

Drugs	Addition/update of guidance and rationale
	<ul style="list-style-type: none"> ● The adult dose for bradycardia has changed to 600 micrograms to reflect current supply of 600 microgram ampoules. However, it can be given in aliquots of either 500 or 600 micrograms to a maximum of 3 milligrams if supply changes.
Benzylicillin	<ul style="list-style-type: none"> ● No significant changes.
Chlorphenamine (Chorpheniramine, Piriton)	<ul style="list-style-type: none"> ● Two additional preparations, tablets and oral solution, have been included. ● Prostatic disease has been included as a caution.
Clopidogrel	<ul style="list-style-type: none"> ● The clopidogrel guideline was first issued in August 2008 subsequent to publication of the 2006 clinical practice guidelines. ● Two major trials have reported their results, both of which support the extension of the use of clopidogrel to the STEMI end of the acute coronary syndrome spectrum. The 2007 update of the American College of Cardiology/American Heart Association STEMI guidelines, and the guidance on acute coronary syndromes published by the Scottish Intercollegiate Guidelines Network (SIGN) last year also recommend clopidogrel (although the SIGN guideline remit is restricted to in-hospital, rather than pre-hospital care). ● Many cardiac networks are now recommending addition of clopidogrel to the pre-hospital treatment of STEMI patients, and the Joint Royal Colleges Ambulance Liaison Committee Cardiac Sub-Committee also recommended that clopidogrel be added to the prehospital treatment to bring ambulance practice in line with hospital practice (clopidogrel is increasingly being given on arrival in the emergency department). A small number of ambulance services are providing clopidogrel with the agreement of local Cardiac Networks. The clopidogrel drug protocol is now finalised. Based on current best evidence and expert consensus, the Joint Royal Colleges Ambulance Liaison Committee Guideline Development Group are recommending for patients with ST segment elevation myocardial infarction aged 75 years or less: ● 300 mg of clopidogrel orally for patients who are receiving, or where it is anticipated that patients will receive, thrombolysis. ● 600 mg of clopidogrel orally where it is anticipated that patients will undergo primary percutaneous coronary intervention.
Dexamethasone	<ul style="list-style-type: none"> ● Dexamethasone is a new addition for children age one month to six years with moderate to severe croup. ● It is recommended that the IV preparation is administered orally.
Diazepam	<ul style="list-style-type: none"> ● The typographical error published in the 2006 UK Ambulance Service Clinical Practice Guidelines has been amended. The rectal tubes for administration are now specified by milligrams not millilitres. ● The larger dosage table emphasises that the maximum dose for under 2's is 5 milligrams.
Entonox/Nitronox	<ul style="list-style-type: none"> ● No significant changes.
Furosemide	<ul style="list-style-type: none"> ● The ages for contra-indication of administering furosemide has been increased from 16 to 18 years.