



Medical Directive

Directive Number	<u>11-01</u>
Publish Date	<u>06 January 2011</u>
Effective Date	<u>06 January 2011</u>
Subject	<u>Medication Maximum Adult Dose Change: Acetaminophen</u>
Update to Clinical Operating Guidelines v 01.06.11	

Credentialed System Responder	Information
Credentialed EMT-Basic	Information
Credentialed EMT-Intermediate	Action
Credentialed EMT-Paramedic	Action
Credentialed EMD Provider	Information

During the course of securing the necessary supplies and equipment for the implementation of the new version of the COGs; a large supply of Acetaminophen was acquired. The tablets and packaging delivered was 325 mg tablets. In light of this and in order to more safely and uniformly administer this medication to our patients; we are changing the maximum adult dose of this medication to 650 mg. The effected protocols are Fever/Infection Control M-09 and Pain Management M-16. Please update all printed and electronic versions of the COGs you may have. We will upload these updates onto the OMD web page as soon as possible.

Thanks for all you do. As always, please let us know if you have any questions...

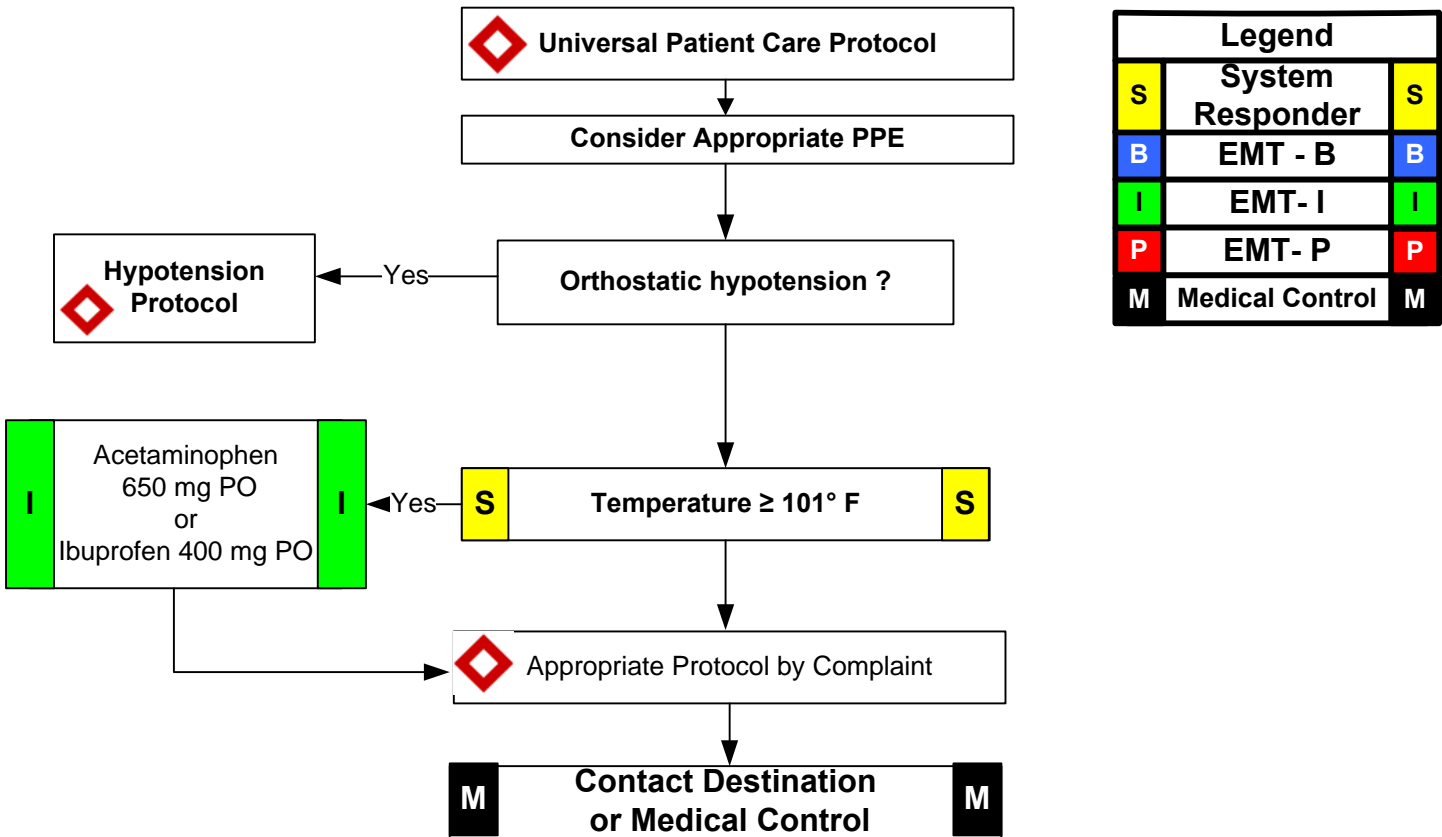
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Fever/Infection Control

