

Maine EMS December 1, 2025 Protocols Formulary v4

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Medication	Protocol	EMR	EMT	AEMT	Paramedic	Adult Dosing	Pediatric Dosing	OLMC Req'd?	Medication Notes	Suggested Par Level (to treat ONE patient with condition)	PAR LEVEL COVERAGE	Estimated Cost (please note, cost will vary depending on distributor and availability - per Lexicomp accessed September 2023)	Agency Level
Acetaminophen (Chewable Tabs)	Universal Pain Management in Stable Patient (Green 18)	✓	✓	✓		10-15 mg/kg PO (rounded to the nearest half tablet) (MAX single dose 1000 mg)	Over 5 years and above 9.4 kg: Chart dosing in protocol Green 18	N	Be mindful of tablet strength; NUMBER OF TABLETS SHOWN IN THE TABLE PROVIDED IS FOR 160 MG TABLETS.	(1) 30 count bottle of 80 mg chewable tablets or equivalent	1 patient	Bottle \$1.47	EMT, AEMT, & Paramedic
	Fever (Gold 19)	✓	✓	✓		10-15 mg/kg PO (rounded to the nearest half tablet) (MAX single dose 1000 mg)	Over 5 years and above 9.4 kg: Chart dosing in protocol Gold 19	N	DOUBLE the number of tablets for 80 mg tablets.				
Acetaminophen (IV/IO)	Universal Pain Management in Stable Patient (Green 19)			✓	✓	Over 70 kg: AEMT/Paramedic 1000 mg IV/IO over 15 minutes Under 70 kg: (Paramedic only) 10-15 mg/kg IV/IO (MAX single dose 1000 mg) over 15 minutes	Under 70 kg: (Paramedic only) 10-15 mg/kg IV/IO (MAX single dose 1000 mg) over 15 minutes	N	Administer, undiluted from original container, over 15 minutes. If product comes in a glass bottle, vented tubing is required. Doses less than 1000 mg require a pump and are paramedic only.	(1) 1000 mg/100 mL bottle	1 patient	Varies- \$11- \$50 per 1000mg/100mL	AEMT & Paramedic
	Fever (Gold 20)			✓	✓	Over 70 kg: AEMT/Paramedic 1000 mg IV/IO over 15 minutes Under 70 kg: (Paramedic only) 10-15 mg/kg IV/IO (MAX single dose 1000 mg) over 15 minutes	Over 2 years old: (Paramedic only) 10-15 mg/kg IV/IO (MAX single dose 1000 mg) over 15 minutes	N					
Adenosine	Adult Tachycardia (Red 24) (narrow complex)			✓	✓	6 mg IV/IO rapid bolus; may repeat x2 at 12 mg IV/IO rapid bolus		N					
	Adult Tachycardia (Red 24) (wide complex)			✓	✓	6 mg IV/IO rapid bolus; may repeat x2 at 12 mg IV/IO rapid bolus		N	Administer (preferred) undiluted via rapid IV push at centrally located peripheral IV. Follow immediately with 20 mL flush. Do NOT give adenosine to a patient with Polymorphic VT or Torsades.	(5) 6 mg/2 mL vials	1 patient	6mg/2mL vial \$1.60	Paramedic
	Pediatric Tachycardia (Red 26) (narrow complex)			✓	✓		0.1 mg/kg IV/IO rapid bolus (MAX dose 6 mg); may repeat x1 at 0.2 mg/kg IV/IO rapid bolus (MAX dose 12 mg).	N					
	Pediatric Tachycardia (Red 28) (wide complex)			✓	✓		0.1 mg/kg IV/IO rapid bolus (MAX dose 6 mg); may repeat x1 at 0.2 mg/kg IV/IO rapid bolus (MAX dose 12 mg)	N					
Albuterol (Nebulized)	Allergy / Anaphylaxis (Gold 1)			✓	✓	2.5 mg nebulized, repeat every 5 min as needed	2.5 mg nebulized, repeat every 5 min as needed	N					
	Respiratory Distress with Bronchospasm (Blue 6-7)			✓	✓	2.5 mg nebulized, may repeat x1	2.5 mg nebulized, may repeat x1	N	Use 3 mL premix OR 0.5 mL of 0.5% solution mixed in 2.5 mL of normal saline	(5) 0.083% 2.5 mL bullets	5 administrations	0.083% per 2.5mL neb \$0.15	Paramedic
	Hyperkalemia (Red 36)			✓	✓	15 mg nebulized	Under 25 kg: 2.5 mg by nebulization Over 25 kg: 5 mg by nebulization	N					
Amiodarone	Adult Cardiac Arrest (Red 9)			✓	✓	300 mg IV/IO; may consider additional 150 mg IV/IO once, dilute in D5W		N	Dilute in D5W				
	Pediatric Cardiac Arrest (Red 18 & Red 22)			✓	✓		5 mg/kg IV/IO; may repeat every 3-5 minutes to total of 15 mg/kg. (MAX single dose 300 mg), dilute in D5W	N	Dilute in D5W				
	Tachycardia - Wide Complex (Red 24)			✓	✓	150 mg IV/IO		N					
	Unstable Tachycardia - Wide Complex (Red 23)			✓	✓	IV/IO nfusion dose per OLMC		Y					
	Post Cardiac Arrest - Adult (Red 10)			✓	✓	IV/IO infusion/bolus dose per OLMC		Y	150 mg mixed in 100 mL D5W	(4) 150 mg/mL vials	1 code bolus, 1 2nd dose, & 1 infusion mix	150mg/3mL vial \$2.23	Paramedic
	Pediatric Unstable Tachycardia - Wide Complex (Red 26)			✓	✓		5 mg/kg IV/IO; max total of 15 mg/kg. (MAX single dose 300 mg) over 20-60 minutes, diluted in D5W	Y	Dilute in D5W. Must be infused via pump.				
	Pediatric Stable Tachycardia - Monomorphic Wide Complex (Red 28)			✓	✓		5 mg/kg IV/IO; max total of 15 mg/kg. (MAX single dose 300 mg) over 20-60 minutes, diluted in D5W	Y	Dilute in D5W. Must be infused via pump.				
