



Emergency Medical Services Agency

Bulletin 2024-03 - June 7th, 2024

URGENT

PLEASE POST

Airway Management and Cardiac Arrest Revisions

The San Luis Obispo County Emergency Medical Services Agency (SLOEMSA) has revised Airway Management, including SGA/ETI and Cardiac arrest protocols and procedures, to reduce confusion and maximize efficiency within the system. Protocol #602: Airway Management, Procedure #717: Endotracheal Intubation, Procedure #718: Supraglottic Airway Device, Protocol #641: Cardiac Arrest (Atraumatic), and Protocol #661 Traumatic Cardiac Arrest have all successfully passed the committee process and have been recommended for approval by the Emergency Medical Care Committee (EMCC).

Effective Immediately, some of the changes are as follows:

Protocol #602: Airway Management

- Adding provider discretion for which ALS airway to use, ETI or SGA.
- Removed all language about visualizing a patient's airway/vocal cords before determining which ALS airway to utilize.

Procedure #717: Endotracheal Intubation

- Revised ETI indications to include cardiac arrest regardless of ROSC.
- Removed situations where BLS techniques cannot maintain the airway from the indications list.
- Removed language about BLS airway use; this is covered in BLS protocols.
- Added after 2nd ETI attempt, the provider shall proceed to SGA.
- Added the definition of compromised airway referencing ETI indications.
- Added ETI is indicated during a cardiac arrest if the provider feels they can do so without interruption in HPCPR; otherwise, proceed directly to SGA.
- Added PCR documentation component if the provider cannot establish ALS airway.

Procedure #718: Supraglottic Airway Device

- Removed all language about visualizing a patient's airway/vocal cords before SGA utilization.
- Added SGA is indicated in cardiac arrest.
- Added PCR documentation component if the provider cannot establish ALS airway.
- Removed all language about first visualizing a patient's airway/vocal cords and then determining which ALS airway to utilize.

Protocol #641: Cardiac Arrest (Atraumatic)

- Adding provider discretion to ETI or SGA utilization.
- Removing ROSC language to ALS airway utilization.
- Added PCR documentation component if the provider cannot establish ALS airway.

Protocol #661 Traumatic Cardiac Arrest

- When utilizing Oral Intubation or Supraglottic Airways (Adults), provider discretion.
- Added PCR documentation component if the provider cannot establish ALS airway.

For any questions regarding this bulletin, please contact Ryan Rosander at rrosander@co.slo.ca.us. You may also call at 805-788-2513.