



February 21, 2017

RE: Corrections to BREMS Protocol Document

As of March 1, 2017, the OMD Committee will make corrections to the following protocols:

Protocol 6 – General: Pain Control, Adult

- The current protocol requires that prior to the administration of morphine, diphenhydramine (Benadryl®) should be administered prophylactically with every patient.
- The OMD Committee now recommends that Benadryl® **should only be given** when signs/symptoms are consistent with an allergic reaction or hypotension as a result of vasodilation from morphine administration.

Protocol 19 – Cardiac Arrest: Post-Resuscitation, Adult

- The current protocol indicates that only a Paramedic may prepare and administer an Epinephrine Infusion in ROSC for symptomatic bradycardia and hypotension.
- The OMD Committee is in agreement that the protocol should state that both Intermediate and Paramedic level providers can prepare and administer an Epinephrine Infusion in the event of ROSC with symptomatic bradycardia and hypotension, as both are certified as ACLS providers.

Protocol 47 – Medical: Bradycardia, Adult

- The current protocol indicates that only a Paramedic may prepare and administer an Epinephrine Infusion for symptomatic bradycardia with poor perfusion i.e. acute altered mental status, ongoing chest pain, hypotension, or others signs of shock.
- The OMD Committee is in agreement that the protocol **should state that both Intermediate and Paramedic level providers can prepare and administer an Epinephrine Infusion** in the event of symptomatic bradycardia with poor perfusion i.e. acute altered mental status, ongoing chest pain, hypotension, or others signs of shock, as both are certified as ACLS providers.

Thank you for your attention to this matter. And as always, feel free to contact us here at the BREMS office with questions anytime. (434) 947-5934

Thank you,
BREMS Staff