

K. PROPOSED PROTOCOL SUBMISSION REQUEST POLICY

MIEMSS is open to Protocol Concept/Sponsor Request and Proposed Protocol Submissions from any health care provider or interested party.

1. PROTOCOL APPLICATION PROCESS

- a) Complete the attached “Proposed Protocol Submission Template.”
- b) Each application will need a sponsoring “System Medical Director” (someone from the following groups: Executive Director of MIEMSS, State EMS Medical Director, Associate State Medical Director for Pediatrics, Regional Medical Directors, Associate Regional Pediatric Medical Directors, EMS Operational Program Medical Directors, or Assistant EMS Operational Program Medical Directors).
- c) Proposed Protocol Submission Template will be delivered to the State EMS Medical Director.
- d) If you do not have a sponsoring System Medical Director, a “Protocol Concept/Sponsor Request” submission may be submitted to the Protocol Review Committee for a straw vote on the concept and to acquire a sponsoring “System Medical Director” before the formal Proposed Protocol Submission Template submission.

2. ESSENTIAL CRITERIA FOR PROPOSED PROTOCOL SUBMISSION

- a) Clearly defined indication(s) for the proposed protocol
- b) An explanation providing the advantages and disadvantages that the proposed protocol will have on patients encountered by EMS and how it will impact the delivery of EMS within Maryland
- c) Strong evidence supporting the implementation of the proposed protocol (as noted on the template)
- d) Fiscal impact statement
- e) A System Medical Director sponsor

3. PROTOCOL EVALUATION BEFORE SUBMISSION TO THE PROTOCOL REVIEW COMMITTEE

- a) The Proposed Protocol Submission Template will be evaluated by the State EMS Medical Director with input from subject matter experts and appropriate standing committees within MIEMSS when indicated.
- b) Once the proposed protocol submission has been appropriately formatted and reviewed, it will be forwarded to the Protocol Review Committee.
- c) With the approval of the proposed protocol submission by the Protocol Review Committee, the proposed protocol will then be forwarded for comment to the State EMS Advisory Council followed by approval of the EMS Board for implementation, based on the current protocol printing and implementation cycle.
- d) Following EMS Board approval of Optional Supplemental, Pilot, and Research Proposed Protocols, the EMS Operational Programs may apply for and implement these types of proposed protocols with the approval of the State EMS Medical Director through a separate application and approval process.

Date submitted to State EMS Medical Director: _____

Submitted by Name (print): _____

Signature: _____

Jurisdiction: _____

Contact Phone: _____

Email: _____

Sponsoring System Medical Director (print): _____

Signature: _____

Contact Phone: _____

Email: _____

Forward Proposed Protocol Submission to:

MIEMSS

State EMS Medical Director

653 West Pratt St., Room 405

Baltimore, MD 21201

Or email:

Ralcorta@miemss.org

Official Use Only

Date received by OMD: _____

Review Date: _____ Approved / Denied

Protocol Review Committee hearing date: _____ Approved / Denied

L. PROPOSED PROTOCOL SUBMISSION TEMPLATE

I. EXPLANATION

II. INDICATION

III. SUPPORTING EVIDENCE AND LITERATURE

IV. SUPPORTING MARYLAND AND/OR NATIONAL DATA

V. FORMATTED PROTOCOL TO MEET *The Maryland Medical Protocols for EMS Providers*

Patient Care

Presentation

Treatment

Basic Life Support

Advanced Life Support

Adult

Pediatric

Where indicated, Geriatric

Where indicated, Online Medical Consultation

Where indicated, Algorithm

Where indicated, Alerts

Procedure/Skill

Purpose

Indication

Contraindications

Potential Adverse Effects/Complications

Precautions

Procedure

Medication

Indication

Pharmacokinetics

Adverse Effects

Precautions

Contraindications

Preparations

Dosage

Adult

Pediatric

Where indicated, Geriatric

Where indicated, Online Medical Consultation

VI. FISCAL IMPACT STATEMENT COVERING THE START-UP AND MAINTENANCE COST OF THE MEDICATION, DEVICE, REPLACEMENT PARTS, AND ANY UNIQUE REQUIREMENTS TO IMPLEMENT THE PROTOCOL

VII. IMPACT ON THE EXISTING *Maryland Medical Protocols for EMS Providers*

M. PROTOCOL CONCEPT/SPONSOR REQUEST

The Protocol Concept/Sponsor Request is to allow for the submission of an idea, medication, or skill to the Protocol Review Committee as a sounding board before completing the "Proposed Protocol Submission Template." The Protocol Concept/Sponsor Request also provides an opportunity for the author of the concept to recruit a System Medical Director to champion and sponsor the formal Proposed Protocol Submission Template.

Requirements for submission

Provide a paragraph describing the concept in as much detail as possible covering the idea, medication, or skill and the following demographics.

Date submitted to State EMS Medical Director: _____

Submitted by Name (print): _____

Signature: _____

Contact Phone: _____

Email: _____

Forward Protocol Concept/Sponsor Request Submission to:

MIEMSS

State EMS Medical Director

653 West Pratt St., Room 405

Baltimore, MD 21201

Or email:

Ralcorta@miemss.org

Official Use Only

Date received by OMD: _____

Review Date: _____ Approved / Denied

Protocol Review Committee hearing date: _____ Approved / Denied

Acquired Sponsoring System Medical Director (print): _____

Signature: _____

Contact Phone: _____

Email: _____