



SPECIALIZED MEDICAL SERVICES

VERONICA KELLEY, DSW, LCSW
AGENCY DIRECTOR

MINDY WINTERSWYK, DPT, PCS
DIRECTOR OF SPECIALIZED MEDICAL SERVICES

ALMAAS A. SHAIKH, MD, MPH, FACS
EMS MEDICAL DIRECTOR
DEPUTY HEALTH OFFICER

8300 MARINE WAY
IRVINE, CA 92618

Date: October 27, 2026

To: Base Hospital Coordinators
Base Hospital Medical Directors
911 Provider EMS Coordinators / Managers
911 Provider Medical Directors
ERC Medical Directors
ERC Directors / Managers
IFT-ALS Nurse Coordinators
Paramedic Training Centers
BLS Ambulance Providers

Re: **NEW AND UPDATED EMS POLICIES, PROCEDURES, STANDING ORDERS, AND
TREATMENT GUIDELINES**

A handwritten signature in black ink, appearing to be 'AS' or similar, located below the 'Re:' line.

Orange County Emergency Medical Services (OCEMS) routinely releases new and revised policies, procedures, standing orders and treatment guidelines twice annually on April 1st and October 1st. Due to the volume and scope of the revisions included in this cycle, the October 2026 release has been delayed until October 27, 2026.

The documents summarized below will be posted in the "Upcoming" section of the OCEMS website. To preserve the customary six-month implementation period, agencies and providers may begin implementing these updates upon release, with full implementation for this release only extended to and required by April 27, 2027. This transition period allows time for personnel education, training, and necessary operational adjustments. The release also introduces a new Treatment Guideline format. The new format combines standing order and Base Hospital treatment guidelines for a specific condition into a single





document, with designated sections for definitions and notes, BLS and ALS interventions, transport considerations, additional considerations, and Base Hospital interventions. Conversion to this format for all relevant documents will occur in phases.

OCEMS may issue updates outside the routine release schedule or require an earlier implementation date when clinical, operational, or regulatory needs warrant. Any exceptions to the six-month implementation in these cases will be expressly identified.

October 1, 2026 EMS NEW DOCUMENTS

POLICES:

- 305.00 Prehospital Naloxone Leave Behind Policy
- New policy.

TREATMENT GUIDELINES:

- C-010 Cardiac Arrest – Adult/Adolescent Treatment Guideline
- Formerly known as SO-C-010 and BH-C-010.
 - BLS Interventions added:
 - Refer to SO-BLS.
 - Initiate an organized, team-based CPR management approach and continue high-quality CPR without interruption of continuous compressions unless pulse obtained.
 - Utilize BVM with OPAS for initial airway management and add EtCO₂ when available.
 - If cardiopulmonary arrest was witnessed by bystanders or EMS personnel and resources are limited, consider passive ventilation procedure (OCEMS PR-025) for up to 6 minutes.
 - Apply an AED and follow instructions until an ALS crew takes over care.
 - If suspected opioid overdose, consider: Naloxone pre-load nasal spray (SO-B-002).
 - Extensive and substantive changes have been made to this treatment guideline using a concept-based approach which are too numerous to list out.
 - Added medications Magnesium Sulfate and Calcium Gluconate 10%.





E-005 Burns – Adult/Adolescent Treatment Guideline

- Formerly known as SO-E-005 & BH-E-05
- BLS Interventions added:
 - Refer to SO-BLS.
 - Break contact with causative agent.
 - Remove jewelry and clothing from the area involved.
 - Begin flushing burns with copious amounts of cool running water (target 20 minutes; do not delay transport).
 - Specific interventions to do for thermal burns, toxic inhalation, chemical burns, and tar burns added.
- ALS Interventions added:
 - Added additional forms of pain medication that can be given.
- Under Additional Considerations explanation for 20CRW was made.
 - 20 minutes of cool running water within the first three hours prevents worsening injury, reduces pain, lowers risk of infection, and improves long-term outcomes.

