# 1A OVERVIEW of PATIENT CARE GUIDELINES

## Purpose

The purpose of these Patient Care Guidelines is to provide HealthEast Medical Transportation (HEMT) providers with guidance for treating the majority of service requests and situations they encounter. The guidelines provide physician orders for the care that HEMT patient care providers may provide under the authority of the Medical Director and establish a standard to assist providers in delivering consistent, high-quality care.

## Content and Format

***Patient Care Goals –*** The purpose of the "Patient Care Goals" section is to describe the desired goals of the care provided and to serve as a framework for assessing the guideline's effectiveness during HEMT's continuous quality improvement activities.

***Assessment and Treatment Steps –*** The specific treatment guidelines contain separate sections that list a step-by-step outline of the care to be provided by EMT, Paramedic, and Critical Care Paramedic providers. In each guideline, patient care providers are expected to provide the treatment, if indicated, in each step up to and including the section corresponding to their authorized level of function. In general, the treatment sections list only the steps to be followed when providing patient care while additional details have been separated from the treatment steps and are referred to via footnotes in the "Notes" section at the end of each guideline. The sequence of steps in the Basic, Paramedic, and Critical Care Paramedic sections usually will follow the approximate order of treatments initiated during a patient care response. However, it is not uncommon for steps to be performed out of order or for multiple steps to be performed simultaneously.

***Pediatric Patients –*** Some sections are divided into columns that contain different treatment steps for adult and pediatric patients. A single column is used when treatment steps in that section may be applied to all patients, or when the patient condition in the guideline is not normally encountered in the pediatric population. When a guideline does not provide pediatric-specific orders and there appears to be an indication for that treatment, patient care providers should contact Medical Control for orders.

***Documentation Key Points –*** HEMT considers the listed "Documentation Key Points" to be essential for evaluation and verification of care and services provided. Providers are expected to document these items in the patient care record and also report them when the patient is transferred to the next level of care. The key points listed in **1B: General Assessment and Care** are intended to be applied to all patients by all levels of provider.

***Notes –*** This section of each guideline provides indications, contraindications, precautions, and other information that expands on the other sections of the guideline. The notes should be considered important material that complements the treatment steps and information provided in the other sections of the guidelines.

***Medication Reference*** –The medication reference section contains detailed information on medications that the provider may administer as well as some that may be administered during interfacility transport. The reference includes the indications, contraindications, mechanism of action, usual dosages for both adult and pediatric patients, as well as adverse reaction and special notes that must be considered during administration. The background color of the "Dosage and Administration" header indicates the level of provider who may administer the medication. A green background indicates the medication may be administered by an EMT level provider and a blue background by a Paramedic or Critical Care level provider.

***Medical Procedures –*** In the medical procedures guidelines, the color bars are labeled with the lowest functional crew level authorized to perform the procedure. All crews are authorized (and expected) to perform procedures labeled as "EMT". "Paramedic" procedures are to be provided by both advanced and critical care level providers. Follow manufacturer instructions for use of devices or equipment in the Procedure Section unless different instructions are explicitly explained in these guidelines.

***Reference Section –*** The reference section contains information to assist in patient care with such things as stroke and Glasgow coma scales, burn area calculations, and lists of commonly prescribed medications and lab values. The full Handtevy pediatric medication guideline is now included. Also added is the step-by-step process to be used during Medication Administration and Cross Check.

## Deviation

Adherence to the guidelines is expected; however, it is accepted that guidelines must be used in combination with good judgment and critical thinking by the care provider. Deviation is allowed when necessitated by unique circumstances and the needs of the patient. In such cases, direct consultation with on-line Medical Control is recommended, but not required, when a situation requires immediate action. In all situations where the care provided deviates from any guideline, documentation of the reason for the deviation is required and must include the following information:

1. The situation and circumstances that led to the variance decision.
2. The specific actions that deviated from the guidelines.
3. Content of discussions with on-line Medical Control or reason for not contacting Medical Control prior to the variance.

All deviations are to be reported to the Medical Director through established Clinical Incident Reporting.

## Change Requests

Requests for changes, additions, deletion or new guidelines will be made by submitting a Guideline Change Request Form and supporting documentation. This form can be found on the HEMT OMD Section of 9th Brain.

## Guideline review

Review of the guidelines will occur on a regular basis with a predetermined number or group of guidelines reviewed. Patient care providers will receive notification of what guidelines are being reviewed and will be given a timeline to give input. Clinical practice stakeholders will review and revise the guidelines with input from the office of the Medical Director, Operations, Quality, Information Technology, Materials Management, and Education. Guideline changes will be implemented after education is complete. Any stakeholder can delay implementation with clear reasoning based on patient or staff safety concerns. Implemented guidelines can be suspended at any time by the Medical Director or if practice or quality assurance stakeholders identify real or potential staff or patient safety risks. Emergent guideline changes may still be necessary. An emergency roll out would be defined as a necessary change in patient care equipment, supplies or guidelines following identification of problems or potentially dangerous practice, either industry wide or within HEMT.