SPEMS Protocol Changes
Emergency Medical Technician-Basic (EMT)
4/1/26 to 3/31/27

PROTOCOL CHANGES

- **Every Page**
  - Changed dates at bottom of each page to 4/1/2026
- **Cover Page**
  - Signature with April 1, 2026 date
  - Protocols will expire March 31, 2027
- **Table of Contents**
  - Page numbers changed to reflect additions
- **Page B-4 EMT's Responsibilities**
  - #5, Documentation: now reads
    - "Documentation is a critical component of pre-hospital care. All documentation must be complete, accurate, done in a timely manner, and void of contradictions."
    - "A patient contact form (short form) that includes the patient's condition, vital signs, list of medications given, and procedures performed will be given to the patient's nurse prior to leaving the receiving facility. An appropriate Pulsara transmission, prior to ER arrival, will meet this requirement."
      - If a Pulsara report is sent during transport, then a patient contact form (short form) is not required
    - "The full patient care report (PCR) must contain information that is accurate and must completely describe the patient's condition; treatment provided, response to treatment, and any other information that is pertinent to patient care. The full PCR must be completed and submitted to the receiving facility within 24 hours of the delivery of the patient per rule §157.11(n)(10)(A)."
      - Edited to match rule. Did state within one business day rather than 24 hours
    - "The use of artificial intelligence (AI) to develop and write a narrative on the patient care report (PCR) is **PROHIBITED**"
      - AI cannot be used for PCR documentation
- **Page K-1 Equipment List (BLS Units)**:
  - Pulse Oximeter requirement to read "1- Pulse Oximeter device with charged spare batteries (may be integrated into a heart monitor)"
- **Page K-4 Signature Section**
  - Date changed to 4/1/2026
  - EMS Service Director must sign
- **Throughout Treatment Algorithms**
  - Changed the date on the bottom to read 04/01/2026
  - Reference page numbers changed to reflect new page numbers

RESPIRATORY VIRUS ILLNESS ADDENDUM CHANGES

- Dates changed to 4/1/2026

PROTOCOL SUPPLEMENT CHANGES:

- **Throughout Supplement**
  - Date of 4/1/2026 throughout
  - Page numbers updated to reflect changes
- **Table of Contents**
  - Page numbers updated to reflect changes
- **Throughout Drug Index**
  - Updated contraindications of multiple drugs
- **Removed Etomidate from the Drug Index**
- **Page S-9 Atropine**
  - Addition to indications "Significant Oral/Nasal Secretions due to Ketamine:
  - Addition to adult and pediatric dosages to treat Significant Oral/Nasal Secretions due to Ketamine
- **Pages S-22 to S-24 Ketamine**
  - Updated indications and dosages to include **Ketamine** as an induction agent and for continuing sedation for patients with advanced airways
  - **Ketamine** is now the ONLY induction agent for PAI and is NOT dependent on BP
  - **Ketamine** can be used for continued sedation of a HYPOTENSIVE patient with advanced airway
    - If a patient has a SBP > 90mmHg, then **Versed** is indicated for continued sedation
- **Drug Charts**
  - Removed Etomidate from all charts (Adult and Pediatric)
  - Added **Ketamine as Induction Agent** to all charts (Adult and Pediatric)
  - Added Ketamine to Maintain Sedation of Patient with Advanced Airway to all charts (Adult and Pediatric)