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EMS Mythbusters: Does The Research Support Traditional Procedures & Protocols?

Does recent research support or refute some of the traditional practices of EMS? This lecture looks at the latest tests and changes in CPR, bleeding control, splinting, care of shock, spinal immobilization oxygen administration, and other longstanding standards in emergency care. Prepare to open your mind as we bust some prehospital myths.

Curtis Olson is an emergency department nurse in Lincoln, Nebraska. He has degrees in nursing (Diploma 2003/BSN 2010) and literature (1985). He has taught extensively on emergency and medical topics to nurses, medical students, EMTs, citizen responders, and children. He has also worked as a paramedic/firefighter, bookstore manager, and coffee shop barista.

After attending this session, the learner will be able to:

1. Describe the impact of research on healthcare practice using changes in CRP as an example.
2. Summarize the latest research findings for treatment of hemorrhage, shock, and hypoxia.
3. Evaluate traditional EMS protocols in the light of current research

Outline:

1. EMS: not traditionally research oriented.
2. The case of CPR: why do the standards keep changing?
 - i. How research is conducted
 - ii. Statistics: how do they figure this stuff out?
 - iii. Who decides protocols?
 - iv. How do you find the research?
3. Oxygen: You'd think THIS would be simple!
 - i. Known contraindications
 - ii. O₂, NOT so helpful?
 - iii. Harmful?
4. Bleeding control
 - i. AHA gets into the first aid business
 - ii. Direct pressure: we DO have the research
 - iii. Elevation: we DON'T have the research
 - iv. Pressure points
 - v. Tourniquets
5. Shock: the Trendelenberg position.
6. Cervical spine immobilization:
Is the C-collar enough? NO!
7. Follow the research!