Academy Protocol Use Clarification Document:
Protocol C – Panels 13 and 14
Protocols A and B – Panels 16 and 17

To be read by: All EMDs prior to MPDS version 11.3 use on-line

To comply with standards published by the American Heart Association and the European Resuscitation Council, the National Academy of Emergency Medical Dispatch previously removed the pulse check and signs of circulation questions from the Airway/Arrest/Choking (Unconscious) PAIs starting in MPDS v11.1.

The Academy agrees with AHA/ERC/ILCOR that the EMD should not ask callers to check for pulses as such layperson pulse checks have shown to be inaccurate and unreliable. However, EMDs might receive calls from medically aware callers who insist that a patient has a pulse, but is not breathing effectively (as may be the case when the patient has overdosed on narcotics). When such information is spontaneously provided, the EMD may use Panels 13 and 14 on Protocol C or Panels 16 and 17 on Protocols A and B to provide ventilation support without chest compressions. These panels are not explicitly linked to any other protocol pathway. When appropriate, the EMD may jump directly to these instructions. For ProQA, see the diagram on page 2. However, EMDs should be aware, that it is not uncommon for a lay caller to mistakenly detect a pulse when advised to check on a patient who is actually in cardiac arrest and in need of chest compressions.

Because the instructions are nearly identical for the first sequence of “Mouth-to-Mouth” only (unlinked) and the “Change Tilt” sequence (link from Panel 5), both instructions have been combined in Panel 13. The “Continue M-T-M” pathway director to Panel 14 is appropriate only when a medically aware caller reports that the patient has a pulse, but is not breathing effectively. When utilizing the “Change Tilt” pathway, the EMD should follow the appropriate “1st cycle of CPR” link to Panel 6 or the “Continuing CPR” link to Panel 10.

You will notice that the Panel 13 directors are not specifically related to the operant question “Did you feel the air going in and out?” While this question is not related to the links of Panel 13, it does provide important information for the EMD. If the caller reports that air is not going in after a second attempt to ventilate, the new CPR standards require immediate compressions. However, notice the qualified instructions contained on Panels 8 and 11 of Protocol C (Panels 6 and 9 of Protocols A and B). These instructions advise the caller to check the patient’s mouth for an obstruction during compressions. This qualified instruction is appropriate when there is a suspicion of airway blockage, i.e., a complaint of choking in the unconscious patient or when the caller reports that air is not going in after a second attempt to ventilate.

Please take the time to review these panels and their directors after reading this Academy Protocol Use Clarification Document. This must be done prior to using v11.3 on-line.

Thank you.
*The 1st and 2nd links are based on the cycle of CPR you are in when the “Change Tilt” instruction became necessary, NOT the answer to the operant question (...feel the air going in...?).

*The link to Panel 14 (Continue M-T-M) is used only when a medically aware caller reports a patient who is breathing ineffectively, definitely has a pulse.

*Can be entered at any time.