E-010 Decompression Sickness – Adult/Adolescent Treatment Guideline

- Formerly known as SO-E-010 & BH-E-10
- BLS Interventions added:
 - Refer to SO-BLS.
 - Spinal motion restriction if diving or shore-break accident suspected.
 - Administer 100% O2 via mask as soon as possible.
 - Prevent and treat hypothermia by removing wet clothing and initiating rewarming when appropriate.
- No change made to ALS interventions from previous standing orders.
- Removed the statement “position patient in flat, supine position” due to recent studies on the Durant and Trendelenburg positions showing no additional benefit and it is best to place patient in a position of comfort.
- Added a list of items to obtain from diving history if available under the Additional Considerations section.

E-015 Drowning – Adult/Adolescent Treatment Guideline

- Formerly known as SO-E-015 & BH-E-15
- BLS Interventions added:
 - Refer to SO-BLS.
 - Spinal motion restriction if diving or shore-break accident suspected.
 - Prevent and treat hypothermia by removing wet clothing and initiating rewarming when appropriate.





- No change made to ALS interventions from previous standing orders.
- Added a list of items to obtain from submersion history if available under the Additional Considerations section.
- All drownings are now required to make Base Hospital contact.
- Listed within the Base Hospital section are reasons to send a drowning victim to a Trauma Center which include:
 - Shore break, diving, or watercraft-related incident.
 - External evidence of trauma.
 - Unwitnessed drowning.
 - Meets mechanism or trauma injury criteria per OCEMS Policy #310.30 (Trauma Triage).

E-025

Thermal Disorders – Adult/Adolescent Treatment Guideline

- Formerly known as SO-E-025 & BH-E-25
- BLS Interventions added:
 - Refer to SO-BLS.
 - Specific interventions to do for hypothermia, mild / moderate hyperthermia, and severe hyperthermia added.
- No change made to ALS interventions from previous standing orders.
- Added to Additional Considerations section “Monitor the skin if you apply ice packs for prolonged periods. The skin is susceptible to damage with prolong exposure to ice. Covering ice packs with a sheet and adjusting the site can mitigate injury”.
- Under the Base Hospital added additional forms of pain medication that can be given.

E-030

Snake Envenomation – Adult/Adolescent Treatment Guideline

- Formerly known as SO-E-030 & BH-E-30
- BLS Interventions added:
 - Refer to SO-BLS.
 - Added a list of interventions for the affected extremity.
- ALS Interventions added: treating allergic reaction, hypotension, and pain.
- **Note: Ketorolac is excluded from the pain medication list due to coagulopathy.

M-005

Abdomen Pain – Adult/Adolescent Treatment Guideline

- Formerly known as SO-M-005 & BH-M-05
- BLS Interventions added:
 - Refer to SO-BLS.
 - Evaluate and treat for hypoglycemia per OCEMS Procedures





B-050 and B-055.

- NPO status.
- No change made to ALS interventions from previous standing orders.
- Additional notations were made to reinforce different causes of abdomen pain.
- Listed concerning elements from patient history to reinforce the need for ALS transport.

M-010

Diabetic Emergencies – Adult/Adolescent Treatment Guideline

- Formerly known as SO-M-010 & BH-M-10 which was just for Hyperglycemia.
- There was no separate guideline for Hypoglycemia other than for Altered Mental Status.
- Combining the two diabetic conditions into this one treatment guideline.
- No change made to ALS interventions from previous standing order.
- BLS Interventions added:
 - Refer to SO-BLS.
 - Assess blood glucose and treat per SO-B-003.
- Added the notation in the Additional Considerations section to select 'Provision of Food' with the drop-down menu within the Procedures Tab on the ePCR.

