**Protocol Title:** EMS Scope of Practice  

**Original Adoption Date:** 09-26-2014  

**Past Protocol Updates**  

N/A  

**Date of Most Recent Update:** 03-21-2019  

**Medical Director**  

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**Purpose:** To define the scope of practice, by provider level, for Emergency Care Providers.

Approved skills for ECPs, listed by certification level can be found on the Iowa Department of Public Health Website:

**Emergency Medical Technician (EMT)**

The EMT provider level identifies individuals who have successfully completed a program of training that used, as a minimum, the 2005 National Education Standards for the EMT and successfully completed the testing requirements, transition from EMT-I 1985+, or completed the EMT-B to EMT transition requirements. Individuals certified at this level have a certification number identified with the letters “EMT”.

- EMT level providers may not attend a patient receiving IV fluid of ANY type.
- Providers certified at the EMT level may attend patients with Fluid Locked (non-active) IV catheters in place during inter-facility transports.
- The EMT may assist advanced level providers in preparation of IV administration equipment.
- EMT level providers may check patient blood glucose levels only after they have completed departmental training on the procedure.
- EMT level providers may not administer CPAP, or attend patients with CPAP already in place.
- The EMT may assist advanced level providers in preparation of CPAP equipment.
Advanced Emergency Medical Technician (AEMT)

This EMS provider level identifies individuals who have successfully completed a program of training that used, as a minimum, the 2005 National Education Standards for the AEMT or completed the EMT-I to AEMT transition requirements and successfully completed the testing requirements. Providers certified as EMT-P may transition to AEMT. Individuals certified at this level have a certification number identified with the letters “AEMT.”

AEMT level providers may not administer CPAP, or attend patients with CPAP already in place. This restriction does not prevent the EMT from assisting advanced level providers in preparation of CPAP equipment.

AEMT level providers may not access a central line, or attend patients with IV fluids of any type infusing through a central line.

Paramedic

This EMS provider level identifies individuals who have successfully completed a program of training that used, as a minimum, the 2005 National Education Standards for the Paramedic or completed the EMT-P to Paramedic transition requirements and successfully completed the testing requirements. Individuals certified at this level have a certification number identified with the letters “PM.”

Critical Care Paramedic (CCP)

This EMS provider endorsement identifies individuals who hold a valid Paramedic certification and have successfully completed an Iowa approved Critical Care Paramedic program. Individuals holding a valid endorsement as a CCP working for an approved CCP transporting service may perform CCP skills listed on the Iowa Department of Public Health EMS Scope of Practice web page referenced above during inter-facility critical care transport (CCT).

While skill sets are important to identify the need for a Critical Care Paramedic, often times it is the additional education and knowledge base that is required for the safe delivery of care to these critical patients. When possible, a Critical Care Paramedic should be in attendance with any patient who meets the following additional criteria. A non-CCP can attend with the shift supervisor’s approval as long as support staff such as respiratory therapy, NICU or Peds nurses are present to operate equipment the paramedic is not familiar with or credentialed to use.

- Intra-Aortic Balloon Pump.
- Propofol infusion.
- Paralytic infusion.
- Three or more medicated IV infusions.
- Advanced transport isolette.
**Specialty Care Transports (SCT):** Inter-facility transportation of a critically injured or ill patient by ground ambulance at a level of service beyond the scope or training of a Paramedic. SCT transports are necessary when a patient’s condition requires care that must be provided by one or more providers of an appropriate specialty area.

Caring for these patients takes exceptional teamwork and cooperation from multiple disciplines. Routinely these transports may include a specialty nurse trained in pediatric transport, neo-natal transport or respiratory therapists. Life Flight ground nurses may also at times, function as a team member in the transport of these patients.

The pediatric transport nurses, neonatal transport nurses and Life Flight nurses when assuming direct care for the patient, will function under their protocols and transport team medical directors. WDMEMS/Alliance staff will serve an active role in assisting in the care of these patients.

All specialty team transport nurses will keep on file with the department an RN Exemption form which outlines the level of care they are authorized to deliver in a situation where they are not on a specialty team transport and may have to assist departmental staff in the care of a patient (ie: come across an emergency during travel). They will at no time drive or operate the ambulance. Annually, they will complete a vehicle and scene safety orientation provided by the department. Specialty team managers will keep on file all certification and training records for their staff. Credentials for these team members will be maintained by the manager of Life Flight.

In the cases where the additional team member does not hold credentials (RN Exemption) with our department, the Critical Care Paramedic will assume the role of the team leader, and will work in consultation with the additional team members to form and deliver the best plan of care for the patient.