MIEMSS Protocol Submission Request Policy and Template

MIEMSS will evaluate requests for modifications to the *Maryland Medical Protocols for EMS* when submitted using the following process.

1. **Protocol application process**
    a. Completion of the attached "Proposed Protocol Submission Template."
    b. Each application must have a sponsoring "System Medical Director" (Executive Director of MIEMSS, State EMS Medical Director, Associate State Medical Director for Pediatrics, Regional Medical Directors, Associate Regional Pediatric Medical Directors, EMS Operational Program Medical Directors, Assistant EMS Operational Program Medical Directors).
    c. Protocol submission template should be sent via electronic mail (preferred) to the State EMS Medical Director.
    d. If you do not have a sponsoring System Medical Director, a "Protocol Concept / Sponsor Request" may be submitted for consideration at the Protocol Review Committee (PRC). The PRC may provide feedback on the proposal and a sponsoring "System Medical Director" may be acquired during this process, prior to submitting a formal proposed protocol request.

2. **Essential criteria for Proposed Protocol Submission**
    a. Clearly defined indication(s) for the proposed protocol.
    b. An explanation of the theoretic model, or how the proposed protocol will impact and benefit the delivery of EMS to patients in Maryland.
    c. Strong evidence supporting the implementation of the proposed protocol.
    d. **A plan for evaluation that includes: specific, measurable outcomes, proposed method(s) for evaluating the effect of the proposed protocol, and suggested timeframe for ongoing evaluation.**
    e. Fiscal impact statement.
    f. A System Medical Director sponsor.

3. **Protocol evaluation before submission to the Protocol Review Committee**
    a. The proposed protocol submission will be evaluated by the State EMS Medical Director with input from subject matter experts and appropriate standing committees within MIEMSS, when indicated.
    b. Once the proposed protocol submission has been reviewed and appropriately formatted, it will be forwarded to the Protocol Review Committee (PRC).
    c. With the approval of the PRC, the proposed protocol will be forwarded to the State EMS Advisory Council (SEMSAC) for comment. Finally, the protocol will be presented to the EMS Board for approval. Implementation will be based on the current protocol development cycle and urgency of the protocol change.

d. Following EMS Board approval of Optional Supplemental, Pilot, and Research proposals, the EMS Operational Programs may apply to the State EMS Medical Director for approval to utilize these protocols.
    i. EMS Operational Programs must demonstrate commitment to required reporting

Proposed Protocol Submission Template

I. Explanation
II. Indication
III. Supporting Evidence and Literature
IV. Supporting Maryland and/or National Data
V. Formatted Protocol to meet *Maryland Medical Protocols for EMS:*

Patient Care Sections
- Indication(s)
- Treatment
    - Basic Life Support
        - Adult
        - Pediatric
    - Advanced Life Support
        - Adult
        - Pediatric
    - Medical Consultation, if indicated
    - Clinical Pearls

Procedure/Skill
- Purpose
- Indication(s)
- Contraindications
- Potential Adverse Effects/Complications
- Precautions
- Procedure (description, steps)

Medications
- Pharmacology (class of medication/mechanism of action)
- Pharmacokinetics
- Indications
- Contraindications
- Adverse Effects
- Precautions
- Dosage

Adult
Pediatric
(Medical consultation, if indicated)

VI. Fiscal impact statement – address initial and ongoing costs of medication, device, replacement parts and any unique requirements to implement the protocol

VII. Impact on the existing *Maryland Medical Protocols for EMS*

a. Describe specific metrics that will be used to evaluate the effectiveness of the proposed protocol (e.g. number of patients impacted and how they would benefit from the proposal)

Date submitted to State EMS Medical Director: _____

Submitted by:

Name:_____

Signature:_____

EMS Operational Program:_____

Phone:_____

Email:_____

Sponsoring System Medical Director:

Name:_____

Signature:_____

Phone:_____

Email:_____

Forward Proposed Protocol Submission to:

Email (preferred): tchizmar@miemss.org; mstein@miemss.org

Official Use Only

Date Received by OMD:_____
Review Date:_____ Approved / Denied
PRC date:_____ Approved / Denied

Protocol Concept / Sponsor Request

The Protocol Concept / Sponsor Request process allows for the submission of an idea, medication, or skill to the Protocol Review Committee (PRC). This preliminary proposal allows the author to obtain feedback and potentially garner a sponsoring "System Medical Director." This step may be used for concepts and ideas that have not yet been drafted into a formal proposed protocol submission or sponsored by a medical director.

Requirements for submission

Provide a paragraph describing the concept in as much detail as possible. Please include relevant information regarding the idea, medication or skill, along with the following demographic information.

Date submitted to State EMS Medical Director:_____

Submitted by:

Name:_____

Signature:_____

Phone:_____

Email:_____

Forward Protocol Concept / Sponsor Request to:

Email (preferred): tchizmar@miemss.org; mstein@miemss.org

Official Use Only

Date Received by OMD:_____
Review Date:_____ Approved / Denied
PRC date:_____ Approved / Denied
Sponsoring System Medical Director (print):_____
Signature:_____
Email:_____