

Eastern PA EMS Council - Regional Medication List - IALS

Status	Generic Name	Trade Name	Minimum Quantity	Maximum Quantity	
Required	Albuterol	Proventil	7.5mg		
Required	Aspirin		Min. of 12 (81 mg chewable tablets)		
Required	Dextrose 10% - 50%		Meet a min. of 50gm		
Required	Epinephrine 1:1,000	Adrenalin	2mg (ampule, 1mg/ml)	Note 2	
Required	Glucagon		1mg	Note 9	
Required	Duo-Neb - (Ipratropium 0.5 mg/Albuterol 3.0 mg) Inhalation Solution *Equivalent to 2.5 mg		2 units		
Required	Naloxone	Narcan	4mg	Note 9	
Required	Nitroglycerine		(0.4mg tablet) Min. of 10 tablets		
	¹ Maximum Quantity refers to per vehicle maximum.				
Note 2	AEMTs are restricted to administering this medication by intramuscular route only, consistent with Statewide AEMT protocols. AEMTs may not administer this medication by intravenous or intraosseous route.				
Note 9	AEMTs are restricted to administering this medication by intranasal, intramuscular or subcutaneous routes only, consistent with Statewide AEMT protocols. AEMTs may not give this medication by intravenous route.				