



**Universal Care:  
SCOPE OF PRACTICE:  
Practice Guideline:**

Legend:  
**EMR** = Emergency Medical Responder, **EMT** = Emergency Medical Technician, **AEMT** = Advanced EMT, **INT** = Intermediate, **PARA** = Paramedic  
 \* = Optional use by a service, \*\* = Additional Skill requiring prior approval  
 (1) = Non-Interpretive, (2) = For CPR Only, (3) = May only use FiO2, rate and volume adjustments in assist control (AC) mode,  
 (4) = No add'l training req'd in code situation, (5) = For Non-Medicated IV's Only, (6) = 2 or less Medicated IV's per patient,  
 (7) = No External Jugular, (8) = Bolus Only, (9) = May choose only one for seizures,  
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AIRWAY / VENTILATION / OXYGENATION	EMR	EMT	AEMT	INT	PARA
Airway – Nasopharyngeal	X	X	X	X	X
Airway – Non-Visualized	X**	X	X	X	X
Airway – Oral (Oropharyngeal)	X	X	X	X	X
Airway Obstruction – Forceps & Laryngoscope (direct visual)		X	X	X	X
Airway Obstruction – Manual	X	X	X	X	X
Bag Valve Mask (BVM)	X	X	X	X	X
Capnography, End Tidal CO2 Monitoring		X**(1)	X**(1)	X*	X*
Chest Decompression – Needle				X	X
Chest Seal-Vented Preferred		X	X	X	X
CPAP		X**	X**	X**	X**
Gastric Decompression – For Non-Visualized Airway with Gastric Access	X**	X**	X**	X**	X*
Gastric Decompression – NG/OG Tube					X*
Intubation – Endotracheal					X
Manual Airway Maneuvers	X	X	X	X	X
Oxygen Therapy – Tracheal Tube	X	X	X	X	X
Oxygen Therapy – Nebulizer	X**	X	X	X	X
Oxygen Therapy – Nasal Cannula	X	X	X	X	X
Oxygen Therapy – Non-Rebreather Mask	X	X	X	X	X
Pulse Oximetry	X**	X*	X*	X*	X*
Suctioning – Upper Airway (Soft & Rigid)	X	X	X	X	X

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 Approved: Program Director Sternig, RN

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<b>CARDIOVASCULAR / CIRCULATION</b>	<b>EMR</b>	<b>EMT</b>	<b>AEMT</b>	<b>INT</b>	<b>PARA</b>
12, 15, or 18 Lead ECG		X**(1)	X**(1)	X	X
Cardiopulmonary Resuscitation (CPR)	X	X	X	X	X
Cardioversion – Electrical				X	X
CPR Mechanical Device	X**	X**	X**	X**	X**
Defibrillation – Automated / Semi-Automated (AED)	X	X	X	X*	X*
Defibrillation – Manual		X**	X**	X	X
ECG Monitor		X*(1)	X*(1)	X	X
Hemorrhage Control – Direct Pressure	X	X	X	X	X
Hemorrhage Control – Hemostatic Agents	X**	X**	X**	X**	X*
Hemorrhage Control – Pressure Point	X	X	X	X	X
Hemorrhage Control – Tourniquet	X**	X**	X**	X**	X*
Pericardiocentesis					X
Transcutaneous Pacing				X	X
Valsalva Maneuver				X	X

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<b>IMMOBILIZATION</b>	<b>EMR</b>	<b>EMT</b>	<b>AEMT</b>	<b>INT</b>	<b>PARA</b>
Selective Spinal Immobilization		X**	X**	X**	X*
Spinal Immobilization- Cervical Collar	X**	X	X	X	X
Spinal Immobilization – Long Board	X**	X	X	X	X
Spinal Immobilization – Manual Stabilization	X	X	X	X	X
Spinal Immobilization – Seated Patient (KED, etc)	X**	X	X	X	X
Splinting – Manual	X	X	X	X	X
Splinting – Pelvic Wrap/PASG		X*	X*	X*	X*
Splinting – Rigid	X	X	X	X	X
Splinting – Soft	X	X	X	X	X
Splinting – Traction	X**	X	X	X	X
Splinting – Vacuum	X*	X*	X*	X*	X*
<b>ASSISTED PATIENT MEDICATIONS</b>	<b>EMR</b>	<b>EMT</b>	<b>AEMT</b>	<b>INT</b>	<b>PARA</b>
Glucagon Auto-Injector	X**	X*	X*	X*	X*
Epinephrine Auto-Injector		X*	X*	X*	X*
Nitroglycerin		X*	X*	X*	X*
Oral Glucose	X*	X*	X*	X*	X*
Any Patient Prescribed Emergency Medication with Medical Control Approval				X*(13)	X*(13)

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MEDICATION ADMINISTRATION ROUTES	EMR	EMT	AEMT	INT	PARA
Aerosolized/Nebulized	X**	X	X	X	X
Auto-Injector	X**	X	X	X	X
Endotracheal Tube (ET)				X	X
Intramuscular (IM)		X	X	X	X
Intranasal (IN)	X**	X**	X**	X**	X**
Intraosseous (IO)			X**	X	X
Intravenous (IV)			X	X	X
Oral (PO)	X	X	X	X	X
Rectal				X	X
Subcutaneous (SQ)		X**	X	X	X
Sub-Lingual (SL)		X	X	X	X
INITIATION / MAINTENANCE / FLUIDS	EMR	EMT	AEMT	INT	PARA
Maintenance – Non-Medicated IV Fluids			X	X	X
IV Pump			X**(5)	X**(5)	X(6)
Intraosseous			X**	X*	X*
Peripheral			X(7)	X	X
PICC Line – Access and Use					X**
Saline Lock			X	X	X

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MEDICATIONS APPROVED PER PROTOCOL	EMR	EMT	AEMT	INT	PARA
Adenosine				X	X
Albuterol	X**	X	X	X	X
Amiodarone				X(8)	X
Aspirin	X**	X	X	X	X
Atropine				X	X
Dextrose			X	X	X
Epinephrine Auto-Injector	X**	X*(10)	X*(10)	X*(10)	X
Epinephrine 1:1000 Manually Drawn		X*(10)	X*(10)	X*(10)	X
Epinephrine 1:10,000				X	X
Fentanyl				X(11)	X
Glucagon		X*	X*	X*	X
Glucose-Oral	X	X	X	X	X
Ipratropium (Atrovent)		X*	X*	X	X
Lidocaine				X(8)	X
Mark I Auto-Injector (or equivalent-for Self & Crew)	X**	X**	X**	X*	X
Midazolam (Versed)				X(9)	X
Morphine				X(11)	X
Naloxone (Narcan)	X**	X	X	X	X
Nitroglycerin			X(12)	X(12)	X
Nitrous Oxide			X**	X**	X
Ondansetron (Zofran)				X**	X
Other Short-Acting Beta Agonist for Asthma		X**	X**	X**	X**

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MISCELLANEOUS	EMR	EMT	AEMT	INT	PARA
Assisted Delivery (childbirth)	X	X	X	X	X
Blood Glucose Monitoring	X**	X	X	X	X
Blood Pressure – Automated	X*	X*	X*	X*	X*
Chest Tube Monitoring					X
Eye Irrigation	X	X	X	X	X
Immunizations		X**	X**	X**	X**
Patient Physical Restraint Application		X	X	X	X
Venous Blood Sampling – Obtaining			X**	X**	X**
Vital Signs	X	X	X	X	X

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