

April 7, 2009

Dear Ambulance Service Medical Directors and Service Directors,

During a recent meeting of the Minnesota Emergency Medical Services Regulatory Board (EMSRB) - Medical Direction Standing Advisory Committee (MDSAC), clarification was provided regarding the use of intraosseous infusion (IO) devices by Basic Life Support (BLS) Ambulance Services and for EMT-Basics working for Advanced Life Support (ALS) Ambulance Services.

The MDSAC met in consultation with the State Medical Director and EMSRB staff where the following determinations and clarifications on use of IO have been made in accordance with Minnesota Statutes § 144E.101, subdivision 6 (d):

- IO infusion is equivalent to intravenous infusion and requires Medical Director approval in accordance with the aforementioned Minnesota Statute.
- The use of IO infusion by all ambulance service personnel requires special training. It is recommended that a Continuing Quality Improvement (CQI) program be developed and monitored by the service Medical Director.

Documentation of approval for use of IO devices by the service Medical Directors includes:

- Approved standing orders/guidelines for the use of the IO device on file with the ambulance service. Recognizing that IO insertion is a painful procedure in the conscious patient. It is recommended that IO should be restricted to unconscious patients for services that cannot provide some type of anesthesia after insertion.
- A list of the ambulance service staff that has been trained on the use of the IO device is maintained on file with the ambulance service.
- Documentation of annual continuing education on the use of the IO device is maintained by the ambulance service.

Neither the EMRSB nor the MDSAC endorses any particular intraosseous device. The EZIO® was mentioned by MDSAC when they first discussed the use of IO by BLS ambulance services and personnel, as it was the most prevalently utilized device at that time. The choice of the device, whether automatic or manual, is that of the service Medical Director and must be consistent with the training and guidelines for use approved by the medical director.

Please feel free to contact either myself or Dr. Wesley with questions or for assistance.

Respectfully,



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