Central California EMS Agency
Bullet Points
9/08

Deemphasizing ET tubes in codes

- Prehospital personnel are to focus on good BLS airway, deemphasizing ET tubes in codes. This does not mean that prehospital personnel will never intubate during a code, but rather focus on treatment (i.e., shock, IV drug administration) that have shown to be of more benefit during a code. Inability to adequately ventilate with BLS airway still mandates an ET tube.

IO Administration

- Needles bending during IO insertion are most likely due to poor technique. Prehospital personnel are reminded to use a twisting downward motion while inserting an IO. Unlike the softer bones of children this process may take 1-2 minutes before accessing bone marrow on adult patients.

Poison Control

- Prehospital personnel are not to contact Poison Control directly for medical control or consultation, even if instructed to do so by the MICN or Base Hospital Physician. If indicated, this should be done by the Base Hospital, and pertinent information will then be relayed to the prehospital personnel.

Vital Signs Stable

- The term Vital Signs Stable (VSS) means at least two (2) sets of vital signs at different times. Generally, this implies that both sets of vitals are within normal limits (WNL). However, a patient who consistently stays at the same tachycardiac heart rate is still stable.
- If a single set of vital signs (RR, HR, BP) is within normal limits (WNL), this is not vital signs stable (VSS), but simply within normal limits (WNL).