Shared health Soins communs Manitoba	X05 - MEDICAL (SECTION E) CHANGE TRACKING	
	Version date: 2026-04-14	See appendix for deleted documents

E01 - CROUP

2025-03-25:
- Addition of advanced work (ACP) scope identifier
- Addition of dexamethasone at ACP level
- Revised notes & simplified algorithm for greater clarity & ease of use

2024-05-07:
- Removal of COVID restrictions and reference to general AGMP protocol for all transmissible respiratory infections

2023-08-05:
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-05-08:
- Revised repeat dosing interval to match M05.4

2022-09-08:
- New

E02 - AGITATION

2025-03-17:
- Addition of advanced work scope
- Revised flow chart & notes for greater clarity & ease use
- Table of common causes added

2023-10-17:
- Correction of link for M34 - Haloperidol
- Identifier legend at bottom of flow chart replaces work scope statement in header

2022-09-27:
- Reformatted (works scope indicator moved into header; compliance statement is now policy A03)
- E02, E20 and E25 combined into one document
- Simplified flow chart

2021-02-19:
- Simplified flow chart
- Reformatting

2017-06-19:
- Original version

E03 - ANAPHYLAXIS & ANAPHYLACTIC SHOCK

2025-05-13:
- Correction of reversed positioning of “yes” and “no” around “shock, hypoperfusion or decreased LOC” box

2025-03-18:
- Addition of advanced (ACP) work scope identifier
- Addition of epinephrine IV & diphenhydramine at ACP level

- Retitled from “Anaphylaxis”

2024-10-27:
- Paramedics will radio MTCC if STARS has been prealerted or autolaunched
- Emphasis to call early for backup / intercept / additional resources / OLMS

2023-08-06:
- Identifier legend at bottom of flow chart replaces work scope statement in header

023-02-13:
- PCP can administer hydrocortisone

2022-12-07:
- Removed 60 minute qualifier for considering hydrocortisone administration with anaphylaxis

2022-09-09
- Reformatted (works scope indicator moved into header; compliance statement is now policy A03)
- Dosing frequency changed to every 5 to 15 minutes to align with M document
- Warning about antihistamines
- Epi-Pen doses listed by age

2021-09-15:
- Revised & reformatted
- Revised indications
- Addition of scope of work statement & legend (removal of coloured boxes)
- Simplified flow chart
- Glucagon removed as rarely required in initial prehospital management
- Nebulized epinephrine removed as inferior to parenteral administration
- Removal of IV dosing until pumps are universally available

2021-02-04:
- Revised hydrocortisone dosing
- Refractory anaphylaxis transport time increased to 60 minutes

2021-01-13:
- Simplified linear flow chart & reformatting
- Modified indications and clarification of management around exposure to known allergen
- Modified to align with new guidelines (e.g., Canadian Pediatric Society)
- Addition of weight based dosing for IM epinephrine
- Removal of antihistamines which may mask signs of worsening of anaphylaxis and biphasic reactions
- Switch to hydrocortisone to simplify Shared Health ERS formulary
- Inclusion of anaphylaxis as additional reason for redirection advisory over-ride

2017-06-06:
- Original version

E04 - ACUTE CORONARY SYNDROME & STEMI

2026-03-27:
- Correction of error in title on prior version
- Correction of spelling of tenecteplase

2025-03-18:
- Addition of advanced work scope & IV nitroglycerin

2024-10-27:
- Retitled from “ACUTE CORONARY SYNDROME”

- Paramedics will radio MTCC if STARS has been pre-alerted
- Paramedics will contact VECTRS to access the Code-STEMI physician

2025-03-25:

2024-06-19:
- Retitled from “ACS & STEMI”
- Direction to repeat ECG for ongoing symptoms
- Addition of quantitative ST segment findings for ICP and modified Sgarbossa criteria for ACP
- Addition of definitions (appendix B) and symptoms (appendix C)

2023-11-27:
- TNK checklist should be performed earlier while waiting for Code-STEMI physician
- Modified flow chart
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-06-06:
- Monitor must indicated **STEMI** to activate STEMI bypass
- Paramedics will call the STEMI physician for all STEMIs regardless of time to SBH
- Providers with primary work scope can now use clinical judgement to consider nitrates
- Provider with basic work scope will no longer administer nitroglycerin
- Removal of requirement for “ongoing” pain to consider opiates
- Updated TNK checklist

2022-11-02:
- Paramedics will no longer contact OLMS if outside of 100-minute concentric

2022-08-21:
- Reformatted (works scope indicator moved into header; compliance statement is now policy A03)
- PCP can now administer IV fentanyl

2022-04-05:
- Improved flow chart for enhanced ease of use
- Separate EMR functions for enhanced visibility
- Providers with basic work scope (EMR) must contact OLMS to administer SL nitroglycerin, but can assist a patient with self-administration

