

- Oral and parenteral adrenocorticosteroids.
- Oral and parenteral antimicrobials.
- Heparin (intravenous flush or administered **via an adjustable or non-adjustable infusion pump**).
- Intravenous nitroglycerin administered **via an adjustable or non-adjustable infusion pump**.
- Hyperalimentation fluids administered **via an adjustable or non-adjustable infusion pump**.
- An EMS Provider Organization ventilator in an otherwise stable patient.

EMS Personnel utilizing an EMS Provider Organization ventilator must have completed a ventilator education program, and annual skills validation specific to the ventilator model used.

*The EMS Provider Organization ventilator is intended for the transport of stable patients with stable ventilator settings. Ventilator setting titration, and other adjustments, are **not** permitted without Online Medical Consultation. **Patients ventilated with an EMS Provider Organization ventilator must have continuous cardiac rhythm, oximetric, and capnographic monitoring.***

For transfers **exceeding 30 miles**, as measured on the ambulance odometer, a Lead Paramedic must staff the patient compartment. Otherwise, vehicle staffing may be accomplished as described earlier in this guideline.

If necessary, other medications, devices, monitoring, interventions, and Paramedic ambulance staffing, may be approved, in advance and on a case-by-case basis, by a Medical Director or, if none is available, an OMCP. If one of the Sponsoring Hospitals is involved in the transfer or receipt of the patient, attempts should be made to contact that hospital's Medical Director first.

Patients who, during transfer, will receive medications or be treated with devices not listed above, and patients with complex illnesses who require monitoring and/or interventions beyond the scope of Paramedic practice, must be accompanied by supplemental medical personnel familiar with such medications, devices, illnesses, monitoring, and interventions. **It is not the responsibility of the Sponsored EMS Provider Organization to arrange for such supplemental personnel.**

Safe Operation

All EMS vehicles should be operated in a manner consistent with Indiana law. All EMS Personnel operating an EMS vehicle should be familiar with applicable Indiana law, summarized at: <http://www.in.gov/dhs/fire/branches/ems/admin/ed.html>.

*The use of warning lights and sirens is **inherently dangerous** but sometimes necessary. Their use en route to an EMS scene should be determined by an Emergency Medical Dispatch Program (see Emergency Medical Dispatch). **Their use en route to the Destination Hospital should be limited to those situations in which the anticipated timesaving is reasonably likely to be of sufficient benefit to outweigh the risks.***

The SJCEMSC recommends the Emergency Vehicle Operations Course (EVOC) to **all** EMS Personnel involved in EMS vehicle operations.

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