Aspirin (Chewable Tabs)	Chest Pain - Suspected Cardiac Origin (Red 2)	✓	✓	✓	✓	324 mg PO		N		(4) 81 mg tablets	1 patient	81mg unit dose \$0.04	EMT, AEMT, & Paramedic

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Atropine	Adult Bradycardia (Red 29)				✓	1 mg IV/IO; repeat every 3 - 5 minutes (MAX cumulative total of 3 mg)		N	Administer undiluted by rapid IV/IO push; slow injection may result in paradoxical bradycardia	(3) 1 mg syringe or vial *Note- 10mL product cannot be used for IM administration.	1 single dose	1mg/10mL syringe \$4.11	Paramedic
	Pediatric Bradycardia (Red 22 & Red 31)				✓		0.02 mg/kg IV/IO; may repeat once (MIN single dose: 0.1 mg, MAX single dose 0.5 mg)	N	Administer undiluted by rapid IV/IO push; slow injection may result in paradoxical bradycardia				
	Nerve Agent / Organophosphate / Carbamate Poisoning (Yellow 7)				✓	For dyspnea, twitching, n/v, sweating, confusion, or pinpoint pupils 2 mg IV/IO; may repeat every 5 minutes OR 1 atropine auto injector IM Apnea, seizure, unconsciousness or flaccid paralysis 5 mg IV/IO; may repeat up to 3 times, every 5 minutes OR 3 atropine auto injectors IM	For dyspnea, twitching, n/v, sweating, confusion, or pinpoint pupils Under 1 year: 0.2 mg IV/IO; may repeat every 5 minutes Over 1 year: 2 mg IV/IO; may repeat every 5 minutes Apnea, seizure, unconsciousness or flaccid paralysis Under 1 year: 0.2 mg IV/IO; may repeat every 5 minutes Over 1 year: 2 mg IV/IO; may repeat every 5 minutes	N	Administer undiluted by rapid IV/IO push; slow injection may result in paradoxical bradycardia				
Calcium Gluconate	Hyperkalemia (Red 36-37)				✓	2 grams IV/IO diluted in 50-100 ml IVF over 15 minutes via pump	60 mg/kg IV/IO diluted in 50-100 mL, over 15 minutes via pump (MAX single dose 2 grams)	N	Mix in 50-100 mL NS or D5W and administer over 15 minutes. Must be infused via pump. Do not administer via same line as Sodium Bicarbonate.	(3 to 6) 1 gram/10 mL vials OR premixed 1 gram/50 mL IV bag	up to 2 code doses or 2 doses for Calcium Channel Blocker OD	1gm/10mL vial \$6.67 premixed 1gm/50mL bag \$6.55	Paramedic
	Hyperkalemia with Adult Cardiac Arrest (Red 10 & 37)				✓	3 grams IV/IO diluted in 10ml over 1 minute, May repeat in 10 min		N	1 gram/10 mL concentration. Administer over 1 minute				
	Hyperkalemia with Pediatric Cardiac Arrest (Red 19, Red 22 & Red 37)				✓		60 mg/kg IV/IO diluted in a min of 10 mL, over 1 minute (MAX single dose 3 grams), may repeat in 10 minutes. Do not use routinely in cardiac arrest.	N	Do not use routinely in cardiac arrest				
	Symptomatic Bradycardia from Calcium Channel or Beta Blocker Overdose (Yellow 2)				✓	3 grams IV/IO diluted in 50-100mL, over 15 minutes via pump; may repeat every 10 minutes, up to 4 additional doses	60 mg/kg IV/IO diluted in 50-100mL, over 15 minutes via pump; may repeat every 10 minutes, up to 4 additional doses (MAX dose 3 grams)	N	1 gram/10 mL concentration. Administer over 15 minutes. Must be infused via pump.				
Ceftriaxone	Open Fractures (Green 26)				✓	2 grams IV/IO in 50-100 mL of NS or D5W over 10 minutes	Under 12 years: 75 mg/kg IV/IO (MAX single dose 2 grams) in 50-100 mL of NS or D5W over 10 minutes Over 12 years: 2 grams IV/IO in 50-100 mL of NS or D5W over 10 minutes	N	Add to 50-100 mL NS or D5W. Administer over 10 minutes.	(2) 1 gram vials	1 patient	1gm vial \$4.97	Paramedic
Cyanokit	Cyanide / CO Exposure (Yellow 8)				✓	5 grams IV/IO; may repeat once	Under 30 kg: 2.5 grams IV/IO Over 30 kg: 70 mg/kg IV/IO	N		Optional	Optional	per 5gm kit \$958.80	Paramedic (Optional)
Dexamethasone	Respiratory Distress with Bronchospasm (Blue 7)				✓	16 mg IV/IO/IM/PO	0.6 mg/kg IV/IO/IM/PO (MAX single dose 16 mg)	N	Administer undiluted over at least one minute. May also be diluted in 50 mL D5W or NS and administered over 5-15 minutes	(2) 10 mg/mL vial OR (1) 20 mg/ 5ml vial	1 dose	10 mg/mL vial - \$0.83 20 mg/ 5ml vial - \$0.52	Paramedic
	Respiratory Distress with Inspiratory Stridor (Pink 2)				✓		0.6 mg/kg IV/IO/IM/PO (MAX single dose 16 mg)	N					
	Adrenal Insufficiency with Medical Shock (Gold 15)				✓	16 mg IV/IO/IM	0.6 mg/kg IV/IO/IM (MAX single dose 16 mg)	N					

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Dextrose - D10	Diabetic / Hypoglycemic Emergencies (Gold 6)				✓	250 mL IV; paramedic may repeat. <i>Paramedic may administer IO if oral glucose or glucagon ineffective and IV unavailable</i>	Under 40 kg: 5 mL/kg IV; paramedic may repeat. Over 40 kg: 250 mL IV; paramedic may repeat <i>Paramedic may administer IO if oral glucose or glucagon ineffective and IV unavailable</i>	N	Administer undiluted at a maximum rate of 200mg/kg over 1 minute. Concentrated solutions (e.g. anything greater than 5%) may be an irritant or vesicant. Ensure proper catheter placement prior to and during IV infusion. Paramedic may administer IO if oral glucose or glucagon ineffective and IV unavailable	(2) 250 mL premixed IV bag	2 doses	250mL bag \$1.82	AEMT & Paramedic
