ARTICLE 5. MEDICAL DIRECTION PROTOCOLS FOR EMERGENCY MEDICAL CARE TECHNICIANS

Table 5.1. Arizona Scope of Practice Skills

KEY:
✓ = Arizona Scope of Practice skill
STR = STR skill
* = Already intubated

Airway/Ventilation/Oxygenation		EMT	AEMT	EMT-I(99)	Paramedic
	Airway - esophageal	STR	✓	✓	✓
	Airway - supraglottic	STR	✓	✓	✓
	Airway - nasal	✓	✓	✓	✓
	Airway - oral	✓	✓	✓	✓
	Automated transport ventilator	STR	STR	✓	✓
	Bag-valve-mask (BVM)	✓	✓	✓	✓
	BiPAP/CPAP				✓
	Chest decompression - needle			✓	✓
	Chest tube placement - assist only				STR
	Chest tube monitoring and management				STR
	Cricoid pressure (Sellick's maneuver)	✓	✓	✓	✓
	Cricothyrotomy- needle			STR	✓
	Cricothyrotomy- percutaneous			STR	✓
	Cricothyrotomy- surgical			STR	STR
	Demand valve- manually triggered ventilation	✓	✓	✓	✓
	End tidal CO2 monitoring/capnography			✓	✓
	Gastric decompression - NG tube			✓	✓
	Gastric decompression - OG tube			✓	✓
	Head-tilt chin lift	✓	✓	✓	✓
	Intubation - nasotracheal			STR	✓
	Intubation - orotracheal	STR	STR	✓	✓
	Jaw-thrust	✓	✓	✓	✓
	Jaw-thrust – modified (trauma)	✓	✓	✓	✓
	Medication Assisted Intubation (paralytics)				STR
	Mouth-to-barrier	✓	✓	✓	✓
	Mouth-to-mask	✓	✓	✓	✓
	Mouth-to-mouth	✓	✓	✓	✓
	Mouth-to-nose	✓	✓	✓	✓

	Mouth-to-stoma	✓	✓	✓	✓
	Obstruction - direct laryngoscopy			✓	✓
	Obstruction - manual	✓	✓	✓	✓
	Oxygen therapy - humidifiers	✓	✓	✓	✓
	Oxygen therapy - nasal cannula	✓	✓	✓	✓
	Oxygen therapy - non-rebreather mask	✓	✓	✓	✓
	Oxygen therapy - partial rebreather mask	✓	✓	✓	✓
	Oxygen therapy - simple face mask	✓	✓	✓	✓
	Oxygen therapy - venturi mask	✓	✓	✓	✓
	PEEP - therapeutic			✓	✓
	Pulse oximetry	✓	✓	✓	✓
	Suctioning - upper airway	✓	✓	✓	✓
	Suctioning - tracheobronchial		✓*	✓	✓
Cardiovascular/Circulation		**EMT**	**AEMT**	**EMT-I (99)**	**Paramedic**
	Cardiac monitoring - multiple lead (interpretive)			✓	✓
	Cardiac monitoring - single lead (interpretive)			✓	✓
	Cardiac - multiple lead acquisition (non-interpretive)	STR	STR	✓	✓
	Cardiopulmonary resuscitation	✓	✓	✓	✓
	Cardioversion - electrical			✓	✓
	Carotid massage – (≤17 years)			STR	STR
	Defibrillation - automatic/semi-automatic	✓	✓	✓	✓
	Defibrillation - manual			✓	✓
	Hemorrhage control - direct pressure	✓	✓	✓	✓
	Hemorrhage control - tourniquet	✓	✓	✓	✓
	Internal; cardiac pacing - monitoring only			✓	✓
	Mechanical CPR device	STR	STR	STR	STR
	Transcutaneous pacing - manual			✓	✓
Immobilization		**EMT**	**AEMT**	**EMT-I (99)**	**Paramedic**
	Spinal immobilization - cervical collar	✓	✓	✓	✓
	Spinal immobilization - long board	✓	✓	✓	✓
	Spinal immobilization - manual	✓	✓	✓	✓
	Spinal immobilization - seated patient (KED, etc.)	✓	✓	✓	✓
	Spinal immobilization - rapid manual extrication	✓	✓	✓	✓
	Extremity stabilization - manual	✓	✓	✓	✓
	Extremity splinting	✓	✓	✓	✓
	Splint- traction	✓	✓	✓	✓
	Mechanical patient restraint	✓	✓	✓	✓