M-015

Allergic Reaction – Adult/Adolescent Treatment Guideline

- Formerly known as SO-M-015 & BH-M-15.
- BLS Interventions added:
 - Refer to SO-BLS.
 - Assist patients with the administration of their physician prescribed emergency devices and medications to include but not limited to bronchodilator inhaler/nebulizer or epinephrine device.
 - Remove the stinger / injection mechanism.
 - Ensure proper positioning for adequate ventilation and suction as needed.
- Allergic reaction definition highlighting skin-based reaction & no airway involvement.
- Anaphylaxis definition highlighting acute onset of a systemic reaction involving two or more systems, any airway involvement, or unstable vital signs.
- Adding Diphenhydramine intervention to allergic reaction treatment.
- Allowing for BLS transport after Diphenhydramine intervention with skin-based reaction, stable, vital signs, and no history of anaphylaxis for "ADULT" patients only.





O-010 Hypertensive Disorders of Pregnancy – Adult/Adolescent Treatment

Guideline

- Formerly known as SO-O-010& BH-O-10
- BLS Interventions added:
 - Refer to SO-BLS.
 - Place pregnant patient in left lateral position if second or third trimester.
 - If supine position is required, manually displace the uterus to the left.
- Added additional information to the definition of pre-eclampsia and eclampsia.
- Added to ALS interventions the administration of Magnesium Sulfate if pre-eclampsia or eclampsia is present as exhibited by a SBP>160 or DBP>110 along with listed symptoms.
- Base Hospital contact is required.

O-015 Vaginal Bleeding – Adult/Adolescent Treatment Guideline

- Formerly known as SO-O-015 & BH-O-15
- BLS Interventions added:
 - Refer to SO-BLS.
 - Place pregnant patient in left lateral position if second or third trimester.
 - If supine position is required, manually displace the uterus to the left.
- Added to ALS interventions the administration of Tranexamic Acid (TXA) for patients with ongoing bleeding within 3 hours post-delivery and have a SBP<90 or Shock Index>1.
- If TXA given, then requires Base Hospital contact.

P-005 Pediatric BRUE Treatment Guideline

- Adding back in this treatment guideline that at one time had its own standing order but was deleted. Only reference to how to treat a BRUE patient was within the Base Hospital Treatment Guideline section.
- Using the new Treatment Guideline format.
- Adding breastfeeding as an option for treatment of hypoglycemia.

P-015 General Injury and Trauma – Pediatric Treatment Guideline

- Formerly known as SO-P-015 & BH-P-015
- Within the notes/definitions section signs of early and late shock listed.





- BLS Interventions added:
 - Refer to SO-BLS.
 - Apply cervical collar and/or spinal motion restriction as applicable.
 - Added an initial assessment section outlining ATLS' xABCDE sequence.
- ALS interventions added:
 - Assess PAT
 - ALS airway placement if weight criteria met & BLS airway management not adequate.
 - Discussion on need for needle decompression which requires Base Hospital Contact to obtain order.
 - Applying capnography.
 - Obtaining patient weight.
 - Obtaining IV/IO.
 - Treating for hypotension.
 - Treating for pain.
 - Treating for N/V; to include IV Zofran for age > 3 months.
- Specific injury management can be found within the Additional Considerations section.
- Pediatric patients are to be transported securely in a size appropriate restraint system.
- Base Hospital Contact is required if patient meets trauma triage criteria.
- TXA administration is a Base Hospital order only.

P-060

Allergic Reaction – Pediatric Treatment Guideline

- Formerly known as SO-P-060 & BH-P-060
- BLS Interventions added:
 - Refer to SO-BLS.
 - Assist patients with the administration of their physician prescribed emergency devices and medications to include but not limited to bronchodilator inhaler/nebulizer or epinephrine device.
 - Remove the stinger / injection mechanism.
 - Ensure proper positioning for adequate ventilation and suction as needed.
- Allergic reaction definition highlighting skin-based reaction & no airway involvement.
- Anaphylaxis definition highlighting acute onset of a systemic reaction involving two or more systems, any airway involvement, or unstable vital signs.
- ALS Interventions added:





- Assess Pediatric Assessment Triangle (PAT).
- ALS airway placement if weight criteria met & BLS airway management not adequate.
- Use of EtCO₂.
- Adding Diphenhydramine intervention to allergic reaction treatment.
- Adding a table showing normal vital signs by age within the additional considerations section.