	Pediatric Cardiac Arrest (Red 18)				✓		Blood glucose less than 60 mg/dL, 5 mL/kg IV/IO	N					
Dextrose - D50	Diabetic / Hypoglycemic Emergencies (Gold 6)				✓	25 grams IV (50 mL of 50% solution); paramedic may repeat	Under 40 kg: Use D10 Over 40 kg: 25 grams IV (50 mL of 50% solution); paramedic may repeat	N	Administer undiluted at a maximum rate of 200 mg/kg over 1 minute. Concentrated solutions (e.g. anything greater than 5%) may be an irritant or vesicant. Ensure proper catheter placement prior to and during IV infusion.	(2) 25 grams/50 mL syringe or vial	2 doses	50mL vial/syringe \$6.54	AEMT & Paramedic
Diphenhydramine	Allergy / Anaphylaxis (Gold 1)				✓	25-50 mg IV/IO/IM	1-2 mg/kg IV/IO/IM (MAX single dose 50 mg)	N	Administer at a rate <= 25 mg/minute	(1) 50 mg/mL syringe or vial	1-2 doses	50mg/1mL vial \$0.54	Paramedic
	Dystonic Reaction (Yellow 2)				✓	25-50 mg IV/IM	1-2 mg/kg IV/IM (MAX single dose 50 mg)	N	Administer at a rate <= 25 mg/minute				
Epinephrine 1mg/mL	Respiratory Distress with Bronchospasm (Blue 6-7)			✓	✓	0.3 mg of 1 mg/mL IM every 20 minutes	Under 25 kg: 0.15 mg of 1mg/mL IM every 20 minutes Over 25 kg: 0.3 mg of 1mg/mL IM every 20 minutes	N	Administer undiluted using 1 mg/mL concentration	(6) 1 mg/1 mL ampule or vial	18 doses (also serves as b/u to make additional 1mg/10mL)	1mg/1mL amp/vial \$8.21	EMT, AEMT, & Paramedic
	Allergy / Anaphylaxis (Gold 1)			✓	✓	0.3 mg of 1 mg/mL IM; may repeat every 5 minutes	Under 25 kg: 0.15 mg of 1mg/mL IM; may repeat every 5 minutes Over 25 kg: 0.3 mg of 1mg/mL IM; may repeat every 5 minutes	N	Administer undiluted using 1 mg/mL concentration				
Epinephrine 1mg/mL (Auto-injector)	Allergy / Anaphylaxis (Gold 1)			✓	✓	Epi Pen (0.3 mg) IM; may repeat every 5 minutes	Under 25 kg: Epi Pen Jr (0.15 mg) IM; may repeat every 5 minutes Over 25 kg: Epi Pen (0.3 mg) IM; may repeat every 5 minutes	N		Optional	Optional	EpiPen Jr \$133.81, Adult \$133.81	EMT, AEMT, & Paramedic (Optional)
Epinephrine 1mg/mL (Nebulized)	Allergy / Anaphylaxis (Gold 1)				✓	1 mg (1 mg / mL) nebulized with 2 mL of NS, repeat every 5 min as needed	1 mg (1 mg / mL) nebulized with 2 mL of NS, repeat every 5 min as needed	N	Add 1 mg/mL to 2 mL NS.	(1) 1 mg/mL ampule or vial	1 dose	1mg/1mL amp/vial \$8.21	Paramedic
	Respiratory Distress with Inspiratory Stridor (Pink 2)				✓		1 mL (1 mg/mL) nebulized with 2.5 mL of NS; may repeat with OLMC	N	Add 1 mg/mL to 2.5 mL NS.				
Racemic Epinephrine (Nebulized)	Allergy / Anaphylaxis (Gold 1)				✓	0.5 mL nebulized with 2.5 mL of NS, repeat every 5 min as needed	0.5 mL nebulized with 2.5 mL of NS, repeat every 5 min as needed	N	2.25% solution diluted with 2.5 mL of NS	Optional	Optional	2.25% 0.5mL \$0.77 *stability very sensitive to temperature excursions above 77°F	Paramedic (Optional)
	Respiratory Distress with Inspiratory Stridor (Pink 2)				✓		0.5 mL nebulized with 2.5 mL of NS	N	2.25% solution diluted with 2.5 mL of NS				
Epinephrine 1mg/10 mL	Adult Cardiac Arrest (Red 9)				✓	1 mg of 1 mg/10 mL IV/IO every 3-5 minutes		N	Rapid push using 1 mg/10 mL concentration; flush with at least 10mL				AEMT & Paramedic
	Pediatric Cardiac Arrest (Red 18-19 & Red 22)				✓		0.01 mg/kg IV/IO 1 mg/10 mL, may repeat every 3-5 minutes (MAX single dose 1 mg)	N	Rapid push using 1 mg/10 mL concentration; flush with at least 10mL	(6) 1 mg/10 mL syringe or vial	6 doses (18 -30 minutes)	1mg/10mL syringe \$4.06	Paramedic
	Pediatric Bradycardia (Red 22 & Red 31)				✓		0.01 mg/kg IV/IO 1 mg/10 mL, may repeat every 3-5 minutes (MAX single dose 1 mg)	N					
	Newborn Resuscitation (Lavender 5)				✓		NEONATE ONLY: 0.02 mg/kg IV/IO every 3-5 minutes until HR >60	N	Administer using 1 mg / 10 mL concentration; draw up dose in separate syringe. Flush with 2-5 mL				

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Epinephrine 1mg/mL (Infusion)	Allergy / Anaphylaxis (Gold 2)				✓	Start at 0.05 mcg/kg/min IV/IO. Titrate by 0.05 mcg/kg/min every 5 minutes to desired effect which may include resolution of respiratory symptoms, SPB of > 90 mmHg and/or MAP > 65 mmHg. (Usual dose is 0.05-0.5 mcg/kg/min) (MAX dose is 0.5 mcg/kg/min)	Start at 0.05 mcg/kg/min IV/IO. Titrate by 0.05 mcg/kg/min every 5 minutes to desired effect which may include resolution of respiratory symptoms, SPB of > 90 mmHg and/or MAP > 65 mmHg. (Usual dose is 0.05-0.5 mcg/kg/min) (MAX dose is 0.5 mcg/kg/min)	N	Add 1 mg/mL vial to 250 mL NS or D5W for final concentration of 4 mcg/mL. Must be infused via pump.	(1) 1 mg/mL ampule or vial	1 patient	1mg/1mL amp/vial \$8.21	AEMT & Paramedic
	Adult Bradycardia (Red 29)				✓	Start at 0.05 mcg/kg/min IV/IO. Titrate by 0.05 mcg/kg/min every 5 minutes to desired effect which may include resolution of bradycardia, SPB of > 90 mmHg and/or MAP > 65 mmHg. (Usual dose is 0.05-0.5 mcg/kg/min) (MAX dose is 0.5 mcg/kg/min)	/	N	Add 1 mg/mL vial to 250 mL NS or D5W for final concentration of 4 mcg/mL. Must be infused via pump.				