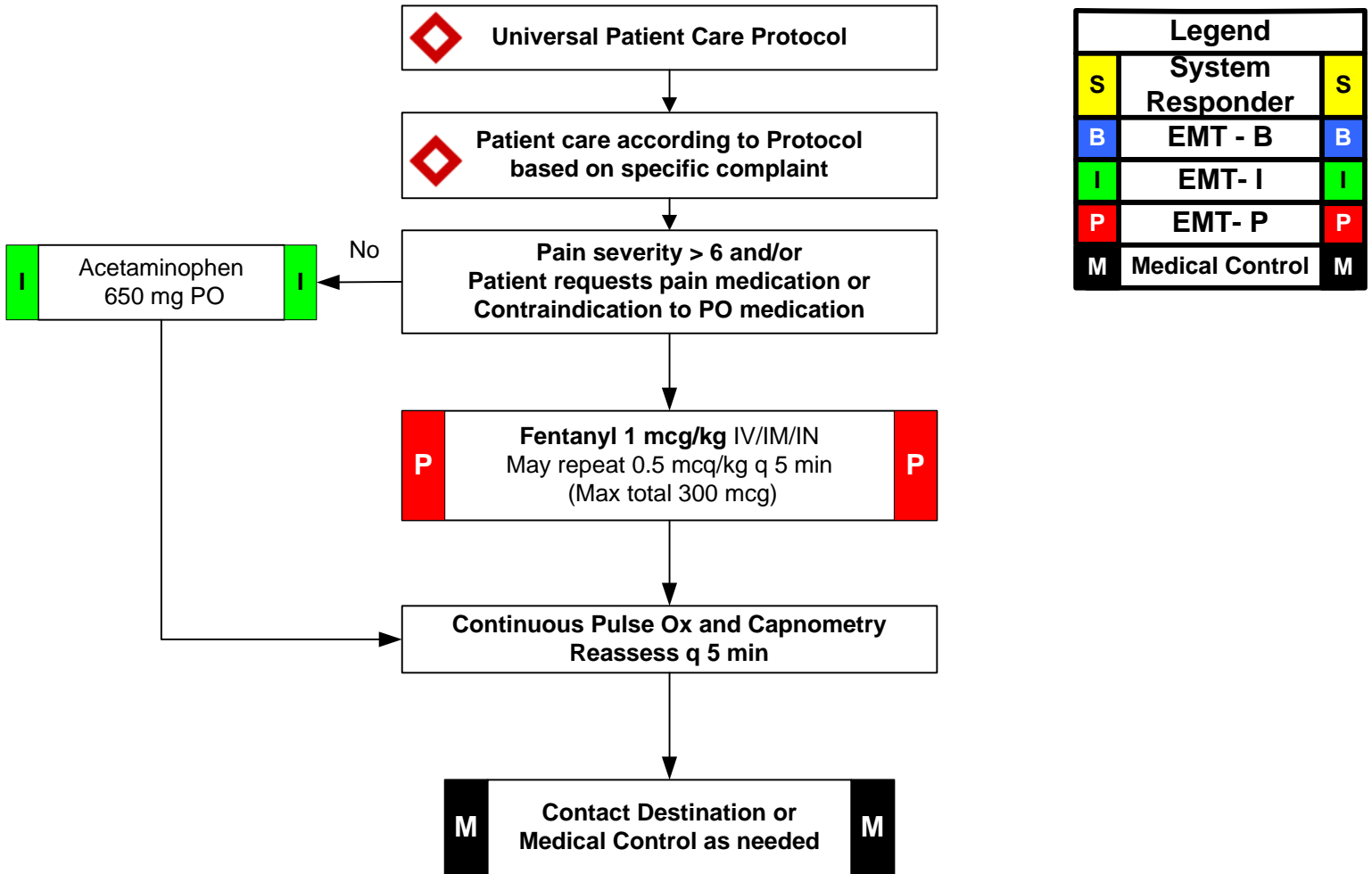
<p>History</p> <ul style="list-style-type: none"> • Age • Duration of fever • Severity of fever • Past medical history • Medications • Immunocompromised (transplant, HIV, diabetes, cancer) • Environmental exposure • Last acetaminophen or ibuprofen 	<p>Signs & Symptoms</p> <ul style="list-style-type: none"> • Warm • Flushed • Sweaty • Chills/Rigors <p>Associated Symptoms (Helpful to localize source)</p> <ul style="list-style-type: none"> • myalgias, cough, chest pain, headache, dysuria, abdominal pain, mental status changes or rash 	<p>Differential:</p> <ul style="list-style-type: none"> • Infections / Sepsis • Cancer / Tumors / Lymphomas • Medication or drug reaction • Connective tissue disease <ul style="list-style-type: none"> • Arthritis • Vasculitis • Hyperthyroid • Heat Stroke • Meningitis
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- Pearls:**
- Patients with a history of liver failure should not receive acetaminophen.
 - Droplet precautions include standard PPE plus a standard surgical mask for providers who accompany patients in the back of the ambulance and a surgical mask or NRB O2 mask for the patient. This level of precaution should be utilized with influenza, meningitis, mumps, streptococcal pharyngitis, and other illnesses spread via large particle droplets are suspected. A patient with a potentially infectious rash should be treated with droplet precautions.
 - Contact precautions include standard PPE plus utilization of a gown, change of gloves after every patient contact, and strict hand washing precautions. This level of precaution is utilized when multi-drug resistant organisms (e.g. MRSA, scabies, or zoster (shingles)), or with other illnesses spread by contact are suspected.
