Mercy EMS Education

Clinical Operations

Sept 28, 2026



All Magnesium must be diluted

- Magnesium must **ALWAYS** be diluted.
- Please see the RED lettering on our vials.
- Complications of undiluted magnesium include cardiac arrest.

Missouri Scope of Practice Update

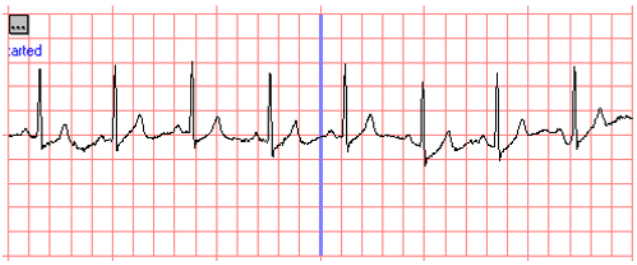
- The Missouri State EMS Board has published the interpretation that the continued use of iGel's for EMT-B providers is within regulation and appropriate.

Atrial fibrillation with RVR demands more blood flow and oxygen that must be carried to the cardiac tissue.

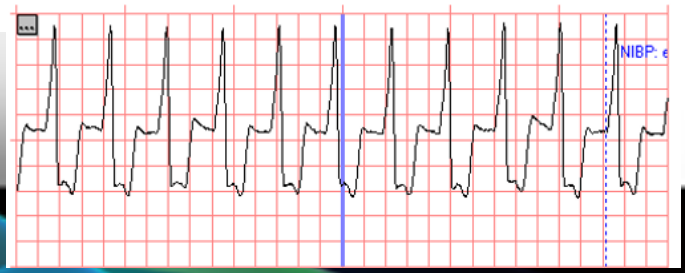
- Aged hearts that may have some coronary disease with not tolerate this stress and develop some ischemic changes or ST changes (i.e. "demand ischemia").
- This is why we are aggressive in controlling the rate in A-fib with RVR.
- This is why we perform follow up or serial EKG's to recognize some of these ST or ischemic changes even after they have slowed. (these changes can persist for min to hours after)
- If a slowed rate shows signs of STEMI (even if believed to be demand ischemic changes) – please activate as a STEMI. (if we are seeing ischemia, they likely have significant coronary disease - chronic or acute).

Epinephrine IV should always be given slow IV push. Push dose pressors @ 1:100,000 is safer but caution should be taken with all epinephrine.

- 30's y/o patient before 1:10,000 IV epinephrine



- After 1:10,000 IV epinephrine



Mercy