Fentanyl	Universal Pain Management in Stable Patient (Green 19)				✓	1 mcg/kg IV/IN/IM; may repeat every 5-10 minutes at 0.5-1.0 mcg/kg (MAX single dose 100 mcg) (MAX cumulative dose 5 mcg/kg)	1 mcg/kg IV/IN/IM; may repeat every 5-10 minutes at 0.5-1.0 mcg/kg (MAX single dose 100 mcg) (MAX cumulative dose 5 mcg/kg)	N	IM: administer slowly over 1-2 minutes IV: Administer slowly over 1-2 minutes Rapid administration may result in muscle and chest wall rigidity, impaired ventilation or respiratory distress/arrest.	CONTROLLED SUBSTANCE - Refer to hospital agreement	Depends on hospital agreement	100mcg/2mL \$1.45	Paramedic
	Post ETT / BIAID Pain Control / Sedation (Blue 5)				✓	0.5-1 mcg/kg IV/IO may repeat every 15 minutes (MAX cumulative dose 5 mcg/kg)	0.5-1 mcg/kg IV/IO; may repeat every 15 minutes (MAX cumulative dose 5 mcg/kg)	N	IV: Administer slowly over 1-2 minutes Rapid administration may result in muscle and chest wall rigidity, impaired ventilation or respiratory distress/arrest.				
	Chest Pain - Suspected Cardiac Origin (Red 3)				✓	1 mcg/kg IV/IN/IM (MAX single dose 100 mcg)	/	N	IM: administer slowly over 1-2 minutes IV: Administer slowly over 1-2 minutes Rapid administration may result in muscle and chest wall rigidity, impaired ventilation or respiratory distress/arrest.				
	Adult Pain Control Pre-Cardioversion / Transcutaneous Pacing (Red 23, Red 29)				✓	1 mcg/kg IV/IO/IN (MAX single dose 100 mcg)	/	N	Administer slowly over 1-2 minutes Rapid administration may result in muscle and chest wall rigidity, impaired ventilation or respiratory distress/arrest.				
	Pediatric Pain Control Pre-Cardioversion / Transcutaneous Pacing (Red 26, Red 31)				✓	/	1 mcg/kg IV/IN/IO to MAX first dose 100 mcg	N					
	Abdominal Pain (Gold 17)				✓	1 mcg/kg IV/IN/IM (MAX single dose 100 mcg); may repeat with OLMC	/	N	IV: Administer slowly over 1-2 minutes Rapid administration may result in muscle and chest wall rigidity, impaired ventilation or respiratory distress/arrest.				
Glucagon	Diabetic / Hypoglycemic Emergencies (Gold 6)			✓	✓	1 mg IM, Paramedic may repeat	Under 20 kg: 0.5 mg IM; Paramedic may repeat Over 20 kg: 1 mg IM; Paramedic may repeat	N	Must be reconstituted with provided diluent prior to administration	(1) 1 mg vial/kit	1 dose	1mg vial \$107.26	AEMT & Paramedic
	Allergy / Anaphylaxis - for patients taking Beta Blockers (Gold 1)				✓	1 mg IV/IO; repeat every 5 minutes when not responsive to epinephrine	/	N	Must be reconstituted with provided diluent prior to administration				Paramedic
Glucose (Oral)	Diabetic / Hypoglycemic Emergencies (Gold 6)	✓	✓		✓	1 tablet or tube PO, repeat as needed for clinical improvement	1 tablet or tube PO, repeat as needed for clinical improvement	N	May use glucose tube or tablets. Glucose product contents vary. May contain 4 - 40 gm dextrose. Average single dose approx. 12.5gm	2-3 dose equivalents	2-3 doses	Varies per product	EMT, AEMT, & Paramedic
Hemostatic Dressings	Hemorrhage (Green 12)	✓	✓	✓	✓	Packed in wound to achieve hemorrhage control	Packed in wound to achieve hemorrhage control	N		See Maine EMS Rules	N/A	Varies	EMR, EMT, AEMT, & Paramedic
Hydrocortisone (Solu-Cortef)	Adrenal Insufficiency with Medical Shock (Gold 15)				✓	Per prescriber	Per prescriber	N	Patient must supply, use patient's prescribed dose.	N/A	N/A	N/A	Paramedic (Patient supplied)

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Ipratropium Bromide / Albuterol (Nebulized)	Respiratory Distress with Bronchospasm (Blue 6)		✓	✓	✓	0.5 mg Ipratropium Bromide and 2.5 mg Albuterol premixed nebulized every 5 minutes; may repeat x2	Over 1 year: 0.5 mg Ipratropium Bromide and 2.5 mg Albuterol premixed nebulized every 5 minutes; may repeat x2 Under 1 year: do not use	N - with exceptions	0.5 mg Ipratropium Bromide and 2.5 mg Albuterol premixed OLMC is needed for EMT and AEMT if CPAP has been initiated	(5) 0.5 mg/2.5 mg 3 mL bullets	5 doses (25 minutes)	0.5mg/2.5mL (0.02%) \$0.19; Also supplied as Albuterol/Ipratropium 2.5mg/0.5mg per 3mL neb \$0.26	EMT, AEMT, & Paramedic	
	Allergy / Anaphylaxis (Gold 1)	✓	✓	✓										
Ketamine	Post ETT / BIAID Pain Control / Sedation (Blue 5)				✓	0.2 mg/kg IV/IO; may repeat once in 5 minutes (MAX single dose 25 mg) OR 0.4 mg/kg IM; may repeat once in 10 minutes (MAX single dose 50 mg)	/	N	IM: Administer deep into large muscle mass IV: Dilute calculated dose in 100 mL D5W or NS. Administer over 10 minutes; Must be infused via pump.		Depends on hospital contract	100mg/mL 5mL vial \$8.51	Paramedic	
	Anxiolysis In CPAP (Blue 9)				✓	0.2 mg/kg IV/IO; may repeat once in 5 minutes (MAX single dose 25 mg) over 10 minutes OR 0.4 mg/kg IM; may repeat once in 10 minutes (MAX single dose 50 mg)		Y	IM: Administer deep into large muscle mass IV: Dilute calculated dose in 100 mL D5W or NS. Administer over 10 minutes; Must be infused via pump.					