	Emergency moves for endangered patients	✓	✓	✓	✓
Medication administration - routes		**EMT**	**AEMT**	**EMT-I (99)**	**Paramedic**
	Aerosolized/nebulized (beta agonist)	STR	✓	✓	✓
	Assisting patient with his/her own prescribed medications (aerosolized/nebulized)	✓	✓	✓	✓
	Assisting patient with his/her own prescribed medications (ASA/Nitro)	✓	✓	✓	✓
	Assisting patient with his/her own prescribed medications (auto-injector)	✓	✓	✓	✓
	Assisting patient with his/her own prescribed medications (hydrocortisone sodium succinate)		✓	✓	✓
	Auto-injector (self or peer)	✓	✓	✓	✓
	Buccal	STR	✓	✓	✓
	Endotracheal tube			✓	✓
	Inhaled self-administered (nitrous oxide)		✓	✓	✓
	Intradermal			STR	STR
	Intramuscular		✓	✓	✓
	Intranasal		✓	✓	✓
	Intravenous push		✓	✓	✓
	Intravenous piggyback			✓	✓
	Intraosseous		STR	✓	✓
	Nasogastric				✓
	Oral	✓	✓	✓	✓
	Rectal		STR	✓	✓
	Small volume nebulizer	STR	✓	✓	✓
	Subcutaneous		✓	✓	✓
	Sublingual		✓	✓	✓
IV initiation/maintenance fluids		**EMT**	**AEMT**	**EMT-I (99)**	**Paramedic**
	Access indwelling catheters and implanted central IV ports				✓
	Central line - monitoring				✓
	Intraosseous - initiation		✓	✓	✓
	Intravenous access		✓	✓	✓
	Intravenous initiation - peripheral	STR	✓	✓	✓
	Intravenous- maintenance of non-medicated IV fluids or capped access	✓	✓	✓	✓
	Intravenous- maintenance of medicated IV fluids			✓	✓
	Umbilical initiation				STR
Miscellaneous		**EMT**	**AEMT**	**EMT-I (99)**	**Paramedic**
	Assisted delivery (childbirth)	✓	✓	✓	✓
	Assisted complicated delivery (childbirth)	✓	✓	✓	✓

	Blood glucose monitoring	✓	✓	✓	✓
	Blood pressure- automated	✓	✓	✓	✓
	Blood pressure- manual	✓	✓	✓	✓
	Eye irrigation	✓	✓	✓	✓
	Eye irrigation (Morgan lens)				STR
	Thrombolytic therapy- initiation				STR
	Urinary catheterization				STR
	Venous blood sampling			✓	✓
	Blood chemistry analysis				STR
	Use/monitoring of agents specified in Table 5.4 during interfacility transports			STR	STR
	Use/monitoring of infusion pump for agent administration during interfacility transports			STR	STR

Table 5.2. Eligibility for Authorization to Administer, Monitor, and Assist in Patient Self-administration of Agents by EMCT Classification; Administration Requirements; and Minimum Supply Requirements for Agents

KEY:

A = Authorized to administer the agent

SVN = Agent shall be administered by small volume nebulizer

MDI = Agent shall be administered by metered dose inhaler

* = Authorized to assist in patient self-administration

[ ] = Minimum supply required if an EMS provider chooses to make the optional agent available for EMCT administration

AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
Adenosine	18 mg	-	-	A	A
Albuterol Sulfate SVN or MDI (sulfite free)	10 mg	A	A	A	A
Amiodarone or Lidocaine	300 mg or 3 prefilled syringes, total of 300 mg and 1 g vials or premixed infusion, total of 2 g	- -	- -	- A	A A
Aspirin	324 mg	A	A	A	A
Atropine Sulfate	3 prefilled syringes, total of 3 mg	-	-	A	A
Atropine Sulfate	Optional [8 mg multidose vial (1)]	-	-	A	A
Atropine Sulfate Auto-Injector	None	A	A	A	A
Atropine Sulfate and Pralidoxime Chloride (Combined) Auto-Injector	None	A	A	A	A
Calcium Chloride	1 g	-	-	-	A
Calcium Gluconate, 2.5% topical gel	Optional [50 g]	A	A	A	A
Charcoal, Activated (without sorbitol)	Optional [50 g]	A	A	A	A
Cyanokit	Optional [5 g]	-	-	-	A
Dexamethasone	Optional [8 mg]	-	-	A	A
Dextrose	50 g	-	A	A	A
Dextrose, 5% in H2O	Optional [250 mL bag (1)]	A	A	A	A
Diazepam or Lorazepam or Midazolam	20 mg 8 mg 10 mg	- - -	- - -	A A A	A A A
Diazepam Rectal Delivery Gel	Optional [20 mg]	-	-	A	A
Diltiazem or Verapamil HCl	25 mg 10 mg	- -	- -	- -	A A
Diphenhydramine HCl	50 mg	-	-	A	A
Dopamine HCl	400 mg	-	-	-	A
Epinephrine Auto-Injector	Optional [2 adult auto-injectors 2 pediatric auto-injectors]	A	A	A	A
Epinephrine HCl, 1:1,000	2 mg	-	A	A	A

