

Table 3: Special Agents Eligible for Administration and Monitoring

The Medical Direction Commission periodically reviews and makes recommendations to the Director of the Arizona Department of Health Services of agents that may be administered or monitored by EMCTs during an interfacility transport or in a hospital setting. An EMCT's administrative medical director may then authorize an EMCT to administer or monitor, through the administrative medical director's delegated authority, an agent approved by the Director.

The following list represents the most recent iteration of the Director-approved list of such special agents. Administrative medical directors may authorize EMCTs operating under their delegated medical authority to administer or monitor any or all of the agents from the list below, consistent with the authorized setting and the EMCT's certification level and required training on each agent.

Table 3A: Agents Eligible for Administration and Monitoring during an Interfacility Transport						
KEY:						
TA = Transport agent that may be administered by an EMCT if approved by administrative medical director						
IP = Agent shall be administered by infusion pump						
SVN = Agent shall be administered by small volume nebulizer						
* = maintenance infusion only						
	AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
1	Amiodarone IP	None	-	-	-	TA
2	Antibiotics	None	-	-	TA	TA
3	Blood	None	-	-	-	TA
4	Calcium Chloride	None	-	-	-	TA
5	Colloids	None	-	-	TA	TA
6	Corticosteroids IP	None	-	-	TA	TA
7	Diltiazem IP	None	-	-	-	TA
8	Diuretics	None	-	-	TA	TA
9	Dopamine HCl IP	None	-	-	-	TA
10	Electrolytes/ Crystalloids (Commercial Preparations)	None	TA	TA	TA	TA
11	Epinephrine IP	None	-	-	TA	TA
12	Fentanyl IP	None	-	-	TA	TA

Table 3A: Agents Eligible for Administration and Monitoring during an Interfacility Transport

KEY:

TA = Transport agent that may be administered by an EMCT if approved by administrative medical director

IP = Agent shall be administered by infusion pump

SVN = Agent shall be administered by small volume nebulizer

* = maintenance infusion only

	AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
13	Fosphenytoin Na IP or Phenytoin Na IP	None	-	-	-	TA
14	Glucagon	None	-	-	TA	TA
15	Glycoprotein IIb/IIIa Inhibitors	None	-	-	-	TA
16	H2 Blockers	None	-	-	TA	TA
17	Heparin Na IP	None	-	-	-	TA
18	Insulin IP	None	-	-	-	TA
19	Lidocaine IP	None	-	-	TA	TA
20	Magnesium Sulfate IP	None	-	-	-	TA
21	Midazolam IP	None	-	-	TA	TA
22	Morphine IP	None	-	-	TA	TA
23	N-acetylcysteine IP*	None	-	-	-	TA
24	Nitroglycerin IV Solution IP	None	-	-	-	TA
25	Norepinephrine IP	None	-	-	-	TA
26	Octreotide IP	None	-	-	-	TA
27	Pantoprazole IP	None	-	-	-	TA
28	Phenobarbital Na IP	None	-	-	-	TA
29	Potassium Salts IP	None	-	-	-	TA
30	Procainamide HCl IP	None	-	-	-	TA

Table 3A: Agents Eligible for Administration and Monitoring during an Interfacility Transport

KEY:

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* = maintenance infusion only

	AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
31	Propofol IP	None	-	-	-	TA
32	Racemic Epinephrine SVN	None	-	-	-	TA
33	Total Parenteral Nutrition, with or without lipids IP	None	-	-	-	TA
34	Vitamins	None	-	-	TA	TA

Table 3B: Agents Eligible for Administration and Monitoring in a Hospital Setting

KEY:

HA = Hospital agent that may be administered by an EMCT if approved by administrative medical director

IP = Agent shall be administered by infusion pump

SVN = Agent shall be administered by small volume nebulizer

* = maintenance infusion only

	AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
1	Antibiotics	None	-	-	-	HA
2	Blood	None	-	-	-	HA
3	Bumetanide	None	-	-	-	HA
4	Dobutamine IP — fixed rate	None	-	-	-	HA
5	Electrolytes/Cryst alloids (Commercial Preparations)	None	-	-	-	HA
6	Fosphenytoin Na IP	None	-	-	-	HA
7	Furosemide	None	-	-	-	HA

Table 3B: Agents Eligible for Administration and Monitoring in a Hospital Setting

KEY:

HA = Hospital agent that may be administered by an EMCT if approved by administrative medical director

IP = Agent shall be administered by infusion pump

SVN = Agent shall be administered by small volume nebulizer

* = maintenance infusion only

	AGENT	MINIMUM SUPPLY	EMT	AEMT	EMT-I (99)	Paramedic
8	H2 Blockers	None	-	-	-	HA
9	Heparin Na IP	None	-	-	-	HA
10	Insulin IP	None	-	-	-	HA
11	Insulin subcutaneous	None	-	-	-	HA
12	Ketorolac	None	-	-	-	HA
13	Labetalol	None	-	-	-	HA
14	Levetiracetam IP	None	-	-	-	HA
15	Metoprolol IV	None	-	-	-	HA
16	Metoprolol Tartrate Table	None	-	-	-	HA
17	Monoclonal Antibodies	None	-	-	-	HA
18	N-acetylcysteine IP*	None	-	-	-	HA
19	Octreotide IP	None	-	-	-	HA
20	Pantoprazole	None	-	-	-	HA
21	Potassium Salts IP — fixed rate	None	-	-	-	HA
22	Remdesivir	None	-	-	-	HA
23	Total Parenteral Nutrition, with or without lipids IP	None	-	-	-	HA
24	Vitamins	None	-	-	-	HA

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