	A06.2 - EMS WORK SCOPE (MEDICATIONS)	
	POLICY	
Version date: 2024-04-04	Effective date: 2024-05-15 (0700)	

NOTES
<ol style="list-style-type: none"> 1. The ERS work scope includes the group of medications that a paramedic may administer (tables A and B). It is based on the paramedic's employment classification, and apply regardless of the individual's CPMB registration level or work scope under another employer (A01). Appendix A groups the medications by employment classification. 2. A physician order is required for all medications administered by paramedics. The ERS medication documents (section M) are a series of standing orders from ERS medical leadership that authorize a paramedic to administer a medication under a specific set of conditions which include the indications, contraindications, route, dosing, and frequency of repeat dosing. 3. Under exigent circumstances, and depending upon their employment classification, a paramedic may receive an order from an ERS medical director or ERS-affiliated physician (A08) to deviate from a standing order, or exceed their routine work scope. This order is given on a one-time basis, is specific to the patient's current situation, and must be documented in the patient care record (PCR) in the required format. <ol style="list-style-type: none"> a. A paramedic with the intermediate work scope may accept an order to vary from the indications, route, dosing, or frequency of repeat dosing specified in a standing order. As well, they may accept an order to administer a medication that is not within their routine work scope. The order must be within the paramedic's scope of practice and competency. b. A paramedic with the primary work scope may accept a physician order to vary the dosing or frequency of repeat dosing (but not the indications or route) specified in a standing order, but cannot accept an order to administer any medication that is not within their routine work scope. Again, the order must be within the paramedic's practice scope and competency. c. A paramedic with the basic work scope may not accept an order to vary any of the conditions specified in a standing order, nor to administer any medication beyond their routine work scope. 4. Paramedics with the primary work scope may administer specified additional medications only when transporting patients for the ERS Adult Transport Team (ATT). A written order from the prescribing health care provider is required. 5. Paramedics with the primary works scope may inject specified intravenous (IV) medications into an intraosseous (IO) device / line established by another health care provider/ 6. ERS <i>requires</i> additional training and maintenance / verification of continuing competency to administer these specified medications. ERS <i>may require</i> additional training and maintenance / verification of continuing competency to administer other medications.

TABLE A - LISTED BY CATEGORY & SUBCATEGORY

CENTRAL NERVOUS SYSTEM	EMR	PCP	ICP
Anesthetic, local	None	None	Lidocaine (<i>IO only</i>)
Analgesic, opioid	None	Fentanyl Morphine ⁴ Hydromorphone ⁴	Fentanyl Morphine
Analgesic, non-narcotic	Acetaminophen ⁶ Ibuprofen ⁶	Acetaminophen Ibuprofen Ketamine (<i>IN only</i>) Ketorolac	Acetaminophen Ibuprofen Ketamine Ketorolac
Antagonist, opioid	Naloxone (<i>IN only</i>) ⁶	Naloxone	Naloxone
Anticonvulsant	None	Midazolam	Midazolam
Antipsychotic / neuroleptic	None	Olanzapine	Haloperidol Olanzapine
Sedative / hypnotic, benzodiazepine	None	Lorazepam Midazolam (<i>excluding procedural sedation</i>)	Lorazepam Midazolam
AUTONOMIC NERVOUS SYSTEM	EMR	PCP	ICP
Adrenergic	Epi-Pen ⁶	Epinephrine (<i>excluding cardiac arrest</i>)	Epinephrine
Anticholinergic	None	None	Atropine
Antihistamines	N/A	Diphenhydramine ⁴	N/A
RESPIRATORY SYSTEM	EMR	PCP	ICP
Bronchodilator	Salbutamol (<i>MDI only</i>) ⁶	Salbutamol	Salbutamol
CARDIOVASCULAR SYSTEM	EMR	PCP	ICP
Antiarrhythmic	None	None	Adenosine Amiodarone
Diuretic	None	None	Furosemide
Nitrate	None	Nitroglycerin	Nitroglycerin
HEMATOLOGICAL SYSTEM	EMR	PCP	ICP
Anticoagulant	None	Enoxaparin	Enoxaparin

