

OREGON EMS PROVIDER SCOPE AND PRACTICE

- ❑ The Oregon Medical Board has established a scope of practice for pre-hospital care. EMS responders may provide pre-hospital care as an incident of the operation of ambulance services and as incidents of other public or private safety duties, and is not limited to "emergency care" as defined in OAR 847-035-0001(5).
- ❑ **The scope of practice for EMS responders is not intended as statewide standing orders or protocols. The scope of practice is the maximum functions which may be assigned to EMS responders by a Board-approved supervising physician.**

EMR	<ul style="list-style-type: none"> ❑ Conduct primary and secondary patient examinations. ❑ Take and record vital signs ❑ Utilize noninvasive diagnostic devices in accordance with manufacturer's recommendation ❑ Open and maintain an airway by positioning the patient's head ❑ Provide external cardiopulmonary resuscitation and obstructed airway care for infants, children, and adults ❑ Provide care for musculoskeletal injuries ❑ Assist with pre-hospital childbirth ❑ Complete a clear and accurate pre-hospital emergency care report form on all patient contacts and provide a copy of that report to the senior emergency medical services provider with the transporting ambulance. ❑ Administer medical oxygen Maintain an open airway through the use of: <ul style="list-style-type: none"> ○ A nasopharyngeal airway device ○ A non-cuffed oropharyngeal airway device. ○ A pharyngeal suctioning device. 	<ul style="list-style-type: none"> ❑ Operate a bag mask ventilation device with reservoir ❑ Provision of care for suspected medical emergencies, including administering liquid oral glucose for hypoglycemia ❑ Prepare and administer aspirin by mouth for suspected myocardial infarction (MI) in patients with no known history of allergy to aspirin or recent gastrointestinal bleed ❑ Administer epinephrine by automatic injection device for anaphylaxis ❑ Perform cardiac defibrillation with an automatic or semi-automatic defibrillator, only when the EMR has successfully completed a Section-approved course of instruction in the use of the automatic or semi-automatic defibrillator; and complies with the periodic requalification requirements for automatic or semi-automatic defibrillator as established by the Section. 	EMR
EMT	<ul style="list-style-type: none"> ❑ Perform all procedures that an EMR can perform ❑ Ventilate with a non-invasive positive pressure delivery device ❑ Insert a cuffed pharyngeal airway device in the practice of airway maintenance ❑ Perform tracheobronchial tube suctioning on the endotracheal intubated patient. ❑ Provide care for suspected shock. ❑ Provide care for suspected medical emergencies, including. <ul style="list-style-type: none"> ○ Obtaining a capillary blood specimen for blood glucose monitoring ○ Prepare and administer epinephrine by subcutaneous injection, intramuscular injection or automatic injection device for anaphylaxis ○ Administer activated charcoal for poisonings. ○ Prepare and administer nebulized Albuterol sulfate treatments for known asthmatic and chronic obstructive pulmonary disease (COPD) patients suffering from suspected bronchospasm. ❑ Perform cardiac defibrillation with an automatic or semi-automatic defibrillator ❑ Transport stable patients with saline locks, heparin locks, foley catheters, or in-dwelling vascular devices. 	<ul style="list-style-type: none"> ❑ Assist the on-scene Advanced EMT, EMT-Intermediate or Paramedic by: <ul style="list-style-type: none"> ○ Assembling and priming IV fluid administration sets and ○ Opening, assembling and uncapping preloaded medication syringes and vials. ❑ Perform other emergency tasks as requested if under the direct visual supervision of a physician and then only under the order of that physician ❑ Complete a clear and accurate pre-hospital emergency care report form on all patient contacts ❑ Assist a patient with administration of sublingual nitroglycerine tablets or spray and with metered dose inhalers that have been previously prescribed by the patient's personal physician and that are in possession of the patient at the time the EMT is summoned to assist. ❑ In the event of a release of organophosphate agents the EMT-Basic, who has completed Section-approved training, may administer atropine sulfate and pralidoxime chloride by autoinjector, using protocols approved by the Section and adopted by the supervising physician. ❑ In the event of a declared Mass Casualty Incident (MCI) as defined in the local Mass Casualty Incident plan, monitor patients who have running isotonic intravenous fluids flowing. 	EMT

