

2020 Protocol Update Equipment Transition Plan

**Medications**

|  |  |  |
| --- | --- | --- |
| **BLS** | **ILS** | **ALS** |
| * **Ibuprofen** * **Benadryl** * **Zofran** * **Atrovent** | * **Ibuprofen** * **Amiodarone** * **D10W** * **Benadryl (Tab)** * **Zofran (ODT)** | * **Levophed** * **Benadryl (Tab)** * **Zofran (ODT)** * **Ketamine** * **Rocuronium** |
| **1/1/2020** | **1/1/2020** | **1/1/2020** |

**Fluids**

|  |  |
| --- | --- |
| **ILS** | **ALS** |
| * **Lactated Ringers** | * **Lactated Ringers** |
| **Replacement through expiration** | **Replacement through expiration** |

**Other Equipment Supplies**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **BLS** | | **ILS** | | **ALS** | |
| **Igel** | **As King Airway Expires** | **Adult Igel** | **As King Airway Expires** | **Adult Igel** | **As King Airway Expires** |
|  | | **Pediatric Igel** | **1/1/2020** | **Pediatric Igel** | **1/1/2020** |
| **PEEP Valve** | **1/1/2020** | **PEEP Valve** | **1/1/2020** | **PEEP Valve** | **1/1/2020** |
|  | | **System Approved Needle** | **1/1/2020** | **System Approved Needle** | **50% of units by 6/1/2020**  **100% of units by 1/1/2021** |
|  | |  |  | **Control Cric** | **50% of units by 6/1/2020**  **100% of units by 1/1/2021** |
|  | |  |  | **IV Pump** | **4/1/2020** |
|  | | **EZ-IO Bari Needle** | **1/1/2020** | **EZ-IO Bari Needle** | **1/1/2020** |
| **2 tourniquets** | **1/1/2020** | **2 tourniquets** | **1/1/2020** | **2 Tourniquets** | **1/1/2020** |