

Subject: Scope of Practice/Procedure – ALS  
**Paramedic Scope of Practice**

Associated Policies:

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I. Authority and Reference

- A. Division 2.5 of Health and Safety Code
- B. California Code of Regulations, Title 22
- C. North Coast EMS Policies and Procedures

II. Purpose

To define the regional paramedic scope of practice. A paramedic shall be affiliated with an approved paramedic service provider in order to perform the scope of practice.

III. Procedure

- A. While at the scene of an emergency, and during transport of the sick and injured, or as a part of their training or continuing education, a paramedic or a paramedic student may, in accordance with North Coast EMS policies and procedures and California State law, do the following:

Basic Scope of Practice:

- 1. Perform any skill identified in the EMT-I scope of practice or any activity identified in the scope of practice of an Advanced EMT (AEMT).
- 2. Utilize electrocardiographic devices and monitor electrocardiograms, including 12-Lead electrocardiograms.
- 3. Perform defibrillation, synchronized cardioversion, and external pacing.
- 4. Visualize the airway by use of the laryngoscope and remove foreign body(ies) with Magill forceps.
- 5. Perform pulmonary ventilation by use of lower airway multi-lumen adjuncts(Combitube), the esophageal airway, stomal intubation, and adult oral endotracheal intubation.
- 6. Utilize mechanical ventilation devices for continuous positive airway pressure (CPAP)/bi-level positive airway pressure (PBAP) and positive end expiratory pressure (PEEP) in the spontaneously breathing patient.
- 7. Institute intravenous (IV) catheters, saline locks, needles, or cannulae (IV lines), in peripheral veins and monitor and administer medications through pre-existing vascular access.
- 8. Institute intraosseous (IO) needles or catheters.
- 9. Administer IV or IO glucose solutions or isotonic balanced salt solutions.
- 10. Obtain venous blood samples.

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11. Use laboratory devices, including point of care testing, for pre-hospital screening use to measure lab values including, but not limited to: glucose, capnometry, capnography, and carbon monoxide.
12. Utilize Valsalva maneuver.
13. Perform percutaneous needle cricothyrotomy.
14. Perform needle thoracostomy.
15. Perform nasogastric and orogastric tube insertion and suction.
16. Monitor thoracostomy tubes.
17. Monitor and adjust IV solutions containing potassium, equal to or less than ( $\leq$ ) 40 mEq/L.
18. Administer approved medications by the following routes: IV, IO, intramuscular, subcutaneous, inhalation, transcutaneous, rectal, sublingual, endotracheal, intranasal, oral or topical.

Administer, using prepackaged products when available, the following medications:

1. 10%, 25% and 50% Dextrose
2. Dextrose 10%/250cc IV bag
3. Activated Charcoal
4. Adenosine
5. Aerosolized or nebulized beta-2 specific bronchodilators
6. Amiodarone
7. Aspirin
8. Atropine sulfate
9. Pralidoxime Chloride
10. Calcium Chloride
11. Diazepam
12. Diphenhydramine hydrochloride
13. Dopamine hydrochloride
14. Epinephrine
15. Fentanyl
16. Glucagon
17. Ipratropium bromide
18. Lorazepam
19. Midazolam
20. Lidocaine hydrochloride
21. Magnesium sulfate
22. Morphine sulfate
23. Naloxone hydrochloride
24. Nitroglycerine Spray

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- 25. Ondansetron
- 26. Sodium bicarbonate

Local Optional Scope Practice:

The Local Optional Scope of Practice is defined as any medication and/or procedure approved for use by North Coast EMS beyond the Basic Scope of Practice as listed in the California Code of Regulations, Title 22.

All Local Optional Scope of Practice can only be used by provider agencies with North Coast EMS approval and agency training.

- 1. Furosimide
- 2. Oxytocin
- 3. Ketamine
- 4. I-Gel supraglottic airways – Adult and Pediatric
- 5. Tranexamic Acid (TXA) (Cyklokapron)
- 6. Monitor Heparin drips during Interfacility Transports
- 7. Monitor Nitroglycerin drips during Interfacility Transports
- 8. Monitor IV blood and blood products during Interfacility Transports
- 9. Monitor IV antibiotics during Interfacility Transports
- 10. Monitor Fentanyl drips during Interfacility Transports

Approved By	<b>Larry Karsteadt</b> (Signature on File at EMS Agency)	Revision
EMS Director		<b>11/15/2021</b>
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