

**OPTIONAL SUPPLEMENTAL PROGRAM
AIRWAY MANAGEMENT
PARAMEDIC ONLY**

**V. JURISDICTIONAL OPTIONAL PROTOCOLS SUPPLEMENTAL PROGRAMS/
PROTOCOLS**



A. AIRWAY MANAGEMENT: BI-LEVEL POSITIVE AIRWAY PRESSURE (BiPAP)

1. INDICATIONS

- a) Transport of a patient with established/chronic respiratory distress or failure due to cardiogenic pulmonary edema or COPD/asthma in which the patient demonstrates spontaneous respirations and a patent, self-maintained airway
- b) No increase in pressure settings or oxygen requirement of the current BiPAP device within 48 hours of the transfer. Otherwise, the patient shall be transferred by an SCT team.
- c) Patients who are 13 years of age or older. If less than 13 years of age, patient shall be transported by SCT.
- d) Exception: A CRT-I or EMT may transport all age patients chronically on BiPAP who are going for routine transport. A patient-provided attendant who can manage the patient's own BiPAP must be present on the transport.

2. CONTRAINDICATIONS

- a) Circumstances in which endotracheal intubation or a surgical airway is preferred or necessary to secure a patent airway
- b) Circumstances in which the patient is being transferred for treatment of acute respiratory distress

3. PROCEDURE

- a) Assure patent airway.
- b) Perform appropriate patient assessment, including obtaining vital signs, pulse oximeter (SpO_2) reading, and cardiac rhythm.
- c) Apply BiPAP device per manufacturer's instructions.
- d) Program the device to match the settings of the BiPAP machine that the patient is currently using.
- e) Assess the patient after placing the BiPAP device selected for transfer. If respiratory distress occurs, support the patient with a BVM until facility personnel reestablish therapy with original BiPAP device.
- f) Continuously reassess the patient.
- g) Monitor continuous pulse oximetry.
- h) Monitor continuous ETCO_2 with nasal prongs.
- i) Follow the appropriate set of standing orders for continued treatment.
- j) Confirm the availability of a BiPAP device at the destination facility.



FOR CIRCUMSTANCES IN WHICH THE PATIENT DOES NOT IMPROVE OR CONTINUES TO DETERIORATE DESPITE BIPAP AND/OR MEDICATIVE THERAPY, TERMINATE BIPAP ADMINISTRATION AND PERFORM BVM VENTILATION AND ENDOTRACHEAL INTUBATION IF NECESSARY.

BIPAP MAY BE CONSIDERED FOR NON-CARDIOGENIC PULMONARY EDEMA.

OPTIONAL SUPPLEMENTAL PROTOCOL
VIRAL PANDEMIC: TRIAGE PROTOCOL
(ALTERNATIVE DISPATCH PROTOCOL DURING PANDEMIC ILLNESS) (NEW '20)

