



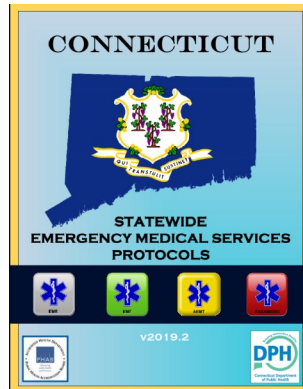
Emergency Medical Services *Partners*

July 2019, Issue 109

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New 2019 Statewide Protocol Updates

The latest version of the Connecticut statewide EMS treatment protocols has been released. **UConn John Dempsey** sponsored services can begin operating under them effective July 1, 2019. A summary of the changes and the latest version of the guidelines are available for download at:



<https://portal.ct.gov/DPH/Emergency-Medical-Services/EMS/Statewide-EMS-Protocols>

Key changes are highlighted in this newsletter:

STROKE (New Pearls)

Suspect stroke in patients with any of the following symptoms: acute visual disturbance, altered mental status, difficulty walking or with balance, severe headache, speech difficulty, unilateral weakness.



Acute onset of stroke symptoms < 24 hours from last known well time is an emergency with rapid transport indicated.

Hypoglycemia (New Definition)

Hypoglycemia definition changed from <70 mg/dl to <60mg/dl.

Bristol Cardiac Arrest Save

Bristol EMS responded for a man who collapsed at home and who received CPR from his wife and first responders. The patient was in ventricular fibrillation. Thanks to their excellent care including multiple defibrillations, quality CPR and airway management, several doses of epinephrine and amiodarone, they restored pulses. They brought the patient to **UConn John Dempsey Hospital** where he was treated by our emergency department, cardiology and ICU medical staffs. He regained full neurological function and, after receiving an internal defibrillator, was released home after nine days in the hospital, doing well. All the links in the chain of survival held strong and saved another life. Great job all!



[Above picture: (right to left) Paramedics Behuniak, Bourdeau and Mara. EMTs Larese and Staubit. Paramedic Bruce].



**American Heart Association
ACCREDITATION**
Meets standards for
Heart Attack Receiving Center

**Mission:
Lifeline®**

OHCA



Cardiac Arrest Termination (Revised)

For patients in asystole or agonal rhythm (defined as wide QRS complexes at an irregular rate <20 per minute with no P waves), consider termination of resuscitation if there is no return of spontaneous circulation after **20 minutes** of resuscitation in the absence of hypothermia and the **ETCO2 is less than 10 mmHg**.



For patients in PEA with a rate above 20 or refractory and recurrent ventricular fibrillation/ventricular tachycardia, consider early expert consultation with Direct Medical Oversight for direction and possible orders to transport, continue or terminate resuscitation.

Consider resuscitation for up to 60 minutes from the time of dispatch. Request to terminate efforts may be appropriate prior to 60 minutes based on factors including but not limited to ETCO2 less than 10 mmHg, age, comorbidities, distance from, and resources available at the closest hospital.

Exertional Heat Stroke Protocol (New)

Exertional Heat Stroke (EHS) is a unique and emergent hyperthermic condition that occurs in individuals performing intense physical activity, typically but not limited to, warm environments. Consider the EHS protocol in any intensely exercising athlete, laborer, fire or EMS personnel with altered mental status.



Pediatric Tachycardia (Change)

For consistency with PALS guidelines, prioritized synchronized cardioversion as treatment of SVT with poor perfusion when no vascular access is available.

UConn Health JDH EMS Website

For news, educational information, CME schedule and past copies of our newsletter *Partners*, check out our website at:

health.uconn.edu/ems

Thrombectomy with Flow Reestablished

Simsbury EMS paramedic Ashley Martin and her partners Matthew Nardoza and Deanna Cunningham called in a **Stroke Alert to UConn John Dempsey Hospital** for a patient with right-sided weakness, language disturbances, and altered mental status. Imaging showed an occlusion of the left MCA MI segment. A mechanical thrombectomy was performed completely restoring blood flow. This patient's deficits have dramatically improved & with continued therapy should only continue to improve. Great job all!



UConn EMS CONTINUING EDUCATION 2019



July, August – No CME
September 19, 2019
October 17, 2019
November 21, 2019
December 19, 2019



8:30-11:30 A.M.

Cell and Genome Building
400 Farmington Avenue, Farmington, CT

3 Hours CME
ALL EMS RESPONDERS WELCOME

UConn EMS CONTINUING EDUCATION



Coming this Fall

Cardiac Arrest
Special CME
October 17, 2019



EMS Evening Stroke Symposium
Fall 2019

CONTACT US:

Any questions or suggestions about EMS?
Looking for patient follow-up?



Contact EMS Coordinator Peter Canning at
canning@uchc.edu or call (860) 679-3485.