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### CHANGE LOG

<b>Published Date</b>	<b>Status</b>	<b>Section and Subsection Affected</b>	<b>Description of Change(s)</b>
07/01/2024	Addition Revision	POLICY I.C.4b POLICY I.D.1a, b POLICY III.	<ul style="list-style-type: none"><li>• Added "i-gel"</li><li>• Added "EMSA approved tourniquets only"</li><li>• Added "per Ref. No. 1370, Medical Control Guideline: Traumatic Hemorrhage Control (EMSA approved dressings only)"</li><li>• Revision of "EMS Agency Approval" to "EMS Agency Notification"</li></ul>