2021-05-25:
- Addition of scope of work statement (removal of coloured boxes)
- Addition of instruction to contact OLMS for STEMI patient who cannot reach SBH within 100 minutes
- Addition of PHIA warning for transmitting of ECG
- Addition of TNK checklist to streamline process for initiating fibrinolysis
- Reformatted

2021-01-13:
- Further clarification of process for consulting Code-STEMI physician and emphasis on 100 minute concentric
- Clarification to Notes 11, 12 and 13

2020-04-08:
- Switch in sequence of steps on flow chart to emphasize that transport to PCI is the priority with STEMI
- Enoxaparin switched to PCP scope with physician order
- Inclusion of LBBB as possible criterion for STEMI bypass
- Instruction to enable providers to bypass the SBH ED if patient is unstable
- Further information about managing RVI

2019-11-25:

- Original versions from MHSAL / EMSB

A05 - ADRENAL CRISIS

2025-03-25:
- Addition of advanced work scope & norepinephrine

2023-08-04:
- Identifier legend at bottom of flow chart replaces work scope statement in header
- hydrocortisone may be given by IM route if vascular access not available

2023-06-05:
- New (replaces C07)

E06 - RESPIRATORY DISTRESS

2025-03-09:
- Addition of advanced work scope identifier
- Renumbered & renamed from E09 - Respiratory Distress of Unknown Cause

2024-05-04:
- Removal of COVID restrictions and reference to general AGMP protocol for all transmissible respiratory infections

2024-01-15:
- Known exposure to COVID added

2023-09-19:
- Renumbered & renamed from E06 - Breathing Problems to E09 - Respiratory Distress of Unknown Cause

2023-02-22:
- PCP can administer hydrocortisone

2022-12-06:
- Flow chart reorganized & notes simplified
- Removal of epinephrine administration in COPD due to lack of supporting evidence and risk of harm
- Removal of time qualifiers for consideration of administration of second-line agents (furosemide, hydrocortisone)

2022-10-07:
- Reformatted (works scope indicator moved into header; compliance statement is now policy A03) & renamed
- Revised flow chart & notes
- Inclusion of QRG for COVID-specific directions for PPE and CPAP
- Incorporates management information for heart failure / pulmonary edema care map; acute coronary syndrome; asthma; and COPD
- Clarification on use of IM epinephrine for asthma / COPD only
- Emphasis on CPAP and vasodilation as first line therapy in heart failure

2020-05-12:
- Consolidation of previous documents E06A; E06B; E06C; and E06D into single care map
- Incorporation of additional information from COVID-19 care map E22
- Revised table A
- Simplified flow chart
- Retitled

2017-05-15:
- Original versions

E07 - ASTHMA / COPD

2025-08-01:
- Magnesium restored to intermediate work scope

2025-03-25:
- Addition of advanced work scope
- Addition of appendix for capnometry

2024-05-04:
- Expanded indication for IM epinephrine
- Removal of COVID restrictions and reference to general AGMP protocol for all transmissible respiratory infections

2024-01-15:
- Known exposure to COVID added

2023-09-17:
- New

E08 - HEART FAILURE & PULMONARY EDEMA

2026-03-06:
- Correction of typographical errors (no content or process change)

2025-03-19:
- Renamed from “Acute Heart Failure”
- Addition of ACP work scope & IV nitroglycerin

2024-05-04:
- Removal of COVID restrictions and reference to general AGMP protocol for all transmissible respiratory infections

2024-01-15:
- Known exposure to COVID added

2023-10-19:
- New

E09 - ABDOMINAL AORTIC ANEURYSM

2025-04-17:
- New

E10 - HYPOGLYCEMIA (6 DAYS & OLDER)

2025-03-20:
- Addition of advanced work scope indicator
- Revised notes & flow chart for greater clarity and ease of use
- Addition of potential for treat and release
- Retitled to delineate from “D10 - Neonatal Hypoglycemia”

2023-08-06:
- Identifier legend at bottom of flow chart replaces work scope statement in header

2023-06-08:
- Inclusion of nasal glucagon powder when glucagon solution is no longer available

2022-09-10:

- Reformatted (works scope indicator moved into header; compliance statement is now policy A03)
- Consolidation of algorithms to simplify protocol
- Revised notes for clarity
- Providers with basic work scope (EMR) no longer have to contact OLMS before administering IN glucagon

2022-04-14:

- Reformatted (replacement of coloured boxes with scope of work statement & icons)
- Revised title & content
  - Consolidation of adult, adolescent, and childcare maps into one document
  - Separate flow charts for adult / adolescent and child / infant
  - Revised BG lower limit for diagnosing infant & child hypoglycemia
  - Improved flow chart for enhanced ease of use
  - Use of 10% dextrose in adults & adolescents when volume is a concern
- Providers with basic work scope (EMR) must contact OLMS to administer IN glucagon

2012-06-13:

- Original versions from MHSAL / EMSB

E11 - HYPERKALEMIA

2025-03-21:

