

Oregon Public Health  
Emergency Medical Services  
PO Box 14450  
Portland, OR 97293

| Current <b>scope of practice</b> for emergency procedures to be performed by emergency medical technicians in Oregon that are authorized by the supervising physician.               | FR  | B | I | P |
|--|-----|---|---|---|
| 1. Conduct primary and secondary examinations  | X   | X | X | X |
| 2. Take and record vital signs   | X   | X | X | X |
| 3. <b>Utilize noninvasive diagnostic devices in accordance with manufacturer's recommendation</b>  | X   | X | X | X |
| 4. Basic airway management, including, but not limited to:   |     |   |   |   |
| a. Open and maintain an airway by positioning the patient's head   | X   | X | X | X |
| b. Oropharyngeal and nasopharyngeal airways  | Xa  | X | X | X |
| c. Pharyngeal suctioning   | Xa  | X | X | X |
| 5. Advanced airway management, including, but not limited to:  |     |   |   |   |
| a. Pharyngeal esophageal airway devices  |     | X | X | X |
| b. Endotracheal intubation   |     |   |   | X |
| c. Insert LMA  |     |   |   | X |
| d. Needle cricothyrotomy   |     |   |   | X |
| e. Transtracheal jet insufflation  |     |   |   | X |
| f. Tracheal suctioning   |     |   |   | X |
| g. Orogastric tubes  |     |   | X | X |
| h. Nasogastric tubes   |     |   |   | X |
| 6. Administration of medical oxygen with cannulas or masks   | Xa  | X | X | X |
| 7. Use of bag -mask ventilation device with reservoir  | Xa  | X | X | X |
| 8. Obstructed airway/cardiopulmonary resuscitation - infants, children, adults   | X   | X | X | X |
| 9. Provide care for soft tissue injuries   | X   | X | X | X |
| 10. Provide care for suspected fractures   | X   | X | X | X |
| 11. Provide care for shock including the use of the pneumatic anti-shock garment   |     | X | X | X |
| 12. Complete a clear and accurate prehospital emergency care report form on all patient contacts and provide a copy of that report to the senior EMT with the transporting ambulance | X   | X | X | X |
| 13. Provide care for suspected medical emergencies, including:   |     |   |   |   |
| a. Obtaining a peripheral blood specimen for blood glucose monitoring, obtained via finger-stick, heel-stick, or earlobe-puncture  |     | X | X | X |
| b. Administer liquid oral glucose for hypoglycemia   | Xa  | X | X | X |
| c. Administer Epinephrine by subcutaneous or automatic injection device for anaphylaxis (automatic injection device <i>only</i> for FR)  | Xa  | X | X | X |
| d. Administer activated charcoal, following local written protocol   |     | X | X | X |
| 14. Assist with prehospital childbirth   | X   | X | X | X |
| 15. Cardiac defibrillation (AED/SAD <i>only</i> for EMT-B)   | Xab | X | X | X |
| 16. Emergency cardioversion  |     |   |   | X |
| 17. Initiate electrocardiograph monitoring and interpret presenting rhythms  |     |   | X | X |
| 18. Transcutaneous cardiac pacing  |     |   |   | X |

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| 19. Initiate and maintain peripheral intravenous therapy   |    |    | X | X |
| 20. Initiate saline or similar locks   |    |    | X | X |
| 21. Initiate intraosseous infusion   |    |    | X | X |
| 22. Initiate placement of femoral intravenous line   |    |    |   | X |
| 23. Infuse following intravenous fluids, or combinations thereof, including:   |    |    |   |   |
| a. Dextrose 5% water   |    |    | X | X |
| b. Lactated Ringers  |    |    | X | X |
| c. Normal Saline   |    |    | X | X |
| d. Any physiologic isotonic crystalloid solution   |    |    | X | X |
| 24. Draw peripheral intravenous blood specimens  |    |    | X | X |
| 25. Administer the following medications under specific written protocols authorized by the supervising physician, or direct orders from a licensed physician:         |    |    |   |   |
| a. Vasoconstrictors:   |    |    |   |   |
| i. Epinephrine 1:10,000  |    |    | X | X |
| ii. Vasopressin  |    |    | X | X |
| b. Antiarrhythmics:  |    |    |   |   |
| i. Atropine sulfate  |    |    | X | X |
| ii. Lidocaine  |    |    | X | X |
| iii. Amiodarone  |    |    | X | X |
| c. Antidotes:  |    |    |   |   |
| i. Naloxone hydrochloride  |    |    | X | X |
| d. Antihyperglycemics:   |    |    |   |   |
| i. Hypertonic glucose  |    |    | X | X |
| ii. Glucagon   |    |    | X | X |
| e. Vasodilators:   |    |    |   |   |
| Nitroglycerine   |    | Xd | X | X |
| f. Nebulized bronchodilators :   |    |    |   |   |
| i. Albuterol   |    |    | X | X |
| ii. Ipratropium bromide  |    |    | X | X |
| iii. Metered dose inhaler  |    | Xd |   |   |
| g. Analgesics:   |    |    |   |   |
| i. Aspirin   |    | Xc | X | X |
| ii. Morphine   |    |    | X | X |
| iii. Nalbuphone Hydrochloride  |    |    | X | X |
| iv. Ketorolac tromethamine   |    |    | X | X |
| h. Antihistamine:  |    |    |   |   |
| i. Diphenhydramine   |    |    | X | X |
| i. Diuretic:   |    |    |   |   |
| i. Furosemide  |    |    | X | X |
| 26. Initiate or administer any medication or blood product   |    |    |   | X |
| 27. Transport stable patients with saline locks, heparin locks, foley catheters or in-   |    | X  | X | X |

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| dwelling vascular devices  |           |          |          |          |
| 28. Maintain intravenous medication infusions and other procedures initiated in a medical facility with appropriate written instructions from the sending facility     |           |          | X        | X        |
| 29. Initiate needle decompression for tension pneumothorax   |           |          |          | X        |
| 30. Initiate placement of a urinary catheter for certain trauma patients (see OAR 847-35-030(11)(i))   |           |          |          | X        |
| 31. Perform other emergency tasks by order and under the direct visual supervision of a physician  |           | X        | X        | X        |

- a. FR may perform only when providing care as part of an agency which has a board-approved supervising physician who has issued written standing orders to that FR.
- b. Only if (a) FR has completed a division-approved course in AED use; and (b) complies with periodic requalification requirements.
- c. Only after completing a division-approved course in the administration of the medication.
- d. Assist a patient with administration of sublingual nitroglycerine tablets or spray and with metered dose inhalers that have been previously prescribed by that patient's personal physician and that are in the possession of the patient at the time the EMT-Basic is summoned to assist that patient.

Oregon Revised Statute 682.245 reads in part as follows:

- (1) The Board of Medical Examiners for the State of Oregon shall adopt by rule a scope of practice for emergency medical technicians B, I and P.
- (2) The standing orders for emergency medical technicians may not exceed the scope of practice defined by the board.
- (3) No emergency medical technician shall provide patient care or treatment without written authorization and standing orders from a supervising physician who has been approved by the board.
- (4) The policies and procedures for applying and enforcing scope of practice may be delegated in whole or in part to the Health Division of the Department of Human Resources.

The above listed scope of practice is taken from Oregon Administrative Rule 847-035 dated 12/05.