

Training Bulletin

Summary of Major Revisions **BLS Patient Care Standards** **version 2.0**

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Emergency Health Services Branch
Ministry of Health and Long-Term Care

Summary of Major Revisions

Basic Life Support Patient Care Standards-version 2.0

Introduction

The Ministry of Health and Long-Term Care, Emergency Health Services Branch has completed a review and revision of the *Basic Life Support Patient Care Standards*. These revised standards will come into effect on January 1, 2007.

The review and development of this updated version of the *Basic Life Support Patient Care Standards* is the result of the assistance of groups and individuals, such as Paramedics, EMS Directors, Base Hospital staff, Base Hospital Medical Directors, College Coordinators, Field Offices, Ornge, Legal Services Branch and Regional Training Coordinators.

This summary of the major revisions to this version of the *Basic Life Support Patient Care Standards* has been developed to assist in quickly identifying areas where significant changes have been made to content, and to provide rationale for the changes, where applicable.

General Changes Applied Throughout the Document

Independent, Colour-coded Sections

The *Basic Life Support Patient Care Standards version 2.0* has been divided into distinct sections based on the content of each section. Colour-coded tabs and cover pages separate each section and correspond to colour-coding within the Table of Contents. This will make it easier for users of the document to locate specific sections in the document.

In addition to the colour-coded tabs and cover pages, each section has a unique page numbering system independent of other sections. This will allow for timely revisions to the content of a specific section of the standards. When the need for change is identified, only the section(s) where changes are made will need to be reprinted allowing for an easier substitution of the section(s) rather than requiring a complete reprinting of the entire standards document.

Removal of the Appendices Section

Previous versions of the *Basic Life Support Patient Care Standards* had a separate section for appendices which contained various policies, patient care guidelines, general information and teaching points in support of the actual standards. Version 2.0 no longer has a separate section of appendices. Policies that were contained in the appendices of the previous versions of the standards have been updated and made into specific standards contained within *Section 1 – General Standard of Care*. Other content, such as patient care guidelines, have been reviewed and incorporated, where applicable, into specific standards.

This change to the standards will make it easier for all users to access relevant information and reduce the need to reference information in numerous locations.

Consolidation of Some Standards

Some standards that were part of previous versions of the *Basic Life Support Patient Care Standards* have been deleted from this version. Pertinent information that was contained in these standards has been incorporated into other standards within the new version.

This change to the standards will ensure that all related information is contained within standards relating to specific chief complaints/presenting problems. This enhances the document by making it easier for users to access all relevant information in one location and reduces the need to reference information relating to specific topics in numerous locations. Specific details regarding which standards have been deleted and incorporated elsewhere are listed later in this bulletin.

Hyperventilation in the Management of Patients

Recent research has demonstrated that prophylactic hyperventilation of patients, particularly those suffering from acute Traumatic Brain Injury (TBI), may have a negative impact on patient outcomes. As such, the medical community has adopted an approach whereby hyperventilation is only provided in the management of patients in very specific circumstances. Changes have been made to a number of areas within the *Basic Life Support Patient Care Standards* regarding the provision of hyperventilation to patients in the prehospital environment that is in keeping with this approach. Hyperventilation will now only be provided on a limited basis to patients suffering from TBI who are exhibiting signs and symptoms of herniation syndrome (rapidly deteriorating Glasgow Coma Score (GCS) or GCS <9 with asymmetric pupillary reaction/asymmetric motor response) *after* measures have been taken to mitigate hypoxemia and hypotension.

Management of Shock

Previous versions of the *Basic Life Support Patient Care Standards* directed paramedics to position patients with suspected hypovolemic shock in the Trendelenberg position or to elevate the legs as part of their management unless this positioning compromised breathing efficiency. Current expert medical opinion is that this position has no effect in improving a patient's condition and eventual outcome, and may in fact contribute to a worsening of their condition in some situations.

References directing paramedics to place a patient in Trendelenberg position or elevating their legs in cases of suspected hypovolemic shock have been removed from a number of specific areas and standards within the *Basic Life Support Patient Care Standards version 2.0*.