	Universal Pain Control in Stable Patient (Green 19)				✓	0.2 mg/kg IV in 100 mL over 10 minutes via pump (MAX single dose 25mg); may repeat every 15 minutes as needed (MAX cumulative dose 1 mg/kg) OR 0.5 mg/kg IN (MAX single dose 25 mg); may repeat once at 0.25 mg/kg IN in 15 minutes as needed for pain		N - with exceptions	IV: Dilute calculated dose in 100 mL D5W or NS. Administer over 10 minutes; Must be infused via pump.					CONTROLLED SUBSTANCE - Refer to hospital contract
	Agitation / Excited Delirium (Orange 6)				✓	Under 65 years: 4 mg/kg IM; MAX single dose 500mg Over 65 years: Do not use		N - with exceptions	Administer deep into large muscle mass					
	Anxiety for Hospice Patients (Grey 9)				✓	0.5 mg/kg IN (MAX single dose 25 mg)		Y						
Lidocaine 2%	IO – Pain with Infusion (Purple 5)				✓	40 mg slow IO push over 3-4 minutes followed by 10 mL NS flush; may repeat with 20 mg with OLMC	0.5 mg/kg slow IO push over 3-4 minutes followed by 10 mL NS flush (MAX dose 40 mg); may repeat with 0.25 mg/kg with OLMC (MAX dose 20mg)	N - with exceptions	Use 2% preservative free concentration	(4) 5 mL vials	5mL = 10mg	2% in 5mL vial \$1.12	Paramedic	
Magnesium Sulfate	Respiratory Distress with Bronchospasm (Blue 7)				✓	2 grams IV/IO over 15 minutes	50 mg/kg IV/IO over 15 minutes (MAX dose of 2 grams)	N	IV/IO: Diluted in 50-100ml (D5W preferred). Must be infused via pump.	9 gm (vial size may vary)	9 grams = Need 8 grams for max dose plus 1 gram for infusion	1gm/2mL vial \$1.02	Paramedic	
	Seizures during Pregnancy (Gold 9)				✓	4 gm IV/IO over 15 minutes OR 8 grams IM (4 grams in each buttock; do not dilute) If seizures continue: 2 grams IV/IO over 5 min via pump If seizures stop: 1 gram IV/IO over 1 hour via pump	/	N	IV/IO: Must be infused via pump.					
	Polymorphic Wide Complex Tachycardia (Torasdes de Pointes) in Adult Cardiac Arrest (Red 9)				✓	2 grams IV/IO diluted in 10 mL over 1-2 minutes		/	N					
	Polymorphic Wide Complex Tachycardia (Torasdes de Pointes) in Pediatric Cardiac Arrest (Red 18 & Red 22)				✓	/			N					Dilute in 10ml IVF (D5W preferred)
	Adult Polymorphic Wide Complex Tachycardia (Red 25)				✓				1-2 grams, IV/IO, diluted in 50-100mL over 15 minutes					N
Pediatric Polymorphic Wide Complex Tachycardia (Torasdes de Pointes) (Red 28)				✓	/				N	D5W is preferred dilution fluid. Must be infused via pump.				

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Medication	Protocol	EMR	EMT	AEMT	Paramedic	Adult Dosing	Pediatric Dosing	OLMC Req'd?	Medication Notes	Suggested Par Level (to treat ONE patient with condition)	PAR LEVEL COVERAGE	Estimated Cost (please note, cost will vary depending on distributor and availability - per Lexicomp accessed September 2023)	Agency Level	
Magnesium Sulfate (continued)	Tricyclic Antidepressant Overdose (Yellow 3)				✓	2 grams IV/IO diluted in 50-100mL IVF (D5W preferred) over 15 minutes via IV pump.	50 mg/kg IV/IO diluted in 50-100mL IVF (D5W preferred) (MAX single dose 2 grams) over 15 minutes via IV pump	N	Must be infused via pump.	9 gm (vial size may vary)	9 grams = Need 8 grams for max dose plus 1 gram for infusion	1gm/2mL vial \$1.02	Paramedic	
Magnesium Sulfate (Infusion)	Seizures during Pregnancy (Gold 9)				✓	If seizures resolve: 1 gram IV/IO per hour via pump		N	Must be infused via pump.	9 gm (vial size may vary)	9 grams = Need 8 grams for max dose plus 1 gram for infusion	1gm/2mL vial \$1.02	Paramedic	
Mark-1 Kit (Auto injector)	Nerve Agent / Organophosphate / Carbamate Poisoning (Yellow 7)	✓	✓	✓	✓	For dyspnea, twitching, n/v, sweating, confusion, or pinpoint pupils 1 atropine autoinjector IM	For dyspnea, twitching, n/v, sweating, confusion, or pinpoint pupils Under 1 year: 1 pediatric atropine autoinjector Over 1 year: 1 adult atropine autoinjector	N	Administer undiluted deep IM into large muscle	Optional	Optional	Varies	EMR, EMT, AEMT, & Paramedic (Optional)	
						Apnea, seizure, unconsciousness or flaccid paralysis 3 atropine autoinjectors	Apnea, seizure, unconsciousness or flaccid paralysis Under 1 year: 1 pediatric atropine autoinjector Over 1 year: 1 adult atropine autoinjector							
Metoprolol	Adult Tachycardia (Red 23)				✓	5 mg IV over 5 minutes; may repeat once		Y	Administer over 5 minutes, SBP must be over 100 mmHg	(1) 5 mg/5 mL vial	1 dose	5mg/5mL \$0.47	Paramedic	
Midazolam	Seizures (Gold 8)				✓	10 mg IM; repeat every 5 minutes until resolution of seizure (MAX IM cumulative total 20 mg) OR 5 mg IV/IO; repeat every 5 minutes until resolution of seizure (MAX IV/IO cumulative total 15 mg)	0.2 mg/kg IM (MAX single dose of 10 mg); repeat every 5 minutes at 0.6 mg/kg until resolution of seizure (MAX IM cumulative total of 20 mg) OR 0.1 mg/kg IV/IO (MAX single dose of 5 mg); repeat every 5 minutes at 0.3 mg/kg until resolution of seizure (MAX IV/IO cumulative dose of 15 mg)	N	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle IV/IO: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL	CONTROLLED SUBSTANCE - Refer to hospital agreement	Depends on hospital agreement	5mg/mL 1mL vial 0.52; 1mg/mL 5mL vial \$0.78	Paramedic	
	Seizures during Pregnancy (Gold 9)				✓	If seizures do not resolve after Magnesium: 10mg IM OR 5 mg IV/IO		N						
	Post ETT / BIAD Pain Control / Sedation (Blue 5)				✓	0.5 - 2.5 mg IV/IO; repeat every 5 minutes; may repeat x 3 (MAX IV/IO cumulative dose of 5 mg) OR 1-5 mg IM; repeat every 5 minutes; may repeat x 3 (MAX IM cumulative dose of 10 mg)	6 months-12 years: 0.05 mg/kg IV/IO every 5 minutes (MAX IV/IO cumulative dose of 5 mg) OR 6 months-12 years: 0.1 mg/kg IM (MAX single dose 5 mg); repeat every 5 minutes (MAX IM cumulative dose of 10 mg)	N	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle; may require multiple injection sites to administer dose IV: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL IN: Use 5 mg/mL solution only; max volume per nostril is 1mL					
