



ONTARIO BASE HOSPITAL GROUP MEDICAL ADVISORY COMMITTEE

MEMORANDUM

TO: Ontario Paramedics

FROM: Ontario Base Hospital Group – Medical Advisory Committee (OBHG-MAC)

DATE: January 4th, 2021

RE: **Modifications to the Bronchoconstriction Medical Directive within the Considerations for Paramedics Managing Patients during the COVID-19 Pandemic**

This memo is a modification to the Bronchoconstriction Medical Directive, within the May 6th, 2020 version of the Paramedics Considerations in Managing Patients with COVID-19 during the Pandemic document.

The change is specific to the section found on Page 3, Part A (ALS-PCS Medical Directives with COVID-19 Treatment Considerations), specifically **Section 3c: Bronchoconstriction Medical Directive: Administration of IM epinephrine for severe respiratory distress with cough in known asthma patients.**

Effective immediately, IM epinephrine should not be administered in this setting, to patients equal to or greater than 50 yrs of age.

The updated version of the Bronchoconstriction Medical Directive within the Paramedic Considerations during the COVID-19 Pandemic should now read:

3. Bronchoconstriction Medical Directive

Paramedics should consider:

- a. Withholding **nebulized** salbutamol in all cases.
- b. Withholding salbutamol MDI with spacer for mild-moderate respiratory distress unless respiratory distress becomes **severe with no cough**. If using salbutamol **MDI**, administer using “tidal breathing” technique where the patient takes 5 normal breaths through the spacer rather than a single deep breath with a breath hold.
- c. Administering IM epinephrine for **severe** respiratory distress **with cough** in known **asthma** patients, per Bronchoconstriction Medical Directive, and allows for a second dose where needed.
 - **Epinephrine within this directive, should be restricted to patients < 50 yrs of age.**
 - Administer a maximum of 2 doses of epinephrine with a 5-minute interval between doses.



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Sincerely,

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