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Department of Safety

Division of Fire Standards and Training and Emergency Medical Services

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2009 Approved Medication List for New Hampshire EMS Providers

GENERIC NAME	TRADE NAME
ACETAMINOPHEN	TYLENOL
ACTIVATED CHARCOAL	
ADENOSINE	ADENOCARD
ALBUTEROL	PROVENTIL
AMIODARONE	CORDARONE
AMYL NITRITE	
ASPIRIN	ACETYLSALICYLIC ACID
ATROPINE	
ATROPINE (AUTOINJECTOR)	ATROPEN, ATROPEN JR.
BUMETANIDE	BUMEX
CALCIUM CHLORIDE	
DEXTROSE	GLUCOSE
DIAZEPAM	VALIUM
DILTIAZEM	CARDIZEM, DILACOR, TIAZAC
DIPHENHYDRAMINE	BENADRYL
DOLASETRON	ANZEMET
DOPAMINE	
EPINEPHRINE	
EPINEPHRINE (AUTOINJECTOR)	EPI-PEN, EPI-PEN JR.
ETOMIDATE	AMIDATE
FENTANYL	SUBLIMAZE
FLUMAZENIL	ROMAZICON
FUROSEMIDE	LASIX
GRANISETRON	KYTRIL
GLUCAGON	
HALOPERIDOL	HALDOL
HEPARIN	
HYDROXOCOBALAMIN	CYANOKIT®
IBUPROFEN	MOTRIN
IPRATROPIUM BROMIDE	ATROVENT
KETOROLAC	TORADOL
LEVALBUTEROL	ZOPENEX
LIDOCAINE	
LORAZEPAM	ATIVAN
MAGNESIUM SULFATE	
MARK-1 KITS	
METHYLPREDNISOLONE	SOLUMEDROL

Fire Training – Certification – Fire Academy – Emergency Medical Services

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www.state.nh.us/safety/fst

METOCLOPRAMIDE	REGLAN
METOPROLOL	LOPRESSOR
MIDAZOLAM	VERSED
MORPHINE	
NALOXONE	NARCAN
NITROGLYCERIN	TRIDIL, NITROBID, NITROSTAT
NITROUS OXIDE PREMIXED WITH OXYGEN	NITRONOX®
NOREPINEPHRINE	LEVOPHED
ONDANSETRON	ZOFRAN
OXYTOCIN	PITOCIN
PHENYLEPHRINE	NEO-SYNEPHRINE
PRALIDOXIME	2-PAM, PROTOPAM CHLORIDE
PRALIDOXIME (AUTOINJECTOR)	2-PAM, PROTOPAM CHLORIDE
PROCHLORPERAZINE	COMPAZINE
PROPARACAINE	ALCAINE
ROCURONIUM	ZEMURON
SODIUM BICARBONATE	
SODIUM NITRITE	
SODIUM THIOSULFATE	
SUCCINYLBCHOLINE	ANECTINE
TETRACAINE	
VASOPRESSIN	
VECURONIUM	NORCURON
VERAPAMIL	CALAN

APPROVED INTERFACILITY MEDICATIONS

NH Protocol enables paramedics to continue medications that are not within their routine scope of practice, during an interfacility transport, provided that the medication was ordered and initiated prior to transport. The paramedic must proactively obtain working knowledge and education of any such medication –through such means as medication manuals or software, discussion with sending clinicians, discussion with medical director, etc. – prior to transporting the patient. Those medications identified by the NH EMS Medical Control Board as posing an increased risk of untoward effects such as paralytics, some sedatives, and vasoactive medications will also require completion of a NHBEMS approved education program. Paramedics must refuse to transport patients that have a level of acuity and/or medication regimen that the paramedic is not comfortable with, and work with the sending facility to acquire optimal staffing (such as sending nursing staff).