

Subject: Scope of Practice – BLS
 Emergency Medical Technician (EMT)

Purpose	To define the regional Emergency Medical Technician (EMT) scope of practice.
Procedures	<p>A. During training, while at the scene of an emergency, during transport of the sick or injured, or during interfacility transfer, a certified EMT or supervised EMT student is authorized to do any of the following:</p> <ol style="list-style-type: none"> 1. Evaluate the ill and injured. 2. Render basic life support, rescue and emergency medical care to patients. 3. Obtain diagnostic signs to include but not be limited to temperature, blood pressure, pulse and respiration rates, pulse oximetry, level of consciousness, and pupil status. 4. Perform cardiopulmonary resuscitation, including the use of mechanical adjuncts to basic cardiopulmonary resuscitation. 5. Administer oxygen. 6. Use the following adjunctive airway and breathing aids: <ol style="list-style-type: none"> a. oropharyngeal airway. b. nasopharyngeal airway. c. suction devices. d. basic oxygen delivery devices for supplemental oxygen therapy including, but not limited to, humidifiers, partial rebreathers, and venturi masks. e. Manual and mechanical ventilating devices designed for prehospital use including Continuous Positive Airway Pressure (CPAP). 7. Use various types of stretchers and spinal motion restriction or immobilization devices. 8. Provide initial prehospital emergency care to patients, including, but not limited to: <ol style="list-style-type: none"> a. Bleeding control through the application of tourniquets. b. Use of hemostatic dressings from a list approved by the Authority. c. Spinal motion restriction or immobilization. d. Seated spinal motion restriction or immobilization. e. Extremity splinting and f. Traction splinting. g. Administer oral glucose and sugar solutions. h. Extricate entrapped people. i. Perform field triage. j. Transport patients. k. Apply mechanical patient restraint.

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	<ol style="list-style-type: none"> l. Set up for ALS procedures, under the direction of an Advanced EMT or Paramedic. m. Perform automated external defibrillation n. Assist patients with the administration of physician-prescribed devices, including, but not limited to, patient-operated medication pumps, sublingual nitroglycerin, and self-administered emergency medications, including epinephrine devices. <p>B. In addition, a certified EMT or a supervised EMT student who is working as part of the organized EMS system (i.e., fire department as a volunteer or paid position, ambulance company) and in the prehospital setting and/or during an interfacility transport to:</p> <ol style="list-style-type: none"> 1. Monitor intravenous lines delivering glucose solutions or isotonic balanced salt solutions including Ringer's lactate for volume replacement. Monitor, maintain, and adjust, if necessary, in order to maintain, a pre-set rate of flow and turn off the flow of intravenous fluid. 2. Transfer a patient, who is deemed appropriate for transfer by the transferring physician, and who has nasogastric (NG) tubes, gastrostomy tubes, heparin locks, foley catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding arterial lines. 3. Administer Narcan® by intranasal route for suspected narcotic overdose. 4. Administer epinephrine by auto-injector for suspected anaphylaxis and/or severe asthma and 5. Perform finger stick blood glucose testing 6. Administer aspirin
<p>Special Information</p>	<p>EMT scope of practice during transfers of patients between facilities or when transporting a patient from home to hospital/hospital to home cannot exceed the EMTs scope of practice with the below exemptions.</p> <p>A. If the patient is receiving a medication which is outside the EMT’s scope of practice, but that medication is being delivered either by dermal patch, implant or patient-controlled pump, the EMT can accept the patient for transfer or transport without the removal or discontinuance of the medication. If the dermal patch, implant, or patient-controlled pump malfunctions or is suspected in a change in the patient’s condition (i.e., hypotension or decrease in mentation) the dermal patch can be removed or the device placed on stand-by.</p>