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**To:** San Mateo County Prehospital Care Providers

**From:** Gregory H. Gilbert, MD, FAAEM, FAEMS

Date: November 7, 2017

**Subject:** Pediatric Intubation Removal from Scope of Practice/Intramuscular (IM) injections

At the last Emergency Medical Directors Association of California (EMDAC) meeting, pediatric intubation was removed from the paramedic optional scope of practice. Pediatric patients fitting on the Broselow tape shall not be intubated.

By November 15, all pediatric endotracheal tubes, sizes 5.0 and smaller, will be removed and we will be using bag valve mask (BVM) as I have been encouraging for years. Pediatric blades, both straight and curved, will be kept on the apparatus for use in foreign body removal.

Changes to the following EMS Policies, Protocols, and Procedures will be coming shortly to reflect this change:

## **Policies:**

Equipment 3

## **Procedures:**

- Procedure 5-Airway Management
- Procedure 17-King Airway

## **Pediatric Protocols**

- Allergic Reaction
- Altered Mental Status
- Burns
- Cardiac Arrest Overview, Asystole/PEA, Vfib/Pulseless Vtach
- Bradycardia
- Neonatal resuscitation
- Pediatric assessment
- Poisonings
- Respiratory Distress

Regarding IM injections, the preferred site for all medications is the thigh muscle for both pediatrics and adult (vastus lateralis). I would expect you to use this site unless there is some reason precluding that. If that site cannot be used, please indicate the reason in your EMS documentation.

