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# Introduction

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## **PROTOCOLS POLICIES AND PROCEDURES COMMITTEE** **MISSION STATEMENT**

The intent is to provide current, well-researched, and accepted standards with the ultimate goal of minimizing the morbidity and mortality of our patients, and to provide guidelines for the treatment of specific emergency conditions in the pre-hospital setting.

## **PROTOCOLS, POLICIES AND PROCEDURES COMMITTEE** **GOALS**

1. To establish minimum standards for appropriate patient care.
2. To ensure a structure of accountability for operational medical directors, physician course directors, facilities, agencies, and providers.
3. To establish the knowledge base for certification and recertification in the region.

### **AUTHORITY**

The Peninsulas EMS Council regional medical protocols are developed by consensus of participating agencies under Virginia Emergency Medical Services Regulations *12VAC5-31* (Performance Standards). Each agency OMD must approve the protocols and has the authority to limit or expand implementation of protocols within their agency. Virginia Emergency Medical Services Regulations *12VAC5-31* (Responsibilities of Operational Medical Directors) grants authority to establish and enforce protocols, policies and procedures. All prehospital medical care is carried out with the express written authority of the operational medical directors and under their supervision. Virginia Emergency Medical Services Regulations *12VAC5-31* (Operational Medical Director Authorization to Practice) states “EMS personnel may only provide emergency medical care while acting under authority of the operational medical director for the EMS agency with which they are affiliated and within the scope of the EMS agency license”.



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## INTRODUCTION

The following protocols were developed as a collective effort by a group of dedicated and knowledgeable EMS providers, EMS educators, and operational medical directors of the EMS agencies of Peninsulas EMS Council (PEMS). These individuals, who recognized a need for a "Standard of Excellence," volunteered for the PEMS Protocols, Policies, and Procedures (*PPP*) Committee, a sub-committee of the PEMS Medical Advisors Committee (*MAC*). This committee researched and reviewed the following patient care guidelines.

This collaborative effort provides a dynamic document that is based on national and state standards of care that include but are not limited to:

- Virginia Department of Health
- American Heart Association - Advanced Cardiac Life Support and Pediatric Advanced Life Support
- American Academy of Pediatrics - Pediatric Education for Prehospital Professionals American College of Surgeons Committee on Trauma - Advanced Trauma Life Support
- National Association of Emergency Medical Technicians

These protocols are reviewed continuously and updates provided to the MAC for deliberation and approval as national, state, and regional standards change and are supported by scientific research and literature.

The primary purpose of these protocols is to establish a foundation and a minimum standard of care for the pre-hospital care delivered in our region. This is best served by active EMS operational medical directors and dedicated EMS providers supported by continued education, review, quality improvement and continuous pursuit of excellence.

Although no document can specifically address every possible variation of injury or disease, this manual provides a foundation for the care of the patients we serve. The education, experience, and judgment of the pre-hospital provider should be recognized as the paramount part of sound clinical decision-making processes regarding pre-hospital care. The complexity of emergency medicine and the pre-hospital setting requires a team approach using every appropriate, accepted and available resource to provide optimal patient care. In many cases, that resource is on-line medical control for consultation, advice, guidance, and authorization or modification of treatment not specifically addressed in this manual. The specific handling of these situations is determined by the operational medical director responsible for that particular EMS agency and the EMS providers they oversee, and for that reason is intentionally not addressed in this manual.

The departmental policies are the responsibility of each agency and operational medical director. All are encouraged to support the premise of regional care and the collective effort on which these guidelines were founded.

The provision of emergency care does not, and should not, occur in isolation. It requires many individuals and organizations working together towards a common goal - optimizing our patients' clinical outcomes. The efforts provided by the PPP Committee while working in conjunction with the MAC will provide a basis for the development of a regional EMS approach to the "Standard of Excellence".