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AEMT	<ul style="list-style-type: none"> <input type="checkbox"/> Perform all procedures that an EMT can perform <input type="checkbox"/> Initiate and maintain peripheral intravenous (I.V.) lines. <input type="checkbox"/> Initiate saline or similar locks. <input type="checkbox"/> Draw peripheral blood specimens. <input type="checkbox"/> Initiate and maintain an intraosseous infusion in the pediatric patient <input type="checkbox"/> Prepare and administer the following medications under specific written protocols authorized by the Supervising Physician or direct orders from a licensed Physician: 	<ul style="list-style-type: none"> ○ Physiologic isotonic crystalloid solution. ○ Epinephrine for anaphylaxis. ○ Naloxone hydrochloride. ○ Hypertonic Glucose. ○ Glucagon ○ Nitroglycerine ○ Albuterol (nebulized) ○ Ipratropium bromide (nebulized) ○ Nitrous Oxide for Analgesia. 	AEMT
EMT-I	<ul style="list-style-type: none"> <input type="checkbox"/> Perform all procedures that an AEMT can perform <input type="checkbox"/> Initiate and maintain an intraosseous infusion. <input type="checkbox"/> Prepare and administer the following medications under specific written protocols authorized by the supervising physician, or direct orders from a licensed physician <ul style="list-style-type: none"> ○ Epinephrine for all indications ○ Vasopressin ○ Atropine sulfate ○ Lidocaine, (includes IO anesthetic) ○ Amiodarone ○ Morphine ○ Nalbuphine Hydrochloride ○ Ketorolac tromethamine ○ Fentanyl ○ Diphenhydramine ○ Furosemide ○ Ondansetron <input type="checkbox"/> Initiate electrocardiographic monitoring and interpret presenting rhythm <input type="checkbox"/> Perform cardiac defibrillation with a manual defibrillator 	<ul style="list-style-type: none"> <input type="checkbox"/> Insert an orogastric tube <input type="checkbox"/> Prepare and administer immunizations in the event of an outbreak or epidemic as declared by the Governor of the state of Oregon, the State Public Health Officer or a county health officer, as part of an emergency immunization program, under the agency's supervising physician's standing order <input type="checkbox"/> Prepare and administer immunizations for seasonal and pandemic influenza vaccinations according to the CDC Advisory Committee on Immunization Practices (ACIP), and/or the Oregon State Public Health Officer's recommended immunization guidelines as directed by the agency's supervising physician's standing order; <input type="checkbox"/> Maintain during transport any intravenous medication infusions or other procedures which were initiated in a medical facility, and if clear and understandable written and verbal instructions for such maintenance have been provided by the physician, nurse practitioner or physician assistant at the sending medical facility. 	EMT-I
PARAMEDIC	<ul style="list-style-type: none"> <input type="checkbox"/> Perform all procedures that an Oregon-EMT-Intermediate can perform <input type="checkbox"/> Initiate the following airway management techniques <ul style="list-style-type: none"> ○ Endotracheal intubation; ○ Cricothyrotomy; and ○ Transtracheal jet insufflation which may be used when no other mechanism is available for establishing an airway. <input type="checkbox"/> Initiate a nasogastric tube <input type="checkbox"/> Provide advanced life support in the resuscitation of patients in cardiac arrest <input type="checkbox"/> Perform emergency cardioversion in the compromised patient <input type="checkbox"/> Attempt external transcutaneous pacing of bradycardia that is causing hemodynamic compromise. 	<ul style="list-style-type: none"> <input type="checkbox"/> Electrocardiographic interpretation including multi-lead electrocardiograms. <input type="checkbox"/> Initiate needle thoracentesis for tension pneumothorax in a prehospital setting <input type="checkbox"/> Access indwelling catheters and implanted central IV ports for fluid and medication administration <input type="checkbox"/> Initiate placement of a urinary catheter for trauma patients in a prehospital setting who have received diuretics and where the transport time is greater than thirty minutes <input type="checkbox"/> Initiate or administer any medications or blood products under specific written protocols authorized by the supervising physician, or direct orders from a licensed physician providing that the EMT-P has had adequate and appropriate instruction, including the risks, benefits, and use of the medication or blood product. 	PARAMEDIC

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Clinical Care Pearls

- ❑ Supervising physicians may not assign functions exceeding the scope of practice; however, they may limit the functions within the scope at their discretion
- ❑ An Oregon-EMS Provider, acting through standing orders, shall respect the patient's wishes including life-sustaining treatments. EMS Providers shall request and honor life-sustaining treatment orders executed by a physician, nurse practitioner or physician assistant if available. A patient with life-sustaining treatment orders always requires respect, comfort and hygienic care.