P-065

Altered Mental Status – Pediatric Treatment Guideline

- Formerly known as SO-P-065 & BH-P-065
- Updated language for capnography, EtCO₂, and VS parameters to treat with fluids to match what is in print on the Pediatric Stroke Treatment Guideline.
- Added line about hypoglycemia (see document).
- Added line to determine if meets stroke criteria (see document).
- Potential causes & considerations added (see document).

P-075

Seizure / Convulsion – Pediatric Treatment Guideline

- Formerly known as SO-P-075 & BH-P-075.
- BLS Interventions added:
 - Refer to SO-BLS.
 - Turn to side, protect airway, and suction when possible.
- Added line to determine if meets stroke criteria (see document).
- Added line for “a first time, non-febrile seizure in any age and for any duration is considered a neurological emergency and should be transported to a CCERC”.
- Added definition for simple febrile seizures (see document).

P-100

Drowning – Pediatric Treatment Guideline

- Formerly known as SO-P-100 & BH-P-100.
- BLS Interventions added:
 - Refer to SO-BLS.
 - Ensure patent airway and proper positioning for adequate ventilation.
 - Spinal motion restriction if diving or shore-break accident suspected.
 - Prevent and treat hypothermia by removing wet clothing and initiating rewarming when appropriate.
- No change made to ALS interventions from previous standing orders.
- Added a list of items to obtain from submersion history if available





under the Additional Considerations section.

- Additional note for dose of Albuterol added for age < 30 days old.
- Listed within the Base Hospital section are reasons to send a drowning victim to a Trauma Center which include:
 - Shore break, diving, or watercraft-related incident.
 - External evidence of trauma.
 - Meets mechanism or trauma injury criteria per OCEMS Policy #310.30 (Trauma Triage).

P-115

Acute Stroke or Intracranial Hemorrhage - Pediatric Treatment Guideline

- New treatment guideline for the recognition, treatment, and transport of a pediatric patient with stroke symptoms.
- Catching first-time seizure pediatric patients.
- Wording within this guideline will exclude simple febrile seizures.

T-005

General Injury and Trauma – Adult/Adolescent Treatment Guideline

- Formerly known as SO-T-005 & BH-T-05
- Within the notes/definitions section signs of early and late shock listed.
- BLS Interventions added:
 - Refer to SO-BLS.
 - Apply cervical collar and/or spinal motion restriction as applicable.
 - Added an initial assessment section outlining ATLS' xABCDE sequence.
- ALS interventions added:
 - TXA administration.
 - Additional forms of pain medications.
- Specific injury management can be found within the Additional Considerations section.
- Base Hospital Contact is required if patient meets trauma triage criteria.
- A needle decompression continues to remain a base hospital order.

BLS PROCEDURES:

B-003

Pediatric Vital Signs

- Brand new procedure outlining Orange County EMS' recognized age-based normal ranges for pulse, systolic blood pressure, and respiratory rate.





ALS PROCEDURES:

- PR-006 Pediatric Vital Signs
- Brand new procedure outlining Orange County EMS' recognized age-based normal ranges for pulse, systolic blood pressure, and respiratory rate.
- PR-080 Tranexamic Acid (TXA) – Adult/Adolescent
- Brand new procedure outlining the administration of TXA to an adult/adolescent patient with evidence of hemorrhage shock related to blunt or penetrating trauma mechanism or related to miscarriage or post-partum uterine bleeding.
- PR-081 Tranexamic Acid (TXA) – Pediatric
- Brand new procedure outlining the administration of TXA to a pediatric patient with evidence of hemorrhage shock related to blunt or penetrating trauma mechanism.
 - This is a Base Hospital order only.

