 and under, Trauma Triage says 16-69 y/o.