



**2011 Regional Protocol Required-Optional Regional Drug/Medications**

- **Yellow Highlight= 2011 Change-Addition**
- R = those medications for a Licensed ALS EMS Agency
- O = Optional Medications not required for ALS EMS Agency licensure. Inclusion of the medications at the direction of the EMS Agency Medical Director

Service \_\_\_\_\_ Vehicle # \_\_\_\_\_ Date Inspected \_\_\_\_\_  
 Medication Code Expired Med. Date

Medication	Code	Vehicle #	Date Inspected	Expired Med. Date
Acetaminophen	O			
Activated Charcoal	O			
Adenosine	R	Or Adenocard		
Albuterol	R	Or Proventil, or Ventolin,		
Amiodarone	O	Cordarone, or Pacerone		
Aspirin	R			
Atropine	R			
Bacteriostatic 0.9% Sodium Chloride	O			
Calcium Chloride	R			
Captopril	O			
Benzocaine (topical)	O			
Dexamethasone	O	Decadron		
Diazepam or Lorazepam or Midazolam	R	Or Valium, or Zetran or Versed or Ayivan or Novo-Lorazepam		
Diltiazem	O	Or Cardizem, or Dilacor, or Tiazac		
Diphenhydramine	R	Or Benadryl		
Dobutamine	O	Or Dobutrex		
Dopamine	R	Or Intropin		
D 10-50	O	And Glucose (oral)		
D 25	R			
Enalapril	O			
Epinephrine (1: 1,000)	R	Or Adrenaline		
Epinephrine ( 1: 10,000)	R	Or Adrenaline		
Furosemide	R	Or Lasix		
Glucagon	O	Or Gluca Gen		
Heparin Lock Flush	O	Or Saline Lock Flush		
Hydrocortisone	O	Solu-Cortef, Sodium Succinate		
Intravenous Electrolyte Solution • Sodium Chloride	R	Or (NaCl), or (0.9%NSS)		
Ipratropium Bromide	O			
Lidocaine	R	Or Xylocaine		
Magnesium Sulfate	R	Or Magnesium		
Methylprednisolone	O	Or A-Metha Pred, or Solu Medrol		
Naloxone	R	Or Narcan		
Nitroglycerin Spray, Paste, or Nitroglycerin Sublingual Tablets	R	Or Nito-Bid, or Nitogard or Nitrostat , or Nitrol, or Nitro Quick, or Nitro -Dur		
Nitroglycerin for infusion	O	MUST HAVE IV PUMP		
Nitrous Oxide	O			
Ondansetron	R	Or Zofran		
Oxytocin	O	Or Pitocin, or Syntocinon		
Pralidoxime CL	O	IN MARK I KIT		

**“the bottom line is patient care”**

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Procainamide	O		Or Procan, or Procanbid, or Promine, or Pronestyl
Sodium Bicarbonate	R		
Sodium Bicarbonate 4.2% (Pediatric Mix) Preferred	O		
Sodium Thiosulfate	O		
Sterile Water (for injection)	R		
Tetracaine (topical or drops)	O		
Terbutaline	O		
Verapamil	O		Calan, or Isoptin, or Verelan

**For Ambulance Licensure (effective immediately) ALS EMS Agencies may carry either / or**

Fentanyl Citrate	O		Or Sublimaze
Morphine Sulfate	R		Or Morphine, or Roxanol, or Duramorph, or Astramorph

### Medications Approved for Inter-facility Transports ONLY

Abcixinab	I		Reopro
Aggrastat (Infusion)	I		Or Tirofiban
Antimicrobials	I		
Bretylium Infusion	I		
Dilaudid	I		
Eptifibatide (Infusion)	I		Integrilin
Heparin	I		
Ipratropium Bromide	I		
Isoproterenol	I		
Levalbuterol	I		
Potassium	I		
Total Parenteral Nutrition	I		

Code (R) Must be carried by all licensed ALS EMS Agencies

Code (O) May be carried by licensed ALS EMS Agencies if approved by EMS Agency Medical Director

Code (I) May be carried by licensed ALS EMS Agencies when doing an inter-facility transport only. Must be picked up at hospital at the time of the inter-facility transport