October 1, 2026 EMS UPDATES TO EXISTING DOCUMENTS

POLICES:

- 090.00 Definitions
- Added these definitions: Against Medical Advice, Agency Identifiable Information, ALS Escort, Bradycardia, Continuous Quality Improvement, Diversion, Electronic Patient Care Report, Extremis, High Flow Oxygen, Hypotension, Incident Identifiable Information, Leave-Behind Naloxone, Medication Assisted Treatment, Naloxone, Opioid Use Disorder, Perfusion, Perfusion-Adequate, pVT, Skin signs, Symptomatic Bradycardia, Toxic Delirium, VFIB
- 309.00 Transport of Public Safety Working Dogs
- Added additional language to include other public safety working dogs instead of just policy K-9's.





- 310.00 911 Advanced Life Support Base Contact, Standing Order, Treatment Guideline, Hospital Contact, and Transport Criteria
- Added cell phone use for paramedics as an alternate method of communication to an ERC for an ALS no contact type of patient.
 - Cleaned up language regarding SNRC & CVRC diversion.
 - Added/updated reference to specific SO-Treatment Guidelines with both the adult and pediatric section.
 - Added within both the adult and pediatric section for Base Hospital contact required *Patients who self-administered epinephrine*.
 - Added the Pediatric Normal VS graph within the pediatric section and reinforcing the need to make Base Hospital for contact *for unstable vital signs defined as any values outside of the following parameters*.
 - Anu use of the word "child" or "children" was changed to "pediatric patient".
 - Added *Pediatric patients who met Stroke Criteria (P-115)* for Base Hospital contact required.
- 310.30 Trauma Triage
- Added additional language for unrestrained pediatric patient.
- 310.31 Trauma Triage Algorithm
- Added additional language for unrestrained pediatric patient.
- 315.00 OCEMS EMT Scope of Practice: EMT-OCEMS Accredited
- Content within policy updated to be in line with changes made to SO-BLS.
 - Referenced Title 22 regulations updated.
- 325.00 Advanced Life Support (ALS) Provider Unit Minimum Inventory
- Under Section V for Equipment: Added Note #2: Automatic Chest Compression Device: This equipment can be optional for surge or backup response units but remains required for all front-line ALS primary units.
 - Under Section VII for Mandatory Pharmaceutical Inventory added: Calcium Gluconate, Magnesium for Cardiac Arrest, Magnesium for eclampsia, Tranexamic Acid for Adult/Adolescent.
 - Under Section VII for Optional Pharmaceutical Inventory added Tranexamic Acid for Pediatric.





BLS STANDING ORDERS:

- SO-BLS General Basic Life Support Standing Orders
- Formerly known as SO-B001.
 - Changed #'s to bullet points.
 - Same information as before but rearranged into separate headings.
 - Reconfigured language for performing a primary and secondary assessment.
 - Reconfigured language for vital signs.
 - Added "transport pediatric patients utilizing an age- and size-appropriate restraint system (e.g., Neo-mate, Pedi-mate, car seat, etc)".

ALS STANDING ORDERS:

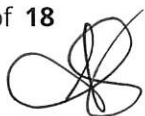
- SO-ALS General Advanced Life Support Standing Orders
- Changed #'s to bullet points.
 - Substantive changes made to content of document.
 - Rearranged into separate headings similar to the changes made to SO-BLS.

- SO-AMA Standing Order for AMA
- Added Pediatric VS graph.
 - Added bullet point for patients who self-administered epinephrine.
 - Any reference to 'child' or 'children' was changed to 'pediatric patient'.
 - SO reference #'s updated to new treatment guideline reference #.

- I-10 Abbreviations
- Added these abbreviations: ACLS, AMA, BHR, BHTG, BPM, DNR, ED, EKG, EMS, EMT, EMT-P, EOC, LEMSA, PDE, pVT, ROSC, SPO2, START
 - Changed ET to ETT.
 - Removed these items and placed on the Policy 090.00 (Definitions): agitated delirium, ALS Escort, bradycardia, bradycardia symptomatic, diversion, extremis, high-flow oxygen, hypotension, pediatric, perfusion adequate, skin signs.
 - Removed 'excited delirium' since no longer correct terminology.