**AA. VIRAL PANDEMIC TRIAGE PROTOCOL, ALTERNATIVE DISPATCH PROTOCOL
DURING PANDEMIC ILLNESS (NEW '20)**

| Viral Syndrome Pandemic Triage Protocol | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------|---|--------------------------|---------------------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|---|--------------------------|--------------------------|-----------------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|---|--------------------------|--------------------------|---|--------------------------|--------------------------|---|--------------------------|--------------------------|---|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|--|--------------------------|--------------------------|--|
| EFFECTIVE March 17, 2020 until rescinded or superceded | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For Use By BLS and ALS Clinicians | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="display: flex; justify-content: space-between; margin-bottom: 10px;"> (YES) (NO) </div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td>Patient age is between 2 and 55 years</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a suspected viral syndrome with at least two (2) of the following symptoms: fever, cough, body aches, or sore throat</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a history of immunosuppression, or is taking medicines that depress the immune system (cancer undergoing chemotherapy, transplant patient, HIV, etc.)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a history of diabetes</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a history of heart disease</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a history of COPD or lung disease</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a heart rate between : 50 - 110 bpm (age 13-55 years); (age 2-5 years: 80-140 bpm; age 6-12 years: 70-120 bpm)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient has a systolic blood pressure between: 110-180 mmHg (age 13-55 years); (age 2-5 years: > 80mmHg; age 6-12 years: > 90mmHg)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Oxygen saturation (SpO2) greater than or equal to 94%</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Clear lung sounds</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Respiratory rate between 12 - 22 breaths per minute, and the patient does not complain of shortness of breath</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient is able to ambulate without difficulty</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Patient is agreeable to home self-care</td> </tr> </table> | | <input type="checkbox"/> | <input type="checkbox"/> | Patient age is between 2 and 55 years | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a suspected viral syndrome with at least two (2) of the following symptoms: fever, cough, body aches, or sore throat | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a history of immunosuppression, or is taking medicines that depress the immune system (cancer undergoing chemotherapy, transplant patient, HIV, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a history of diabetes | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a history of heart disease | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a history of COPD or lung disease | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a heart rate between : 50 - 110 bpm (age 13-55 years); (age 2-5 years: 80-140 bpm; age 6-12 years: 70-120 bpm) | <input type="checkbox"/> | <input type="checkbox"/> | Patient has a systolic blood pressure between: 110-180 mmHg (age 13-55 years); (age 2-5 years: > 80mmHg; age 6-12 years: > 90mmHg) | <input type="checkbox"/> | <input type="checkbox"/> | Oxygen saturation (SpO2) greater than or equal to 94% | <input type="checkbox"/> | <input type="checkbox"/> | Clear lung sounds | <input type="checkbox"/> | <input type="checkbox"/> | Respiratory rate between 12 - 22 breaths per minute, and the patient does not complain of shortness of breath | <input type="checkbox"/> | <input type="checkbox"/> | Patient is able to ambulate without difficulty | <input type="checkbox"/> | <input type="checkbox"/> | Patient is agreeable to home self-care |
| <input type="checkbox"/> | <input type="checkbox"/> | Patient age is between 2 and 55 years | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Patient has a suspected viral syndrome with at least two (2) of the following symptoms: fever, cough, body aches, or sore throat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | <input type="checkbox"/> | Patient has a history of diabetes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> | <input type="checkbox"/> | Patient is agreeable to home self-care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>ANY CHECKS in a shaded box indicate that patient transport should be encouraged.</p> <p>If <u>ALL</u> CHECKS are in non-shaded boxes, patient may provide self-care at home. Refer to no-transport instructions for patients.</p> <p>Any patient may be transported at the EMS Clinician's discretion.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This emergency protocol was issued by the Maryland Institute for Emergency Medical Services Systems, after approval by the Executive Director and Chairman of the State Emergency Medical Services Board, in response to the COVID-19 pandemic, and in accordance with Education Article Section 13-516(d)(1) and COMAR 30.03.05.02(I) and a catastrophic health emergency proclamation.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**OPTIONAL SUPPLEMENTAL PROTOCOL
VIRAL PANDEMIC: TRIAGE PROTOCOL
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| Maximize the Use of Limited Resources Alternative Dispatch Protocols | | | | |
|---|--|---|--|--|
| Dispatch Priority Level (match vendor or call center based dispatch protocol/tiered algorithm) | Response (Standard Operating Mode) | Level 1(A) Activation of Card 36 and ONLY for use in 6, 10, 18, and 26 DSS1 BELOW IS BACK UP STRATEGY FOR EMD WITHOUT CARD 36 | Level 2(B) Implement Declining Response / Configuration CAD Table (Moderate) + Card 36 (6,10,18 & 26) DSS2 | Level 3(C) Implement Declining Response / Configuration CAD Table (Severe) + Card 36 (6,10,18 & 26) DSS 3 |
| Classification 1 (*Echo) Confirmed Cardiac Arrest (Not Breathing, Unresponsive per 911 call) (MPD cards - 2, 6, 9, 11,15, 31) | Closest AED Unit <u>and</u> Closest 1st Responder <u>and</u> Closest ALS Ambulance | Closest AED Unit <u>and</u> Closest 1st Responder <u>and</u> Closest BLS Ambulance if available | -Closest AED Unit and -Closest 1st Responder if available | - Closest AED Unit if available - If no unit available, no response |
| Classification 2 (*Delta) Life Threatening Emergency/Potentially Life Threatening/Confirmed Unstable Patient(s) | Closest 1st Responder <u>and</u> Closest ALS Ambulance | - Closest 1st Responder <u>and</u> Closest ALS Ambulance if available; - BLS ambulance if ALS unit not available | Closest 1st Responder <u>and</u> Closest Ambulance available (ALS or BLS) | - Closest 1st Responder <u>and</u> Closest Ambulance if available (ALS or BLS) |
| Classification 3 (*Charlie) Non-Critical/Currently Stable Patient(s) Requiring ALS Assessment | Closest ALS Ambulance | Closest Ambulance available (ALS or BLS) | Closest Ambulance available (ALS or BLS) | - Closest 1st Responder if available or - Closest stand-in responder unit |
| Classification 4 (*Bravo) BLS Assessment for unknown/possibly dangerous scenes | Closest 1st Responder <u>and</u> Closest BLS Ambulance | Closest 1st Responder <u>and</u> Closest BLS Ambulance if available | Closest 1st Responder | - Trauma Closest 1st Responder - Medical Referral to Nurse or Health Department Advice Phone service if available; or self-transport to Alternate Care Site |
| Classification 5 (*Alpha) BLS Treatment | BLS Ambulance | Alternate Care Referral | Alternate Care Referral | Alternate Care Referral |
| Classification 6 (*Omega) Non-Ambulance Care | Alternate care such as Poison Control Center; Police/Fire service call, etc. | Alternate care such as Poison Control Center; Police/Fire service call, etc. | Alternate care such as Poison Control Center; Police/Fire service call, etc. | Alternate care such as Poison Control Center; Police/Fire service call, etc. |