



**SOUTHWESTERN CONNECTICUT  
EMERGENCY MEDICAL SERVICES COUNCIL, INC.**

611 OLD POST ROAD

FAIRFIELD, CONNECTICUT 06430

(203) 255-4411

**GUIDELINES FOR THE USE OF EPINEPHRINE AUTO-INJECTORS  
BY EMTS, EMT-IS AND SERVICES**

**I. PERSONNEL**

- A. The initiation and use of epinephrine auto-injectors is to be performed only by EMTs and EMT-Intermediates who have been properly trained in a course recognized by the region, who have demonstrated their knowledge and skill, and who hold a current medical identity number.
- B. In order to use an epinephrine auto-injector, the EMT/EMT-I must be active with a service that is recognized by the region and has been authorized by the Office of Emergency Medical Services to provide Epi-Service.
- C. Personnel shall demonstrate his/her ability to the sponsor hospital medical director or his/her designee every 24 months in an appropriate written and practical refresher exam.

**II. SERVICES**

- A. Each service is to have a medical director (the sponsor hospital medical director or his/her designee) and director of training who shall agree to be responsible for ongoing in-service training, quality assurance, and for remedying any problems brought to his/her attention by the emergency department director at any controlling hospital.
- B. Epinephrine auto-injectors can only be used under the direction of a medical control physician according to regional guidelines and, where appropriate, in accordance with approved standing orders.
- C. Epinephrine should not be exposed to heat extremes and every effort should be made to store the injectors appropriately. It is recommended authorized services carry one set of auto-injectors on each vehicle. Services should also verify on a regular basis that the medication has not expired.



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- D. Services should contact their sponsor hospital concerning disposal of injectors.

**III. TRAINING PROGRAMS**

- A. An EMS-I approved by a sponsor hospital medical director or a physician must be designated lead instructor. The EMS-I serving as lead instructor must be knowledgeable in the physiology of severe allergic reaction and in the use of epinephrine auto-injectors.
- B. It is also recommended the instructor-to-student ratio be 1:6 for psychomotor skill practice. Individuals used as assistant instructors should be knowledgeable in allergic emergencies.
- C. Instructors must follow the "Expanded Epinephrine Training Program" approved for use September 2000. Minimum length for the program is one hour.
- D. A stand-alone expanded epinephrine program is to be recorded on the appropriate form (the form currently used for MAST and Defib), signed by the sponsor hospital medical director, and submitted to the regional council.

If epinephrine training is to be included in an initial EMT or EMT-refresher training course, it must cover the expanded program outline and be recorded on the revised AED addendum, signed by the sponsor hospital medical director, and attached to the appropriate training program T-1.

**IV. TREATMENT GUIDELINES:** See "Guidelines for Epinephrine Auto-Injectors by EMT and EMT-I Personnel."

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