Antifibrinolytic	None	Tranexamic acid	Tranexamic acid
Antiplatelet	Acetylsalicylic acid ⁶	Acetylsalicylic acid Ticagrelor	Acetylsalicylic acid Ticagrelor
GASTROINTESTINAL SYSTEM	EMR	PCP	ICP
Antinauseant	None	Dimenhydrinate Metoclopramide	Dimenhydrinate Metoclopramide Ondansetron
LABOR / DELIVERY / POSTPARTUM	EMR	PCP	ICP
Uterotonic	None	Oxytocin	Oxytocin
ELECTROLYTE / SUBSTRATE IMBALANCE	EMR	PCP	ICP
Antihypoglycemic	Glucose ⁶ Glucagon (<i>IN only</i>) ⁶	Glucose Dextrose Glucagon	Glucose Dextrose Glucagon
Crystalloid solution	None	No added electrolytes	Added electrolytes
Electrolyte & vitamin	None	Calcium (<i>PIH only</i>) Magnesium (<i>PIH only</i>)	Calcium Magnesium Sodium bicarbonate
INFECTION / INFLAMMATION	EMR	PCP	ICP
Corticosteroids	None	Hydrocortisone	Hydrocortisone

TABLE B - LISTED ALPHABETICALLY (M-DOCUMENT)

NAME	INDICATION	ROUTE	EMR	PCP	ICP
Acetaminophen (M02.1)	pain, fever	PO	Yes ⁶	Yes	Yes
Acetylsalicylic acid (M37.1)	ACS, STEMI, chest pain	PO	Yes ⁶	Yes	Yes
Adenosine (M01)	PSVT, NCT	IV (IO)	No	No	Yes
Amiodarone (M14)	cardiac arrest, ROSC, WCT	IV (IO)	No	No	Yes
Atropine (M39)	unstable bradycardia	IV (IO)	No	No	Yes
Calcium chloride (M26)	hyperkalemia /	IV (IO)	No	No	Yes
	magnesium toxicity (PIH)	IV (IO)	No	Yes ⁵	Yes
Crystalloid solution (n/a)	no added electrolytes	IV (IO)	No	Yes ⁵	Yes
	added electrolytes	IV (IO)	No	No	Yes
Dextrose (M06.2)	hypoglycemia	IV (IO)	No	Yes ⁵	Yes
Dimenhydrinate (M04.1)	nausea, vomiting	IV (IO) / IM	No	Yes ⁵	Yes
Diphenhydramine (n/a)	allergic reaction	IV / IM / PO	No	Yes ⁴	Yes
Enoxaparin (M43)	STEMI	IV / SC	No	Yes	Yes
Epinephrine (M05)	cardiac arrest	IV (IO)	No	No	Yes
	anaphylaxis	autoinjector	Yes ⁶	Yes	Yes
		IM	No	Yes	Yes
	asthma	IM	No	Yes	Yes
	croup	nebulizer	No	Yes	Yes
Fentanyl (M03.2)	pain	IV (IO) / IM / IN	No	Yes ⁵	Yes
Furosemide (M09)	pulmonary edema	IV (IO)	No	No	Yes
Glucagon (M06.3, M06.4)	hypoglycemia	IN	Yes ⁶	Yes	Yes
		IV (IO) / IM	No	Yes ⁵	Yes
Glucose (M06.1)	hypoglycemia	PO	Yes ⁶	Yes	Yes
Haloperidol (M34)	agitation	IV (IO) / IM	No	No	Yes



