

**Midstate Regional Emergency Services Council
Midstate Regional Emergency Medical Advisory Committee**

**EMT-Basic and AEMT-Intermediate
Asthma Protocol**

DATE: January 9, 2000
SUBJECT: This protocol is to assist the EMT-B's and AEMT-Intermediates in the treatment of patients in respiratory distress with a history of asthma.
MEDICATION: Albuterol Sulfate
DOSE: 2.5mg in 3 ml
ADMINISTRATION ROUTE: Handheld Nebulizer

This protocol applies to the following agencies/providers in the Midstate EMS Region:

- All Ambulance Agencies
 - All EMT-B's and AEMT-Intermediates with an ALSFR Agency
 - All EMT-B's and AEMT-Intermediates with a REMAC approved AED Level Agency
 - All other EMT-B's and AEMT-Intermediates are encouraged to participate
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- EMT-B's and AEMT-Intermediates will be trained in the assessment and administration of Albuterol to patients in respiratory distress with a history of asthma (*Midstate REMAC Asthma Update*). The training will be offered in all areas of the Region and will be coordinated between the Midstate EMS Training and Education Committee and the Program Agency.
 - The Midstate REMAC approved Asthma curriculum (*Midstate REMAC Asthma Update*) will be included in all Basic and Intermediate EMT original and refresher courses offered in the Midstate EMS Region after February 1, 2000. Updates will be conducted throughout the Spring and Summer of 2001. All Basic and Intermediate EMT's should have this training no later than November 1, 2001 and prior to using the Midstate Asthma protocol.
 - Minimum supplies stocked by Midstate EMS Agencies will include no less than 3 single dose Albuterol treatments and 2 Handheld Nebulizer.
 - The administration of Albuterol by Basic and Intermediate EMT's in the Midstate EMS Region will be reported to REMAC. A Midstate Albuterol CQI Indicator sheet will be sent to the Program Agency for each Albuterol administration along with a copy of the PCR monthly to the Program Agency.
 - In accordance with the Midstate REMAC Asthma Protocol, the prehospital treatment of respiratory distress patients with a history of Asthma will be standing orders for Basic and Intermediate EMT's in the Midstate EMS Region.
 - Patients treated under the Midstate REMAC Asthma Protocol by EMT-B's and AEMT-Intermediates that request no transport after Albuterol treatments are administered, must contact Resource for "no transport" order. In the event of a refusal to transport, Medical Control must be contacted prior to obtaining a refusal.

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**EMT-Basic and AEMT-Intermediate
Albuterol Treatment Protocol**

For use by EMT-Basics and AEMT-Intermediate who have received both appropriate training and REMAC authorization to provide this care.

FOR PATIENTS BETWEEN ONE AND SIXTY FIVE YEARS OF AGE, WHO ARE EXPERIENCING AN EXACERBATION OF THEIR PREVIOUSLY DIAGNOSED ASTHMA:

1. ASSESS THE AIRWAY
2. ADMINISTER OXYGEN

Note:

**For severe respiratory distress
Request advanced life support if available.
Do not delay transport to the hospital.**

3. MONITOR BREATHING

NOTE: IF PATIENT EXHIBITS SIGNS OF IMMINENT RESPIRATORY FAILURE REFER TO NYS BLS PROTOCOL ADULT OR PEDIATRIC RESPIRATORY ARREST.

4. DO NOT PERMIT PHYSICAL ACTIVITY.
5. PLACE PATIENT IN THE FOWLER'S OR SEMI-FOWLER'S POSITION.
6. ASSESS THE FOLLOWING PRIOR TO ADMINISTRATION OF THE FIRST NEBULIZED TREATMENT:
 - VITAL SIGNS
 - PATIENT'S ABILITY TO SPEAK IN COMPLETE SENTENCES
 - ASSESSORY MUSCLE USE
 - WHEEZING
 - PATIENT'S ASSESSMENT OF SEVERITY USING RECOGNIZED SCALE (i.e. Borg Scale)

NOTE: FOR PATIENTS WITH A HISTORY OF ANGINA, MYOCARDIAL INFARCTION, ARRHYTHMIA OR CONGESTIVE HEART FAILURE, MEDICAL CONTROL MUST BE CONTACTED PRIOR TO INITIATING STEP #7.

7. ADMINISTER ALBUTEROL SULFATE 2.5 mg IN 3.0 ml via NEBULIZER. DO NOT DELAY TRANSPORT TO COMPLETE MEDICATION ADMINISTRATION.
8. BEGIN TRANSPORT.
9. IF SYMPTOMS PERSIST, TREATMENT MAY BE REPEATED ONCE FOR A TOTAL OF TWO (2) DOSES.
10. UPON TRANSFER OF PATIENT CARE TO AN ALS PROVIDER OR RECEIVING HOSPITAL, REASSESS THE PATIENT. SEE STEP #6.