CPR/Resuscitation of Patients

Previous versions of the *Basic Life Support Patient Care Standards* provided specific direction to paramedics in terms of parameters for the resuscitation of patients suffering cardiac arrest, respiratory arrest, etc. The language within version 2.0 of the standards has been changed in all applicable areas such that paramedics are now directed to follow the **current** published *Heart and Stroke Foundation of Ontario (HSFO) Guidelines* with respect to the resuscitation of patients.

This change has been made to allow the standards to be more responsive to changes in resuscitation guidelines made by the HSFO and reduce the need to update the document whenever CPR/resuscitation guidelines are changed. The change will also ensure consistency with the applicable medical directives contained within the *ALS Patient Care Standards*.

Section 1

General Standard of Care

Section 1, General Standard of Care, provides paramedics with direction on all aspects of an ambulance call which is general in nature and not specific to any one condition.

The *General Standard of Care* will now include a number of “new” standards which had been included in the Appendices Section of previous versions of the *Basic Life Support Patient Care Standards* as guidelines and/or policies. This change has been made in keeping with the overall objective of transferring items that were previously deemed policies or guidelines into the main body of the standards.

The following is a list of new standards included in *Section 1*:

- Air Ambulance Utilization Standard
- DNR Standard
- Intravenous Line Maintenance Standard
- Load and Go Patients Standard
- Oxygen Therapy Standard
- Patients with Vital Signs Absent (Transportation) Standard
- Physician’s Orders Standard
- Police Notification Standard
- Self-Administered Medications Standard for EMAs/Paramedics

Another new standard titled the *Paramedic Conduct Standard* has been also been added into the *General Standard of Care Section*. This standard had previously been included in the *Advanced Life Support Patient Care Standards* however, as this standard applies to paramedics at all levels, it was incorporated into the *Basic Life Support Patient Care Standards*.

Section 2

Medical Patient Categories

Specific standards of care for patients suffering from illness of a medical nature have been developed not on the basis of diagnosis, but on the basis of:

- chief complaint as stated by the patient/bystanders;
- presenting problem as indicated by the patient/bystander;
- immediately obvious primary survey critical findings, e.g. respiratory arrest.

Each patient category in this section includes:

- key standard statements in short form, drawn from the *General Standards of Care*;
- standards which are specific to the condition under discussion;
- guidelines where considered appropriate.

The *Basic Life Support Patient Care Standards version 2.0* include a *Medical Patient Assessment Overview* (page 2-4) designed to provide paramedics with an easy to follow synopsis of the minimum assessment elements included in the *Medical Format, Short Form of General Standard of Care*.

Section 3 Trauma Patient Categories

Specific standards of care for patients suffering from injuries as a result of trauma have been developed not on the basis of diagnosis, but on the basis of:

- chief complaint as stated by the patient/bystanders;
- presenting problem as indicated by the patient/bystander;
- immediately obvious primary survey critical findings, e.g. chest injury.

Each patient category in this section includes:

- key standard statements in short form, drawn from the *General Standards of Care*;
- standards which are specific to the condition under discussion;
- guidelines where considered appropriate.

The *Basic Life Support Patient Care Standards version 2.0* include a *Trauma Patient Assessment Overview* (page 3-3) designed to provide paramedics with an easy to follow synopsis of the minimum assessment elements included in the *Trauma Format, Short Form of General Standard of Care*.

Significant changes have been made to the *Trauma Format-Short Form of the General Standard of Care* as well as the *Head Injury-Blunt, Penetrating Standard* with regard to the management of traumatic brain injury (head injury). The changes to these management standards were made to reflect current medical expert opinion on the use of hyperventilation in these cases. Hyperventilation as a course of management for “head injured” patients will be reserved for those patients exhibiting the signs and symptoms of herniation syndrome.