Hydrocortisone (M13)	asthma, anaphylaxis, adrenal insufficiency	IV (IO) / IM / SC	No	Yes ⁵	Yes
Hydromorphone (n/a)	pain	IV / IM / PO	No	Yes ⁴	Yes
Ibuprofen (M02.2)	pain, fever	PO	Yes ⁶	Yes	Yes
Ketamine (M17)	pain	IN	No	Yes	Yes
		IV (IO) / IM	No	No	Yes
Ketorolac (M38)	pain	IV (IO) / IM	No	Yes ⁵	Yes
Lidocaine (M25)	anesthesia	IO dwell	No	No	Yes
Lorazepam (M07.5)	anxiety	PO	No	Yes	Yes
Magnesium sulfate (M24)	cardiac arrest	IV (IO)	No	No	Yes
	preeclampsia / eclampsia	IV (IO)	No	Yes ⁵	Yes
Metoclopramide (M04.2)	nausea, vomiting	IV (IO)	No	Yes ⁵	Yes
Midazolam (M07.1)	seizure	IN	No	Yes	Yes
	seizure, chemical restraint, withdrawal, stimulant toxicity	IV (IO) / IM	No	Yes ⁵	Yes
	procedural sedation	IV (IO)	No	No	Yes
Morphine (M03.1)	pain	IV (IO) / IM	No	Yes ⁴	Yes
Naloxone (M11)	opiate / opioid overdose	IN	Yes ⁶	Yes	Yes
		IV (IO) / IM	No	Yes ⁵	Yes
Nitroglycerin (M21)	ACS, STEMI, chest pain	SL, transdermal	No	Yes	Yes
Olanzapine (M22)	Methamphetamine psychosis	PO	No	Yes	Yes
Ondansetron (M04.3)	nausea, vomiting	IV (IO)	No	No	Yes
Oxytocin (M16)	postpartum routine, postpartum hemorrhage	IV (IO)	No	Yes	Yes
Salbutamol (M15)	asthma, bronchospasm	MDI	Yes ⁶	Yes	Yes
		nebulizer	No	Yes	Yes
Sodium bicarbonate (M18)	hyperkalemia	IV (IO)	No	No	Yes

Ticagrelor (M37.2)	ACS	PO	No	Yes	Yes
Tranexamic acid (M28)	traumatic hemorrhage, postpartum hemorrhage	IV (IO)	No	Yes ⁵	Yes

LINKS / REFERENCES

- A01 - EMERGENCY MEDICAL SERVICE OVERVIEW
- A08 - WHO CAN GIVE ORDERS (STANDING ORDERS & DELEGATIONS)

APPROVED BY

	
EMS Medical Director	EMS Associate Medical Director

VERSION CHANGES (refer to X012 for change tracking)

- New (medications removed from A06)
- Inclusion of hydromorphone, morphine, and diphenhydramine for ATT
- Appendix groups work scopes by employment classification

APPENDIX A - WORK SCOPE BY EMPLOYMENT CLASSIFICATION

BASIC WORK SCOPE ⁶

- | | |
|--|---------------------------------------|
| • Acetaminophen | • Glucose |
| • Acetylsalicylic acid | • Ibuprofen |
| • Epinephrine (<i>autoinjector only</i>) | • Naloxone (<i>intranasal only</i>) |
| • Glucagon (<i>intranasal only</i>) | • Salbutamol (<i>MDI only</i>) |

PRIMARY WORK SCOPE

- | | |
|---|--------------------------------|
| • Acetaminophen | • Ketamine |
| • Acetylsalicylic acid | • Ketorolac |
| • Calcium chloride (PIH only) | • Lorazepam |
| • Dextrose | • Magnesium sulfate (PIH only) |
| • Dimenhydrinate | • Metoclopramide |
| • Diphenhydramine ⁴ | • Midazolam |
| • Enoxaparin | • Morphine ⁴ |
| • Epinephrine | • Naloxone |
| • Fentanyl | • Nitroglycerin |
| • Glucagon | • Olanzapine |
| • Glucose | • Oxytocin |
| • Hydrocortisone | • Salbutamol |
| • Hydromorphone ⁴ | • Ticagrelor |
| • Ibuprofen | • Tranexamic acid |
| • Intravenous fluid (no added electrolytes) | |

APPENDIX C - INTERMEDIATE WORK SCOPE

- | | |
|----------------------------|---------------------|
| • Acetaminophen | • Ketamine |
| • Acetylsalicylic acid | • Ketorolac |
| • Adenosine | • Lorazepam |
| • Amiodarone | • Magnesium sulfate |
| • Atropine | • Metoclopramide |
| • Calcium chloride | • Midazolam |
| • Dextrose | • Morphine |
| • Dimenhydrinate | • Naloxone |
| • Enoxaparin | • Nitroglycerin |
| • Epinephrine ⁹ | • Olanzapine |
| • Fentanyl | • Ondansetron |
| • Glucagon | • Oxytocin |
| • Glucose | • Salbutamol |

- Haloperidol
- Hydrocortisone
- Ibuprofen
- Intravenous fluid
- Sodium bicarbonate
- Ticagrelor
- Tranexamic acid