	Agitation / Excited Delirium (Orange 6)				✓	4-10 mg IM	10 years or older: 0.1mg/kg IM, MAX single dose 10mg Under 10 years: contact OLMC	N - with exceptions	*Note, multiple concentrations available Administer undiluted deep IM into large muscle					
	Anxiolysis In CPAP (Blue 9)				✓	0.5 - 2.5 mg IV/IO every 5 minutes; may repeat x 3 (MAX IV/IO cumulative dose of 5mg) OR 1-5 mg IM every 5 minutes; may repeat x 3 (MAX IM cumulative dose of 10 mg)		Y	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle; may require multiple injection sites to administer dose IV: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL IN: Use 5 mg/mL solution only; max volume per nostril is 1mL					
	Adult Pain Control Pre-Cardioversion / Transcutaneous Pacing (Red 23, Red 29)					✓	3 mg IV/IO/IN		N					*Note, multiple concentrations available IV: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL IN: Use 5 mg/mL solution only; max volume per nostril is 1mL
	Pediatric Pain Control Pre-Cardioversion / Transcutaneous Pacing (Red 26, Red 31)					✓		0.05 mg/kg IV/IO or 0.1mg/kg IN (MAX 3mg)	N					*Note, multiple concentrations available IV: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL IN: Use 5 mg/mL solution only; max volume per nostril is 1mL

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Medication	Protocol	EMR	EMT	AEMT	Paramedic	Adult Dosing	Pediatric Dosing	OLMC Req'd?	Medication Notes	Suggested Par Level (to treat ONE patient with condition)	PAR LEVEL COVERAGE	Estimated Cost (please note, cost will vary depending on distributor and availability - per Lexicomp accessed September 2023)	Agency Level
Midazolam (continued)	Nerve Agent / Organophosphate / Carbamate Poisoning (Yellow 7)				✓	/	For dyspnea, twitching, n/v, sweating, confusion, or pinpoint pupils 0.2 mg/kg IM (MAX single dose 10 mg); repeat every 5 minutes until 3 doses administered OR 0.1 mg/kg IV/IO (Max single dose 5 mg); repeat every 5 minutes until 3 doses administered	N	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle; may require multiple injection sites to administer dose	CONTROLLED SUBSTANCE - Refer to hospital agreement	Depends on hospital agreement	5mg/mL 1mL vial 0.52; 1mg/mL 5mL vial \$0.78	Paramedic
	Severe Alcohol Withdrawal (Yellow 5)				✓	2.5 mg IV; may repeat once (MAX IV cumulative dose 5 mg) OR 5 mg IM; may repeat once (MAX IM cumulative dose 10 mg)	/	Y	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle IV: Administer by slow injection over at least 2 minutes using a concentration < 5 mg/mL	CONTROLLED SUBSTANCE - Refer to hospital agreement	Depends on hospital agreement	5mg/mL 1mL vial 0.52; 1mg/mL 5mL vial \$0.78	Paramedic
	Apnea, seizure, unconsciousness or flaccid paralysis 10 mg IM; repeat until 3 doses administered OR 5 mg IV/IO; repeat up to 3 times every 5 minutes until 3 doses administered	Apnea, seizure, unconsciousness or flaccid paralysis 0.2 mg/kg IM (MAX single dose 10 mg); repeat every 5 minutes until 3 doses administered OR 0.1 mg/kg IV/IO (Max single dose 5 mg); repeat every 5 minutes until 3 doses administered	N	*Note, multiple concentrations available IM: Administer undiluted deep IM into large muscle; may require multiple injection sites to administer dose									
Naloxone	Poisoning / Overdose (Yellow 1)	✓	✓	✓	✓	0.5 mg IN; may repeat every 2 minutes in alternating nostrils 0.1 - 2 mg IV/IO/IM (AEMT & Paramedic)	Neonates: Do not use <u>Under 20 kg or under 5 years:</u> 0.1 mg/kg IV/IO/IM (AEMT & Paramedic) <u>Over 20 kg or over 5 years:</u> 0.1-2 mg IV/IO/IM (AEMT & Paramedic)	N	IV: Administration over 30 seconds, slow IV push (dilute 0.4 mg with 9 mL NS for total volume of 10 mL)	(3) 2 mg/2 mL syringe or vial	3 doses	2mg/2mL syringe \$27.90 0.4mg/mL vial \$27.52	EMR, EMT, AEMT, & Paramedic
Naloxone (Auto Injector)	Poisoning / Overdose (Yellow 1)	✓	✓	✓	✓	Device dose and route (IN or IM); may repeat once in 2-5 minutes	/	N		Optional	Optional	Varies	EMR, EMT, AEMT, & Paramedic (Optional)
Nitroglycerin (Tabs or Spray)	Chest Pain - Suspected Cardiac Origin (Red 2-3)		✓	✓	✓	0.4 mg tab or 1 spray SL; may repeat every 5 minutes if systolic BP above 100 mmHg (may repeat 2 additional times for EMT/AEMT, no limit for paramedic)	/	Y - EMT Y - AEMT N - Medic	EMT must assist with patient's own nitroglycerin only	(1) 25 tablet bottle OR (1) spray	One patient (single use products)	0.4mg tabs #25 bottle \$14.39; Spray bottle \$122.53	AEMT, & Paramedic (EMT assist with patient's own)
	Pulmonary Edema (Blue 10)			✓	✓	0.4 mg tab or 1 spray SL; may repeat every 2 minutes if systolic BP above 100 mmHg	/	Y - AEMT N - Medic					AEMT & Paramedic
Nitroglycerin 2% (Ointment)	Pulmonary Edema (Blue 10)			✓	✓	1 inch on chest wall	/	Y - AEMT N - Medic	Use supplied paper applicator	(2) 1 gram packet & paper applicator	2-4 doses	2% 1gm packet \$1.88	AEMT & Paramedic
50% Nitrous Oxide / Oxygen Mixture	Universal Pain Management (Green 19)				✓	Self administered to effect	/	N - with exceptions	Must blend 50% nitrous oxide with 50% oxygen	Optional	Optional	Varies	Paramedic (Optional)
Norepinephrine (Infusion)	Adult Post Resuscitation Care (Red 16)				✓	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 - 5 minutes to maintain systolic BP greater than 100 mmHg. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	/	N	Add 8 mg norepinephrine to 250 mL (NS) Final concentration is 32 mcg/mL. Must be infused via pump.				