- Addition of ACP work scope
- Revised notes & flow chart
- Addition of insulin / dextrose at ACP level

2023-11-09:

- New (replaces M10)
- Removal of insulin & dextrose from prehospital treatment

E12 - HYPERTENSIVE EMERGENCIES

2025-04-17:

- New

E13 - PEDIATRIC FEBRILE SEIZURE

2025-03-20:

- Addition of advanced (ACP) work scope identifier
- Revised notes & flow chart for greater clarity & ease of use
- Additional information regarding complex febrile seizure and febrile status epilepticus

2023-08-06:

- New (extracted from E14 - SEIZURES)

E14 - SEIZURE & STATUS EPILEPTICUS

2025-04-17:

- Retitled (from SEIZURES)
- Addition of advanced work scope
- Flow chart divided and revised
- Addition of information for status epilepticus
- Addition of list of causes and definitions

2023-08-06:

- Pediatric febrile seizure has been removed
- Identifier legend at bottom of flow chart replaces work scope statement in header

2022-09-10:
- Reformatted (works scope indicator moved into header; compliance statement is now policy A03)
- Simplified flow chart

2020-05-13:
- Consolidation of previous documents E14.1A; E14.1B; E14.1C; E14.1D; E14.2C; and E14.2D into single care map
- Removal of drug dosages (information on medications available at M02 and M07 links)
- Simplified flow chart

2017-04-03:
- Original version

E15 - ACUTE STROKE

2025-07-07:
- Correction of typographical error in final box of flow chart ”ring” to “during”

2025-03-16:
- Addition of advanced work scope and labetalol

2024-10-27:
- Paramedics will radio MTCC is STARS has been prealerted
- Paramedics will contact VECTRS for stroke activation / prealert (paramedics will no longer consult stroke neurologist)
- VECTRS will implement stroke activation / pre-alert at all Manitoba sites
- Simplified flow chart & revised notes for greater clarity & ease of use
- Inclusion of directions for arrival at HSC
- Appendix C contains names of all anticoagulants (replaces H11)

2024-01-19:
- Simplified flow chart & notes
- Revised indications & contraindications
- Direction to go to tele-stroke site if within one hour
- Identifier legend at bottom of flow chart replaces work scope statement in header

2022-09-23:
- Reformatted (works scope indicator moved into header; compliance statement is now policy
- Simplified flow chart & revised notes for improved clarity
- Operational change patients must be transported to stroke centre or ED within Manitoba
- Relabeling of appendices
- Extended list of anticoagulants moved to reference section (H11)
- Possible stroke not limited to positive CPSS

2020-09-08:
- Removal of speech impairment as an indication to contact the HSC stroke neurologist

2020-08-24:
- SBH removed as stroke centre
- Addition of speech impairment as an indication to contact the HSC stroke neurologist
- Addition of 90-minute marker to consider air intercept
- Formatting / simplified flow chart

2019-09-16:

- Shared Health interim release

2017-03-26:

- Original version

E16 - PALLIATIVE CARE

2025-03-16:

- Addition of advanced work scope indicator

2024-01-15:

- Replaces E30 from IERHA pilot project
- Indications include requirement for LEAP training
- Flow chart corrected to indicate PCP can administer fentanyl by any route
- IN ketamine removed
- Replacement of scopolamine (no longer available) with atropine at ICP level
- Identifier legend at bottom of flow chart replaces work scope statement in header

APPENDIX: DELETED DOCUMENTS

E30 - PALLIATIVE CARE IN THE HOME

2024-02-13:

- Deleted (replaced by E16)

~~2022-08-22:~~

- ~~Direct PCU admissions will bypass the ED~~

~~2022-08-21:~~

- ~~Addition of ketamine for analgesia and crisis situations~~
- ~~Addition of fentanyl for analgesia (paramedics with primary work scope can administer fentanyl by all routes for this care map)~~
- ~~Revised dosing and increased frequency for midazolam, metoclopramide, ondansetron, and morphine to account for increased severity of symptoms~~
- ~~SC line can be left in place~~

~~2022-07-04:~~

- ~~Addition of ketamine for analgesia and crisis situations~~
- ~~Addition of fentanyl for analgesia (paramedics with primary work scope can administer fentanyl by all routes for this care map)~~
- ~~Revised dosing and increased frequency for midazolam, metoclopramide, ondansetron, and morphine to account for increased severity of symptoms~~
- ~~SC line can be left in place~~
- ~~Reformatting (work scope statement moved into header, compliance statement relocated as A03~~

~~2022-05-16:~~

- ~~Reformatted (replacement of colored boxes with scope of work statement & icons)~~

~~2020-11-23:~~

- ~~Added Appendix 2 Subcutaneous Infusion~~
- ~~Added Appendix 3 Urinary Catheter Irrigation~~

~~2020-07-14:~~

- ~~Original version~~