 - All-hazards precautions(Airborne Precautions) include standard PPE, contact precautions plus N-95 mask for providers. This level of precautions is utilized during the initial phases of an outbreak when the etiology of the infection is unknown or when the causative agent is found to be highly contagious (e.g. SARS,TB).
 - Rehydration with fluids increased the patient's ability to sweat and improves heat loss.
 - Allergies to NSAID's (non-steroidal anti-inflammatory medications) are a contraindication to Ibuprofen.
 - NSAID's should not be used in the setting of environmental heat emergencies.

Pain Management

History: <ul style="list-style-type: none"> • Age • Location • Duration • Severity (1-10) • Past Medical History • Medications • Drug allergies • Medications taken prior to arrival 	Signs and Symptoms: <ul style="list-style-type: none"> • Severity (pain scale) • Quality • Radiation • Relation to movement, respiration • Increased with palpation of area. 	Differential: <ul style="list-style-type: none"> • Per the specific protocol • Musculoskeletal • Visceral (abdominal) • Cardiac • Pleural / Respiratory • Neurogenic • Renal (colic)
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Legend		
S	System Responder	S
B	EMT - B	B
I	EMT- I	I
P	EMT- P	P
M	Medical Control	M

Pearls:

- Pain severity (0-10) is a vital sign to be recorded pre and post IV or IM medication delivery and at disposition.
- In patients >60 yrs or with liver disease, reduce Fentanyl dosing by 50%.
- Vital signs should be obtained pre, 5 minutes post, and at disposition with all pain medications.
- Monitor patient closely for over sedation - refer to overdose protocol if needed
- Patients receiving pain management must have ET/CO2 continuously monitored.
- Head injury patients should not receive pain medication
- Do not administer Acetaminophen to patients with history of liver disease.