	Pediatric Post Cardiac Arrest (Red 21)				✓	/	Infusion 0.1 – 2 mcg/kg/min IV/IO (MAX dose of 30 mcg/min) titrated to effect.	N	Add 8 mg norepinephrine to 250 mL (D5W or NS) Final concentration is 32 mcg/mL. Must be infused via pump.	(2) 4 mg vials	1 patient	4 mg/4ml \$35.06	Paramedic
	Medical Shock (Gold 15)				✓	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 - 5 minutes to maintain systolic BP greater than 90 and/or MAP >65 mmHg. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 minutes to maintain systolic BP based on Pink 4. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	N	Add 8 mg norepinephrine to 250 mL (D5W or NS) Final concentration is 32 mcg/mL. Must be infused via pump.				

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Norepinephrine (continued) (Infusion)	Cardiogenic Shock (Red 32)				✓	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 - 5 minutes to maintain systolic BP greater than 90 or MAP >65 mmHg. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 minutes to maintain systolic BP based on Pink 4. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	N	Add 8 mg norepinephrine to 250 mL (D5W or NS) Final concentration is 32 mcg/mL. Must be infused via pump.	(2) 4 mg vials	1 patient	4 mg/4mL \$35.06	Paramedic
	Tricyclic Antidepressant Overdose (Yellow 2)				✓	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 - 5 minutes to maintain systolic BP greater than 90 or MAP >65 mmHg. (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	0.03 mcg/kg/min IV/IO. Titrate by 0.03 mcg/kg/min every 3 minutes to maintain systolic BP based on Pink 4 (Usual dose is 0.03 - 0.25 mcg/kg/min) (Usual MAX dose is 0.6 mcg/kg/min) (Absolute MAX dose is 3 mcg/kg/min)	N	Add 8 mg norepinephrine to 250 mL (D5W or NS) Final concentration is 32 mcg/mL. Must be infused via pump.				
Oxytocin	Child Birth (Lavender 2)				✓	10 units IM to the mother after delivery of fetus and placenta		N	In multiple pregnancy, do not give until all placentas are delivered	(1) 10 unit vial	1 dose	10 unit/mL vial \$1.80	Paramedic
Ondansetron (ODT)	Nausea and Vomiting (Gold 18)				✓	4 mg ODT; may repeat once in 15 minutes	Under 4 years: do not use Over 4 years: 4 mg ODT; may repeat once in 15 minutes	N - with exceptions	Contact OLMC for dose with abnormal vital signs or drug/alcohol use by patient	(2) 4 mg tablets	1 patient	4mg tab \$0.32	AEMT & Paramedic
Ondansetron (IV)	Nausea and Vomiting (Gold 19)				✓	4 mg IV/IM; may repeat once in 15 minutes	Under 6 months: do not use 6 months - 4 years: 2.0 mg IV/IM Over 4 years: 4 mg IV/IM	N	Administer undiluted over at least 30 seconds, preferably over 2-5 minutes	(2) 4 mg/2 mL syringe or vial	1 patient	4mg/2mL vial \$0.29	AEMT & Paramedic
Oxygen	Multiple Protocols	✓	✓	✓	✓	Titrate to SpO2 above 94%	Titrate to SpO2 above 94%	N		See Maine EMS Rules	Defined in Rules	Varies	EMR, EMT, AEMT, & Paramedic
Sodium Bicarbonate	Metabolic Acidosis, TCA OD, CCB OD, or Hyperkalemia in Adult Cardiac Arrest (Red 10 & 37)				✓	50 mEq bolus IV/IO; push over 1-2 minutes; may repeat x2 with goal of QRS complex less than 120msec		N					
	Metabolic Acidosis, TCA OD, CCB OD, or Hyperkalemia in Pediatric Cardiac Arrest (Red 19, Red 22 & Red 37)				✓		1-2 mEq/kg IV/IO (MAX single dose 50 mEq); push over 1-2 minutes; For TCA overdose, repeat every 5 minutes until QRS duration is less than 120 msec. Do not use routinely in cardiac arrest. (Dilute 1:1 to 4.2%) with goal of QRS complex less than 120msec	N	Administer slowly. Vesicant at concentrations >= 8.4%; Ensure proper catheter placement prior to and during IV infusion. Pediatric Dose of 8.4% sodium bicarbonate must be diluted 1:1 with D5W to 4.2% [0.5 mEq/mL] prior to administration in patients less than 2 years of age. Do not administer in IV lines used for any other medications without thorough flushing.	(4-5) 50 mEq/50 mL 8.4% syringe or vial	2 1/2 doses for a 100 kg patient (or 10 minutes)	50mEq/50mL syringe/vial \$7.78	Paramedic
	Hyperkalemia (Red 36)				✓	50 mEq IV/IO	1 mEq/kg IV/IO over 5 minutes (MAX single dose 50 mEq) (Dilute 1:1 to 4.2%)	N					
	Tricyclic Antidepressant Overdose (Yellow 2)				✓	1 mEq/kg IV/IO (MAX of 100 mEq) over 1 minute; may repeat as needed (MAX of 3 doses) with goal of QRS complex less than 120msec	Over 2 years old: 1 mEq/kg IV/IO (MAX of 100 mEq) over 1 minute; may repeat as needed (MAX of 3 doses) with goal of QRS complex less than 120msec. Under 2 years old: 1 mEq/kg IV/IO (MAX of 100 mEq) over 1 minute; may repeat as needed (MAX of 3 doses) with goal of QRS complex less than 120msec., diluted 1:1 with D5W to 4.2%	N					