Changes have been made with regard to the management of patients suffering from hypovolemic shock, specifically, the positioning of these patients. Current medical opinion is that positioning a patient suffering from shock in the Trendelenburg position or with legs/feet elevated has no positive impact on outcome and may cause respiratory complications in some patients. Changes have been made within the *Trauma Format-Short Form of the General Standard of Care* and specific standards in *Section 3* to reflect this new standard of care.

The *Sexual Assault (Alleged) Standard* has been moved to this section from the *Obstetrical Section* in previous versions. This was done as this type of situation was more likely to result in traumatic injuries and that it often has no relationship to an obstetrical condition.

The *Eye Burns-Thermal, Radiation (Arc Welder’s Flash, Snow Blindness) Standard* found in previous versions of the standards under Trauma Patient Categories has been removed from version 2.0. Pertinent information previously contained within this standard has been incorporated in the *Burns-Thermal Standard* located in *Section 4 (Environmental-Related Emergencies)*. This change was made as part of the overall objective of consolidating related information into more appropriate standards.

Section 4

Environmental-Related Disorders

The *Lightning Injuries Standard* found in previous versions of the standards has been removed from version 2.0. Pertinent information previously contained within this standard has been incorporated in the *Electrocution/Electrical Injury Standard*. This change was made as part of the overall objective of consolidating related information into more appropriate standards.

Changes relating to the management of pit viper bites has been made to the *Snake Bites Standard* including the removal of references the application of cold packs on the wound. These changes were made to make the standard consistent with current expert opinion with respect to the management of this condition.

The *Stings/Bites-Insect Standard* has been removed from the *Basic Life Support Patient Care Standards-version 2.0*. The relevant information previously contained within this standard has been incorporated within the *Allergic Reaction-Known or Suspect Standard* found in *Section 2-Medical Patient Categories*. This change consolidates all pertinent and relevant information into one standard.

Section 5

Obstetrical Conditions

The following new standards have been included this section:

- Trauma in the Pregnant Patient
- Traumatic Maternal Cardiac Arrest

This information was previously contained within the Appendices Section of previous versions of the standards. While both of these conditions are trauma related, incorporating them into this section will make it easier for paramedics to quickly reference the information.

Midwives on the Scene Standard has been changed from a policy to a standard and moved from the Appendices Section in previous versions of the standards to *Section 5-Obstetrical Conditions* in version 2.0. As well, a clearer definition of a midwife has been included in this version of the standards to assist paramedics in determining who is authorized to assist a woman with an out of hospital birth.

Changes to CPR modalities have been made within the *Neonatal Assessment and Management Standard*. These changes will make this standard consistent with current expert medical opinion regarding neonatal resuscitation.

Section 6

Pediatrics

Additional information regarding observations and assessment has been added to the *Child Abuse (Suspect) Standard*. This information was previously contained in the *Appendices Section* of previous versions of the standards but was moved to enhance the ability of paramedics to source specific information on related subjects in one location.

Section 7 Geriatrics

A new standard, the *Elder Abuse (Suspect) Standard*, has been added to the *Basic Life Support Patient Care Standards version 2.0*. This standard will provide paramedics with valuable information on the assessment and recognition of suspected elder abuse. The standard also provides specific direction to paramedics on what to do in the event of a suspected elder abuse case.

Section 8 Psychiatric Disorders

The following new standards have been added to this section of the *Basic Life Support Patient Care Standards version 2.0*:

- Emotionally Disturbed Patients – Care and Transportation Standard
- Restraint of Patients Standard

The addition of these standards was part of the overall objective of moving current policies and other relevant information from the *Appendices Section* of previous versions and into the main body of the standards in version 2.0.

Paramedics have been provided with additional information and steps necessary when transporting a patient who has been restrained in order to ensure the safety of the patient.

Section 9 Bibliography

Many of the references included in the *Bibliography Section* of previous versions of the *Basic Life Support Patient Care Standards* were used in the development of the original document in 1995. As a number of these references have become dated and the currency of the standards' content is now based on expert medical opinion, this section was removed from the *Basic Life Support Patient Care Standards, version 2.0*.

