

## “Exception Principle” of the Protocols

- The Statewide Patient Care Protocols represent the best efforts of the EMS physicians and pre-hospital providers of New Hampshire to reflect the current state of out-of-hospital *emergency medical care*, and as such should serve as the basis for such treatment.
- For situations covered by existing protocols, providers are expected to operate under those protocols. **This exception protocol may not be used to circumvent protocols or directives of the Medical Control Board (e.g., Medication Assisted Intubation).** We recognize, though, that on rare occasion good medical practice and the needs of patient care may require actions not otherwise authorized by these protocols, as no protocol can anticipate every clinical situation. In those circumstances, under this Exception Principle, EMS personnel are authorized to take actions not otherwise explicitly authorized under these protocols provided that:
  1. Such action is within their current EMS certification, licensure level, and scope of practice, AND
  2. They have obtained the approval of online medical control.
- This exception is intended only to be used when unanticipated clinical situations arise. This Exception Principle is not intended to cover advancements in medical science or emerging changes or improvements to existing protocols. These advancements should be evaluated based on the best available evidence under our existing process for protocol review. For example, providers who believe that intra-cardiac arrest cooling has beneficial effects may not implement that action under the Exception Principle. They should instead submit their desire to see the existing protocol modified in the next protocol cycle to the protocol subcommittee of the Medical Control Board.
- Where a patient has a medical condition that cannot be appropriately treated under the existing protocols, and has provided the provider with a written treatment plan prepared by the patient’s physician and approved by the provider’s medical control physician, the provider may perform the treatments prescribed in the treatment plan provided they are within their level and scope of practice. This specific instance would not require online medical control.
- Actions taken under this policy are considered to be appropriate and within the scope of the protocols. The EMS provider shall provide a written notification pertaining to the action taken describing the events including the patient’s condition and treatment given, and referencing the EMS Incident Report. **This report must be filed with the Medical Resource Hospital’s EMS Medical Director, Hospital EMS Coordinator, and Bureau of EMS within 48 hours of the event.** Use of this protocol must be documented under “Protocols Used” in the Patient Care Report.