

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	2221.22
	<u>PROGRAM DOCUMENT:</u> Paramedic Scope of Practice	Initial Date:	02/28/94
		Last Approved Date:	06/22/23
		Effective Date:	11/01/23
		Next Review Date:	06/01/25

Signature on File

EMS Medical Director

Signature on File

EMS Administrator

Purpose:

To establish the scope of practice of a Paramedic practicing in Sacramento County. Any activity conducted outside this established scope of practice places the individual's licensure at risk for review in accordance with the California Code of Regulations, Title 22, Division 9, Chapter 4.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Basic Scope of Practice, In addition to the entire EMT Basic Scope of Practice

- A. Administer IV or IO glucose solutions or isotonic balanced saline solutions.
- B. Institute IV catheters, saline locks, needles, or other cannulae (IV lines) in peripheral veins and monitor and administer medications through pre-existing vascular access,
- C. Administer approved medication by the following routes: IV, IO, intramuscular (IM), subcutaneous, inhalation, transcutaneous, sublingual, intranasal, oral, or topical.
- D. Institute intraosseous (IO) needles or catheters.
- E. Use laboratory devices, including point-of-care testing for pre-hospital screening use, to measure lab values including, but not limited to, glucose, capnometry, capnography, and carbon monoxide.
- F. Perform pulmonary ventilation by use of lower airway multi-lumen adjuncts, a perilaryngeal airway, stomal intubation, Continuous Positive Airway Pressure (CPAP), Bi-level Positive Airway Pressure (BiPAP), and adult oral endotracheal intubation.
- G. Perform defibrillation, synchronized cardioversion, and external cardiac pacing.
- H. Utilize electrocardiographic devices and monitor electrocardiograms, including 12-lead electrocardiograms (ECG).
- I. Perform nasogastric tube and orogastric tube insertion and suctioning.
- J. Monitor thoracostomy tubes.
- K. Monitor and adjust IV solutions containing potassium, < 40mEG/L.
- L. Visualize the airway by use of the laryngoscope and remove foreign bodies with Magill forceps.
- M. Perform needle thoracostomy
- N. Perform Valsalva Maneuvers.
- O. Take temperatures

P. Administer the following medications:

1. 10%, 25%, and 50% Dextrose
2. Acetaminophen
3. Adenosine
4. Albuterol
5. Amiodarone
6. Aspirin
7. Atropine Sulfate
8. Diphenhydramine HCl
9. Diazepam (only during SCEMSA recognized shortages or under PD# 8027)
10. Epinephrine
11. Fentanyl Citrate
12. Glucagon
13. Ipratropium Bromide
14. Ketamine
15. Ketorolac
16. Lidocaine HCl
17. Midazolam
18. Morphine Sulfate
19. Naloxone HCl
20. Nitroglycerin preparations: sublingual tablet, spray, or paste
21. Ondansetron
22. Pralidoxime Chloride (2-PAM HCL)
23. Sodium Bicarbonate
24. Tranexamic Acid

NOTE: Providers need to ensure personnel have been fully trained in the basic scope of practice and any local optional scope of practice.