YNHH CEMS Policy and Procedure Manual Summary of Changes



Policy	Changes
1.1 Medical Control Overview	Minor changes.
1.1 Covered Agencies	• No changes.
1.3 Guidelines	 Adds that EMS agencies must be in compliance with all YNHH CEMS policies, procedures, and directives for applicants to be considered for medical authorization. Minor changes.
1.4 Professional Conduct	Minor changes.
1.5 Medical Authority at the Scene	Minor changes.
1.5 Documentation	Significant changes.
2.1 EMT Medical Authorization	Significant changes.
2.2 Paramedic Medical Authorization	 Changes medical authorization expiration for clinicians in a non-clinical position or unable to function in a clinical position from a six-month time period to a twelve-month time period. Removed requirement for a paramedic to complete 40 hours of approved EMT continuing education within 6 months of relinquishing paramedic medical authorization to function at the EMT level. Adds Red Cross and Military Training Network as accepted BLS-HCP cards. Removes, "For reasons of liability." From a statement pertaining to practicing as a paramedic at one agency, and an EMT at another agency. Minor changes.
2.3 EMS Instructor Medical Authorization	• New policy.

2.4 Continuing Education for Continuing Medical Authorization	New policy.
2.5 Criminal Arrest/Conviction Policy	 Adds a section for denial, suspension, or withdrawal of medical authorization in cases of criminal arrest. Minor changes.
3.1 BLS/ALS Assessment	 Removed ALS cancellation restrictions. Adds reference to policy 3.2 in paragraph discussing BLS clinicians cancelling ALS clinicians. Minor changes.
3.2 ALS Cancellation Policy	• New policy.
3.3 Paramedic Airway Policy	Minor changes.
3.4 Cardiac Cath Lab Activation	 Adds section for patients with significant concern for STEMI but who do not meet cath lab activation criteria. Modification to cath lab hours on federal holidays. Minor changes.
3.5 Stroke Alert	• Minor changes.
3.6 Triage and Transport Guidelines	 Changes gestational age for patients who should be transported only to YSC from 20 weeks or greater to 16 weeks or greater. Minor changes.
3.7 Trauma Destination Guidelines	 Adds criteria for burn patients that shall be transported directly to Bridgeport Hospital. Adds positive FAST exam as a trauma criterion for EMS clinicians trained and authorized in performing the exam. Adds that normal saline is the preferred crystalloid over lactated ringers in patients with suspected TBI or ICH. Minor changes.
3.8 Pediatric Trauma Destination Guidelines	 Adds criteria for burn patients that shall be transported directly to Bridgeport Hospital. Minor changes.
3.9 Lights and Siren Policy	• Minor changes.
4.1 Communications	Minor changes.

4.2 Hospital Notifications	Minor changes.
4.3 YNHH Capacity Coordination Center (C3)	 Adds that incident command or designee should prioritize notification to C3 of incidents involving three or more ambulances to any incident, three or more critical (red) victims, and/or seven or more patients for transport. Minor changes.
4.4 Mass Casualty Incident Communication	Minor changes.
5.1 Interfacility Transport Medications	Minor changes.
5.2 Interfacility Transport Ventilator	 PEEP ventilator setting changed to 2-10 cm H₂O. Changes approved ventilator rates from 10-16 to 10-20. Minor changes.
5.3 Interfacility Transport to Hospice	Significant changes.
5.4 Specialty Care Transport	• New policy.
6.1 Clinical Investigation and Remediation Policy	Significant changes.
6.2 Medication Error Policy	New policy.
7.2 Scope of Practice	 CPAP, Tracheobronchial Suctioning of Intubated Patient, and Intramuscular Medication Route are authorized for EMTs after undergoing approved CEMS training. Chest Tube Maintenance, Ventilator Operation, Intravenous Pump, Indwelling Catheter & Central IV Port Access, Central Line Monitoring, and Point of Care Ultrasound are authorized for paramedics after undergoing approved CEMS training. Minor changes.
7.2 Medication Formulary	 Adds Cefazolin and Lactated Ringers as optional medications that may be carried at the discretion of the EMS agency. Minor changes.

The policy and procedure manual has undergone significant revisions and some changes may not be listed in this summary of changes document. Please be sure to review the new policy and procedure manual.