## DOM STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower

The Governor Nelson A. Rockefeller Empire State Plaza

Albany, New York 12237

January 19, 2007

All EMS Agencies Regional EMS Councils EMS Program Agencies EMS Course Sponsors

Re: 2005 AHA Guidelines Update

Dear Colleague:

This letter has been developed to answer some of the most frequently asked questions of the Bureau of Emergency Medical Services (BEMS) since the State Emergency Medical Advisory Committee (SEMAC) and the State Emergency Medical Services Council (SEMSCO) accepted the 2005 American Heart Association Guidelines (AHA). The AHA Guidelines with reference to Basic Life Support (BLS) was approved by the SEMAC, SEMSCO and the Department of Health in May of 2006. The Advanced Life Support (ALS) Guidelines were approved in September of 2006. Please note the following clarifications:

 The NYS BLS Protocols have been updated to reflect the changes and to conform to the AHA Guidelines. These protocols were disseminated by BEMS last year and are also available on the BEMS website. Agencies are required to train their members on these new protocols. The agency training officer, certified lab instructor, certified instructor coordinator, or other sufficiently trained EMS educator should provide the training.

Based on concerns forwarded to BEMS from several areas of the state, BEMS has extended the deadline for EMS agencies to train their providers to the 2005 AHA Guidelines. Training must be completed by July 1, 2007. The updated training should take place even if the agency is unable to change their Automated External Defibrillators (AEDs) to meet the current AHA Guidelines for AEDs.

- 2. The Bureau of EMS is not mandating the purchase of new AEDs to meet the new standards. However, AEDs should be upgraded to meet the new standards as soon as possible. Agencies should contact their AED manufacturer to determine if your AED can be upgraded.
- 3. Programming of AEDs occurs at the time of purchase and approved by the agency medical director prior to being placed in service. In accordance with AHA guidelines, Monophasic AEDs should be programmed to deliver initial and subsequent shocks at 360 joules. Biphasic AEDs should be programmed to 150 joules to 200 joules for truncated exponential waveform or 120 joules with a rectilinear biphasic waveform for the initial and all subsequent shocks. These joule settings are recommended to medical directors as guidelines to follow in New York State. When purchasing AEDs to replace equipment be sure to confirm with the manufacturer that the AEDs you are purchasing meet the 2005 AHA guideline recommendations.

- 4. If your current AED is unable to be programmed to these settings you may follow the programming guidelines for your specific AED manufacturer. Until your AEDs are upgraded or replaced, you should continue to follow the previous state BLS protocols with regard to AED use and CPR.
- 5. All BEMS certification examinations have been updated to meet the new AHA Guidelines.
- Until agencies have trained all their staff to the new guidelines you should continue to use the old version of the state protocols and CPR. EMS Agencies are required to have trained all staff to the new guidelines by July 1, 2007.
- 7. BEMS continues to urge all agencies to have AEDs that are capable of treating all age groups.
- 8. The new BLS Cardiac Arrest Protocol states that "a maximum of three (3) defibrillations may be delivered at the scene prior to initiating transport". This does not mean that a provider can "only" deliver three (3) defibrillations at the scene. If transport is not available or is delayed, you should continue to treat and defibrillate the patient if so required by the AED. EMS providers must begin transportation of these patients as soon as possible and not delay transport to perform additional defibrillations.
- 9. The NYS Cardiac Arrest protocol for adult and pediatric patients that was issued in 2006 with the new AHA guideline recommendations has had language modifications that do not change the 2005 AHA guideline recommendations, but were recommended by the SEMAC and SEMSCO. This protocol will replace the old version and be added to the website. A copy is enclosed and dated January 18, 2007.

I hope this letter will better assist you in the transition to the new 2005 AHA Guidelines.

Sincerely,

Eduard G. Wronski

Edward G. Wronski Director Bureau of Emergency Medical Services