- I-15 Standing Drug Guide for Adult / Adolescent
- Added clarifications to current forms to match Policy 325.
 - Added TXA.





- Added Magnesium.
- Added Calcium Gluconate.
- Added a contraindications column.
- Updated indications and contraindications for Push Dose Epinephrine.
- Updated indications for Normal Saline.

I-20

Pediatric Medication Guide by Weight

- Indications column added.
- BHO's highlighted in red.
- Epinephrine for Cardiac Arrest also labeled for Bradycardia.
- TXA added.
- IV Zofran added.
- Hydroxocobalamin removed.
- VS parameters updated to match with new ALS (PR-006) and BLS (B-003) procedure.
- Name of color added to side bar.
- Reordered medications into alphabetical order.
- Age for neonate 0-30 days changed from "newborn".
- Removed 1:1 dilution from bicarb for grey, pink, & red colors.

SO-C-010	Converted to the New Treatment Guideline Format now called C-010.
SO-E-005	Converted to the New Treatment Guideline Format now called E-005.
SO-E-010	Converted to the New Treatment Guideline Format now called E-010.
SO-E-015	Converted to the New Treatment Guideline Format now called E-015.
SO-E-025	Converted to the New Treatment Guideline Format now called E-025.
SO-E-030	Converted to the New Treatment Guideline Format now called E-030.
SO-M-005	Converted to the New Treatment Guideline Format now called M-005.
SO-M-010	Converted to the New Treatment Guideline Format now called M-010.
SO-M-015	Converted to the New Treatment Guideline Format now called M-015.





SO-O-010	Converted to the New Treatment Guideline Format now called O-010.
SO-O-015	Converted to the New Treatment Guideline Format now called O-015.
SO-P-015	Converted to the New Treatment Guideline Format now called P-015.
SO-P-060	Converted to the New Treatment Guideline Format now called P-060.
SO-P-065	Converted to the New Treatment Guideline Format now called P-065.
SO-P-075	Converted to the New Treatment Guideline Format now called P-075.
SO-P-100	Converted to the New Treatment Guideline Format now called P-100.
SO-T-005	Converted to the New Treatment Guideline Format now called T-005.

BASE HOSPITAL TREATMENT GUIDELINES:

BH-AMA	<u>Base Hospital Guideline for AMA</u> <ul style="list-style-type: none">• Document updated to include changes made to SO-AMA.
BH-C-010	Converted to the New Treatment Guideline Format now called C-010.
BH-E-05	Converted to the New Treatment Guideline Format now called E-005.
BH-E-10	Converted to the New Treatment Guideline Format now called E-010.
BH-E-15	Converted to the New Treatment Guideline Format now called E-015.
BH-E-25	Converted to the New Treatment Guideline Format now called E-025.
BH-E-30	Converted to the New Treatment Guideline Format now called E-030.





BH-M-05	Converted to the New Treatment Guideline Format now called M-005.
BH-M-10	Converted to the New Treatment Guideline Format now called M-010.
BH-M-15	Converted to the New Treatment Guideline Format now called M-015.
BH-O-10	Converted to the New Treatment Guideline Format now called O-010.
BH-O-05	Converted to the New Treatment Guideline Format now called O-015.
BH-P-005	Converted to the New Treatment Guideline Format now called P-005.
BH-P-015	Converted to the New Treatment Guideline Format now called P-015.
BH-P-060	Converted to the New Treatment Guideline Format now called P-060.
BH-P-065	Converted to the New Treatment Guideline Format now called P-065.
BH-P-075	Converted to the New Treatment Guideline Format now called P-075.
BH-P-100	Converted to the New Treatment Guideline Format now called P-100.
BH-T-005	Converted to the New Treatment Guideline Format now called T-005.

