

SAEMS PREHOSPITAL PROTOCOLS

Protocol/Standing Order Development and Review

- I. Purpose
 - A. To identify the procedure by which new protocols or standing orders are created and existing protocols/standing orders are reviewed and revised.
- II. Policy
 - A. Protocols and standing orders are written and maintained with the goal of providing the highest quality EMS care to patients treated by EMS practitioners.
 - B. Protocols and standing orders are written and maintained based on the most current and best scientific evidence related to pre-hospital/out-of-hospital care, when that evidence is available.
- III. State Guidelines for Development of Regional Protocols and Medical Direction Plans
 - A. Arizona State Administrative Rules, SAEMS Regional Protocols, and individual Medical Direction Authorities shall guide the pre-hospital patient management activities carried out by EMS personnel. In accordance with Arizona Administrative Code, medical direction plans for a region shall include:
 1. Treatment Protocols: Statements which define what treatments may be used within the region by EMS Providers and the circumstances in which they may be used.
 2. Triage Protocols: Guidelines which determine how specific patient groups should be cared for and to which destination facility they should be transferred. Triage protocols shall include provisions for:
 - a. Patients' choice
 - b. Nature and severity of the illness or injury
 - c. Availability of special treatment facilities and the services that they provide
 - d. Expected transport time (including air vs. ground)
 3. Communications Protocols: Guidelines which outline what communication options will be available to EMS allowing them real-time contact with their chosen online Medical Direction Authority. Provisions will include:
 - a. Back-up procedures for communication equipment failures
 - b. Guidance for on and offline care, treatments and transport decisions.
 - c. Circumstances and patient conditions which require on-line medical consultation
- IV. Procedure
 - A. Document Development and Review
 1. All new protocol drafts will be presented to, or drafted by, the Protocol Development and Review committee (PDR) for review.
 2. Once drafted and/or reviewed by PDR, documents are made available for community discussion through Sub-regional Councils, Base Hospital and Regional Provider Committees (no longer than 30 days). The documents are then presented for approval at the EMS Medical Directors Committee. The Chair of PDR (or their designee) will contact the current chairperson of the EMS Medical Directors Committee for inclusion on the agenda.
 3. The documents are then presented to the Southeast Arizona Emergency Medical Services Council (SAEMS) for final approval. The Chair of PDR (or their designee) will contact the executive director of SAEMS for inclusion on the agenda.
 4. It is the responsibility of the author of any new or revised standing orders or protocols to create necessary training materials or Self Learning Packets for submission to and approval by the EMS Medical Directors Committee.

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5. The PDR committee will assist the EMS Medical Directors Committee to assure that all Base Hospital Managers and Medical Direction Authorities within the SAEMS Region are notified of changes that may require alteration in training content.
 6. The executive director of SAEMS will post all new and revised documents to the SAEMS website within two (2) weeks of board approval.
- B. Review of Current Documents
1. Protocols and standing orders are reviewed and/or revised periodically with the goal of including evidence-based guidance in medical practice and incorporation of current treatment modalities.
 2. Revision or review may be initiated by the PDR committee or at the request of the SAEMS Council, EMS Medical Directors Committee, Base Hospital Committee, Regional Provider Committee, Trauma Committee, as required by the Arizona Department of Health Services Bureau of EMS (ADHS BEMS), whenever current practice issues are identified or at a minimum of every four (4) years.
 3. Once revised and approved by the PDR committee, the policy change will follow the steps outlined in Section IV, Paragraph A, Item Numbers 2 – 5.