	Crush Injury / Suspension Trauma (Green 23)				✓	1 mEq/kg IV/IO over 5 minutes (MAX single dose of 50 mEq)	Over 2 years old: 1 mEq/kg IV/IO (MAX of 50 mEq) over 5 minutes; Under 2 years old: 1 mEq/kg IV/IO (MAX of 50 mEq) over 5 minutes, diluted 1:1 with D5W to 4.2%	N					

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Tetracaine	Ophthalmology (Green 25)				✓	2 drops to affected eye every 5 minutes if no penetrating injury		N	May administer via Morgan lens. To facilitate flushing.	(1) 0.5%/2 mL dropper	1 patient	5% 4mL bottle \$4.39	Paramedic
Tranexamic Acid (TXA)	Hemorrhagic Shock (Green 14)				✓	1 gram IV/IO in 250 mL NS over 10 minutes. Discuss with OLMC if patient on anticoagulants.	Over 16 years old: 1 gram IV/IO in 250 mL NS over 10 minutes	N	Dilute in 50-100 mL NS (or use pre-mixed solution) and administer at a rate of 100 mg/min (1 gram over 10 minutes).	(1) 1 gram/100 mL vial OR premixed 1 gram/100 mL IV bag	1 patient	1gm vial \$7.98	Paramedic
	Obstetrical Emergencies (Lavender 1)				✓	1 gram IV/IO in 250 mL NS over 10 minutes	Over 16 years old: 1 gram IV/IO in 250 mL NS over 10 minutes	N	Dilute in 50-100 mL NS (or use pre-mixed solution) and administer at a rate of 100 mg/min (1 gram over 10 minutes). Patient must be <24 weeks pregnant				
WHO Oral Rehydration Solution	Hyperthermia (Yellow 13)	✓	✓	✓	✓	Sips of 1 teaspoon salt + 8 teaspoons sugar + 1 liter water OR WHO Rehydration Solution	Sips of 1 teaspoon salt + 8 teaspoons sugar + 1 liter water OR WHO Rehydration Solution	N	Mix 1 teaspoon salt + 8 teaspoons sugar + 1 liter water	Optional	Optional	Varies	EMT, AEMT, & Paramedic (Optional)
Heparin	For Heparin IV Locks Only				✓	Heparin IV lock only	Heparin IV lock only	N	For heparin IV lock use only	Optional	Should be determined by service	Varies	AEMT & Paramedic (Optional)
D5W (IV Fluid)	Multiple Protocols				✓	TKO: 10-25 mL/hr IV/IO Other doses are protocol specific (MAX 40 mL/kg or 2,000 mL without OLMC)	TKO: 10-25 mL/hr IV/IO Cardiogenic Shock: 10 mL/kg Bolus: 20 mL/kg; may repeat once Other doses are protocol specific	N		See Maine EMS Rules	Defined in Rules	Varies	AEMT & Paramedic
Lactated Ringers (IV Fluid)	Multiple Protocols				✓	TKO: 10-25 mL/hr IV/IO Other doses are protocol specific (MAX 40 mL/kg or 2,000 mL without OLMC)	TKO: 10-25 mL/hr IV/IO Cardiogenic Shock: 10 mL/kg Bolus: 20 mL/kg; may repeat once Other doses are protocol specific	N - with exceptions		See Maine EMS Rules	Defined in Rules	Varies	AEMT & Paramedic
	Hemorrhagic Shock (Green 13)				✓	IV/IO: Initial 1000 mL IV/IO, continue with rate and volume to maintain SBP greater than 90 mmHg. Contact OLMC if over 65 years of age or unable to achieve SBP over 90mmHg with fluid bolus in any adult patient.	IV/IO: 20 mL/kg IV/IO bolus .May repeat x 2 up to a total of 60 mL/kg to achieve goal SBP on Green 9.	N - with exceptions	LR is preferred but NS is allowed.				
Normal Saline (IV Fluid)	Tracheostomy Care (Blue 14)	✓	✓	✓	✓	2-3 mL nebulized	2 - 3 mL nebulized	N		See Maine EMS Rules	Defined in Rules	Varies	EMT, AEMT, & Paramedic
	Crush Injury / Suspension Trauma (Green 23)				✓	500-1000 mL per hour IV/IO	10 mL/kg/hour IV/IO	N					AEMT & Paramedic
Normal Saline OR Lactated Ringers (IV Fluid)	Diabetic / Hypoglycemic Emergencies (Gold 6)				✓	If glucose greater than 300 mg/dl, 20ml/kg IV/IO	If glucose greater than 300 mg/dl, 20ml/kg IV/IO	N		See Maine EMS Rules	Defined in Rules	Varies	AEMT & Paramedic
	Medical Shock (Gold 15)				✓	Up to 30mL/kg IV/IO	Up to 20 mL/kg IV/IO	N					
	Head Trauma (Green 9 & 10)				✓	Initial 1000 mL IV/IO, continue with rate and volume to maintain SBP greater than 90 mmHg	20 mL/kg IV/IO bolus. May repeat x 2 up to a total of 60 mL/kg to achieve goal SBP on Green 9. Use OLMC for 4th bolus.	N - with exceptions					
	Burns without shock (Green 16)				✓	500 mL per hour IV	Under 6 years old: 125 mL per hour IV 6 - 13 years old: 250 mL per hour IV Over 14 years old: 500 mL per hour IV	N					
	Multiple Protocols				✓	TKO: 10-25 mL/hr IV/IO Other doses are protocol specific (MAX 40 mL/kg or 2,000 mL without OLMC)	TKO: 10-25 mL/hr IV/IO Cardiogenic Shock: 10 mL/kg Bolus: 20 mL/kg; may repeat once Other doses are protocol specific	N					
	Severe Hypothermia (Yellow 11 & 12)					✓	1000 mL IV/IO heated to 104-108° F (40-42° C)	20mL/kg IV/IO heated to 104-108° F (40-42° C)	N				