BLS PROCEDURES:

B-009	<u>Public Safety Working Dog</u> <ul style="list-style-type: none">• Added additional language to include other public safety working dogs instead of just policy k-9's.
-------	--





ALS PROCEDURES:

PR-060

Needle Thoracostomy: Adult/Adolescent

- Redefined the indications for inserting a NT highlighting the presence of hypoxia.
- IMPORTANT: Hypoxia is a critical component and should be present in conjunction with signs of respiratory compromise and/or hemodynamic instability to justify a needle thoracostomy.
- Signs include:
 - Chest injury (blunt or penetrating) with hypoxia
 - Acute respiratory distress with hypoxia
 - Unilateral absence of breath sounds on the affected side
 - Distended neck veins (JVD)
 - Circulatory collapse manifested by hypotension or signs of poor perfusion
 - Respiratory arrest
- Added an additional site. Choices now are: 2nd intercostal space midclavicular line or 5th intercostal space anterior axillary line.
- Cleaned up the wording within the procedure section and renaming to 'procedural guidelines.
- Added site photographs.

PR-065

Needle Thoracostomy: Pediatric

- Redefined the indications for inserting a NT highlighting the presence of hypoxia.
- IMPORTANT: Hypoxia is a critical component and should be present in conjunction with signs of respiratory compromise and/or hemodynamic instability to justify a needle thoracostomy.
- Signs include:
 - Chest injury (blunt or penetrating) with hypoxia
 - Acute respiratory distress with hypoxia
 - Unilateral absence of breath sounds on the affected side
 - Distended neck veins (JVD)
 - Circulatory collapse manifested by hypotension or signs of poor perfusion
 - Respiratory arrest
- Added graph showing normal vital signs by age.
- Added an additional site. Choices now are: 2nd intercostal space midclavicular line or 5th intercostal space anterior axillary line.
- Cleaned up the wording within the procedure section and renaming to 'procedural guidelines and adding site photographs.





PR-115

IO Procedure

- Under indications: Added age breakdown for unstable hypotension.
- Under Contraindications:
 - Added vascular disruption of the extremity selected for IO infusion.
 - Added obvious skin or other infection or burn at the site selected for IO infusion.
 - Added joint replacement or orthopedic hardware adjacent to the site of IO insertion.
- Added section titled Insertion Sites:
 - Added two addition sites
 - Proximal Humerus for age 18 years old and over
 - Distal Femur for age up to 6 years old and a weight of 3-39kg
- Renamed the procedure section "procedural highlights" & removed step by step process.
 - Reinforced the site selection locations and angle to insert needle.
 - Reinforced pain management with use of Lidocaine prior to instilling fluids or other medications.
 - Reinforced the use of a pressure bag.
- Added site photographs.

PR-130

Hydroxocobalamin

- Removed pediatrics from this procedure. Hydroxocobalamin is now only for Adult/Adolescent.

PR-205

Preparation and Dosing of Push Dose Epinephrine - Pediatric

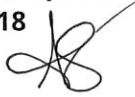
- Reworded indications, added the word considerations (see document).
- Cleaned up the contraindications list, now just says hemorrhagic shock.
- Did some adjustment with the wording in regards to preparing for administration. Took away the wording of "mixing instructions". Changed the wording for administration from "push dose" to "administration".

PR-230

Preparation and Dosing of Push Dose Epinephrine - Adult/Adolescent

- Reworded indications, added the word considerations (see document).
- Cleaned up the contraindications list, now just says hemorrhagic shock.
- Did some adjustment with the wording in regards to preparing for administration. Took away the wording of "mixing instructions". Changed the wording for administration from "push dose" to "administration".
- Removed the statement of base hospital contact and order no longer required.





Thank you for your continued partnership and commitment to advancing the Orange County EMS system. Your collaboration is essential to ensuring coordinated, high-quality emergency medical care for the communities we serve.

Sincerely,



Almaas A. Shaikh, MD, MPH, FACS

OCEMS Medical Director

OC HCA Deputy Health Officer

AS:RC #6032

