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TO: Region XI EMS Providers
Region XI, Chicago EMS Resource Hospital Pharmacies

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MEMORANDUM FROM THE CHICAGO EMS MEDICAL DIRECTORS

SUBJECT: D50 and Atropine Shortages

Due to unavoidable national drug shortages, the EMS Medical Directors, along with the Resource Hospital Pharmacists have developed following modifications to the Chicago EMS Standing Medical Orders.

Dextrose:

The normal adult dose for treatment of hypoglycemia is 50mL of a D50 IV preparation, which provides 25 grams of glucose. The goal of treatment is to provide 25g of glucose in all cases. In any situation where D50 would be utilized, paramedics may use any of the following acceptable substitutions:

1. 250mL of D10W given through macro drip tubing (This can be supplied as bag containing 250mL, 500mL, or 1000mL. 250mL should be given in any single situation)
2. 100mL of D25 given IV push (This can be supplied as 10-D25 syringes packaged together)

Reminders:

1. Oral glucose paste should be used for altered hypoglycemic patients who are able to protect their airway. It is fast, safe, and effective and avoids an emergent IV.
2. Glucagon 1mg administered IM for patients who do not have IV access , only if they cannot tolerate oral glucose paste. Glucagon IM will take up to 30 minutes to be effective and may not be effective in all patients.

Atropine:

Atropine is considered a Non-Life Critical medication except for certain toxicologic/hazard materials exposures. If paramedics are unable to replace expired or used atropine at a Resource Hospital, they may continue to remain in service without this medication. They are to follow the SMOs for bradycardia without the use of atropine.