Epinephrine HCl, 1:1,000	Optional [30 mg multidose vial (1)]	-	A	A	A
Epinephrine HCl, 1:10,000	5 mg	-	-	A	A
Etomidate	Optional [40 mg]	-	-	-	A
Furosemide or Bumetanide	Optional [100 mg] Optional [4 mg]	- -	- -	A A	A A
Glucagon	2 mg	-	A	A	A
Glucose, oral	Optional [30 gm]	A	A	A	A
Hemostatic Agents	Optional	A	A	A	A
Hydrocortisone Sodium Succinate	Optional	-	*	*	*
Immunizing Agent	Optional	-	-	A	A
Ipratropium Bromide 0.02% SVN or MDI	5 mL	-	-	A	A
Ketamine	Optional [200 mg]	-	-	-	A
Lactated Ringers	1 L bag (2)	A	A	A	A
Magnesium Sulfate	5 g	-	-	-	A
Methylprednisolone Sodium Succinate	250 mg	-	-	A	A
Morphine Sulfate or Fentanyl	20 mg 200 mcg	- -	A -	A A	A A
Nalmefene HCl	Optional [4 mg]	-	A	A	A
Naloxone HCl	10 mg	-	A	A	A
Nitroglycerin Sublingual Spray or Nitroglycerin Tablets	1 bottle 1 bottle	* *	A A	A A	A A
Normal Saline	1 L bag (2) Optional [250 mL bag (1)] Optional [50 mL bag (2)]	A	A	A	A
Ondansetron HCl	Optional [4 mg]	-	-	A	A
Oxygen	13 cubic feet	A	A	A	A
Oxytocin	Optional [10 units]	-	-	A	A
Phenylephrine Nasal Spray 0.5%	Optional [1 bottle]	-	-	A	A
Pralidoxime Chloride Auto-Injector	None	A	A	A	A
Proparacaine Ophthalmic	Optional [1 bottle]	-	-	A	A
Rocuronium	Optional [100 mg]	-	-	-	A
Sodium Bicarbonate 8.4%	Optional [100 mEq]	-	-	A	A
Succinylcholine	Optional [400 mg]	-	-	-	A
Thiamine HCl	100 mg	-	-	A	A
Tuberculin PPD	Optional [5 mL]	-	-	A	A
Vasopressin	Optional [40 units]	-	-	-	A

R9-25-504. Protocol for Selection of a Health Care Institution for Transport

A. Except as provided in subsection (B), an EMCT shall transport a patient accessing emergency medical services through a call to 9-1-1 or a similar public emergency dispatch number to:

1. An emergency receiving facility, or
2. A special hospital that is physically connected to an emergency receiving facility.

B. Under A.R.S. §§ 36-2205(D) and 36-2232(F), an EMCT who responds to a call made to 9-1-1 or a similar public emergency dispatch number may refer, advise, or transport the patient at the scene to a health care institution other than a health care institution specified in subsection (A), if the EMCT determines that:

1. The patient's condition does not pose an immediate threat to life or limb, based on ~~on-line~~ medical direction; and
2. The health care institution is the most appropriate for the patient, based on the following:
   a. The patient's:
      i. Medical condition,
      ii. Choice of health care institution, and
      iii. Health care provider;
   b. The location of the health care institution and the emergency medical resources available at the health care institution; and
   c. A determination by the administrative medical director that the health care institution is able to accept and capable of treating the patient.

C. Before initiating transport of a patient accessing emergency medical services through a call to 9-1-1 or a similar public emergency dispatch number, an EMCT, emergency medical services provider, or ambulance service shall:

1. Notify, by radio or telephone communication, a health care institution that is not an emergency receiving facility of the EMCT's intent to transport the patient to the health care institution; and
2. Receive confirmation of the willingness of the health care institution to accept the patient.

D. An EMCT transporting a patient accessing emergency medical services through a call to 9-1-1 or a similar public emergency dispatch number to a health care institution that is not an emergency receiving facility shall transfer care of the patient to a designee authorized by:

1. A physician,
2. A registered nurse practitioner,
3. A physician assistant, or
4. A registered nurse.

E. An emergency medical services provider or an ambulance service that implements this rule shall make available for Department review and inspection written records relating to the transport of a patient under subsections (B), (C), and (D).