



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Office of Emergency Medical Services
99 Chauncy Street, 11th Floor
Boston, MA 02111

DEVAL L. PATRICK
GOVERNOR

JOHN W. POLANOWICZ
SECRETARY

CHERYL BARTLETT, RN
COMMISSIONER

Tel: 617-753-7300
Fax: 617-753-7320
www.mass.gov/dph

MEMORANDUM, REVISED

TO: All MA Licensed Ambulance Services and MA Accredited EMT Training Institutions
CC: EMCAB Members
FROM: Dr. Jonathan Burstein, State Emergency Medical Services (EMS) Medical Director
DATE: August 14, 2014
RE: Required Medications on Paramedic Ambulances per Updated Statewide Treatment Protocols, v. 12.03

In order for ambulance services licensed at the ALS-Paramedic level to provide care in accordance with the 2014 updated Statewide Treatment Protocols (STP), v. 12.03, they will need to make some changes in the medications or medication levels they carry. This document is a temporary update to OEMS form 500-23 "Ambulance Inspection Report Form—Advanced Life Support."

Services must complete training and medication changes for STP v. 12.03 by September 6, 2014. Once a service has successfully trained all of their providers, and adjusted vehicle medication levels, they may begin operating under the revised protocols. Of note: Charcoal has been removed completely, and Haloperidol (Haldol) added, in quantities below. Paramedic units must carry full doses of midazolam, and AT LEAST FULL DOSES of either Diazepam or Lorazepam. It is permissible to carry all three benzodiazepines. Fentanyl must be carried, but Morphine is optional.

This document has been updated, and is version **14.3**. Minimum medication quantities have been revised to better reflect operational use and reasonable restocking time. For those services that have high volume and/or limited access to drug replacement through the pharmacy they affiliate with, adjustments to minimum drug quantities are needed. Alternative drug replacement for off hours may be necessary in order to maintain minimum par levels.

Please note, medications may be available in concentrations not listed below, and should be maintained in consultation with the hospital pharmacist and affiliate hospital medical director.

ALL of the following medications are required:

ADVANCED LIFE SUPPORT (PARAMEDIC LEVEL) MEDICATION LIST

VERSION 14.3

REQUIRED MEDICATIONS		
Medication Name	Suggested Concentration/ Formulation	Minimum quantity per vehicle
Adenosine (Adenocard)	6mg/2mL	36mg
Albuterol	2.5mg for Nebulizer	10mg
Amiodarone	150mg/3mL	450mg
Aspirin	81mg (chewable)	650mg
Atropine Sulfate	1mg	3mg
Calcium Chloride	10% solution-- 100mg/mL	1g
Dextrose	25g of D10, additional medication as D10, D25 or D50	50gm
Diazepam (Valium) *		20mg
Diltiazem		100mg
Diphenhydramine (Benadryl)	50mg	100mg
Dopamine	1600mg	800mg
Epinephrine	1:1000 for infusion	2mg
Epinephrine	0.3mg and 0.15mg (Auto-Injector)	2 each dose
Epinephrine	1:10,000 (1mg pre-filled syringes)	12mg
Fentanyl (Sublimaze)	50mcg/mL	400mcg
Furosemide (Lasix)		80mg
Glucagon	1mg ampules	2mg

REQUIRED MEDICATIONS		
Medication Name	Suggested Concentration/ Formulation	Minimum quantity per vehicle
Haloperidol (Haldol)	5mg	10mg
Ipratropium Bromide (Atrovent)	0.5mg	2000mcg/4 doses
Lidocaine HCL 2%	Pre-Filled syringes; 20mg/ml	200mg
Lidocaine HCL	Vials for infusion or pre-mixed bags	2gm/1 bag
Lorazepam (Ativan) *		8mg
Magnesium Sulfate		4g
Metoprolol (Lopressor)	5mL ampule	10mg
Midazolam (Versed)	5mg/mL	10mg
Naloxone (Narcan)		20mg
Nitroglycerin	Bottle or 6 unit dose tabs & Paste (1) tube/2 doses	1 each
Ondansetron (Zofran)	2mg/mL	8mg
Racemic Epinephrine	11.25mg/2mL	2 doses
Sodium Bicarbonate	2 pre-filled @ 50mL	100 mEq
Solu-Medrol (Methylprednisolone) OR Solu-Cortef (Hydrocortisone)	125mg OR 100mg	125mg OR 100mg
Thiamine (B1)	100mg/mL	200mg

OPTIONAL MEDICATIONS		
Hydroxocobalamin (B12)	Tetracaine	NeoSynephrine/Phenylephrine nasal
Nerve Agent antidote kit	Vasopressin	Lidocaine jelly
Cyanide antidote kit	Morphine; quantity of 20mg/vehicle	
Any other medications, as authorized by DPH		

* At least one (Lorazepam or Diazepam) MUST be carried, in addition to midazolam.

If you have any questions, please contact Daniel Saxe, NRP I/C, OEMS Trauma Coordinator, at daniel.saxe@state.ma.us.