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# NOTICES

## DEPARTMENT OF HEALTH

### Scope of Practice for Emergency Medical Service Providers

[53 Pa.B. 8146]

[Saturday, December 30, 2023]

Under 35 Pa.C.S. Chapter 81 (relating to the Emergency Medical Services System Act) and the Department of Health's (Department) regulations in 28 Pa. Code §§ 1023.24(d)(1), 1023.25(d)(1), 1023.26(d)(1), 1023.27(d)(1), 1023.28(d), 1023.29(d) and 1023.30(e), the Department is publishing the scope of practice for emergency medical responders (EMR), emergency medical technicians (EMT), advanced emergency medical technicians (AEMT), paramedics (P), prehospita1 registered nurses (PHRN), prehospita1 physician extenders (PHPE) and prehospita1 physicians (PHP).

Skills identified may be performed by an emergency medical service (EMS) provider at the provider's level of certification or registration only if the provider has successfully completed the approved education (cognitive, affective and psychomotor) on the specified skill, which includes training to perform the skill on adults, children and infants, as appropriate. EMRs, EMTs, AEMTs and Ps may only perform the skills identified, through either Statewide or other Department-approved protocols, or skills that may be ordered online by a medical command physician.

As the following chart indicates, a PHRN, PHPE and PHP may perform all skills identified as within a P's scope of practice. Each of these EMS providers may perform additional skills as outlined as follows.

A PHRN who is appropriately credentialed by the EMS agency medical director, may perform other services authorized by The Professional Nursing Law (63 P.S. §§ 211—225.5), when authorized by a medical command physician through either online medical command or through the applicable Statewide or Department-approved EMS protocols.

A PHPE who is appropriately credentialed by the EMS agency medical director may perform services within the scope of practice of a physician assistant under the Medical Practice Act of 1985 (63 P.S. §§ 422.1—422.53) or the Osteopathic Medical Practice Act (63 P.S. §§ 271.1—271.18), when authorized by a medical command physician through either online medical command or through applicable Statewide or Department-approved EMS protocols. When a PHPE functions as an EMS provider, the physician supervision requirements applicable to a physician assistant under the Medical Practice Act of 1985 and the Osteopathic Medical Practice Act do not apply.

A PHP who is appropriately credentialed by the EMS agency medical director may perform skills within a Ps scope of practice and other skills within the practice of medicine or osteopathic medicine. A PHP may not perform a skill that the PHP has not been educated and trained to perform.

Under 28 Pa. Code § 1023.1(a)(1)(vi) and (vii) (relating to EMS agency medical director), the EMS agency medical director must make an initial assessment of each EMS provider at or above the AEMT level, and then within 12 months of each prior assessment, to determine whether the EMS provider has the knowledge and skills to competently perform the skills within the EMS provider's scope of practice, and a commitment to adequately perform other functions relevant to the EMS

provider providing EMS at that level. EMS providers at or above the AEMT level may only perform skills that the EMS agency medical director has credentialed them to perform.

Persons with a disability who require an alternate format of this notice (for example, large print, audiotape, Braille) should contact Jenni Hoffman, EMS Program Manager, Department of Health, Bureau of Emergency Medical Services, 1310 Elmerton Avenue, Harrisburg, PA 17110, (717) 787-8740. Persons with a speech or hearing impairment may call by using V/TT at (717) 783-6154 or the Pennsylvania Hamilton Relay Service at (800) 654-5984 (TT).

<i>Category</i>	<i>Skill</i>	<i>EMR</i>	<i>EMT</i>	<i>AEMT</i>	<i>P*</i>
1	Airway/Ventilation/Oxygenation Nonsurgical Supraglottic Airway	No	No	Yes	Yes
2	Airway/Ventilation/Oxygenation Nasopharyngeal	Yes	Yes	Yes	Yes
3	Airway/Ventilation/Oxygenation Oropharyngeal	Yes	Yes	Yes	Yes
4	Airway/Ventilation/Oxygenation Pharyngeal Tracheal lumen	No	No	No	No
5	Airway/Ventilation/Oxygenation BVM-ETT/Nonsurgical Supraglottic Airway	Yes <sup>2</sup>	Yes <sup>2</sup>	Yes	Yes
6	Airway/Ventilation/Oxygenation BVM with in line small volume nebulizer	No	Yes <sup>2</sup>	Yes	Yes
7	Airway/Ventilation/Oxygenation Bag Valve Mask (BVM)	Yes	Yes	Yes	Yes
8	Airway/Ventilation/Oxygenation Chest decompression—needle	No	No	No	Yes
9	Airway/Ventilation/Oxygenation Chest tube thoracostomy monitoring closed (clamped or water seal)	No	No	No	Yes <sup>1</sup>
10	Airway/Ventilation/Oxygenation Chest tube thoracostomy monitoring closed (attached to suction)	No	No	No	No
11	Airway/Ventilation/Oxygenation Chest tube thoracostomy monitoring open	No	No	No	Yes
12	Airway/Ventilation/Oxygenation Chest tube thoracotomy, acute insertion	No	No	No	No
13	Airway/Ventilation/Oxygenation Continuous Positive Airway Pressure (CPAP)	No	Yes <sup>1</sup>	Yes	Yes
14	Airway/Ventilation/Oxygenation BiPAP	No	No	No	Yes <sup>1</sup>
15	Airway/Ventilation/Oxygenation Cricothyrotomy	No	No	No	Yes
16	Airway/Ventilation/Oxygenation End tidal CO <sub>2</sub> monitoring/capnography	No	No	Yes	Yes
17	Airway/Ventilation/Oxygenation EOA/EGTA	No	No	No	No
18	Airway/Ventilation/Oxygenation Extubation—removal of ETT	No	No	No	Yes
19	Airway/Ventilation/Oxygenation Removal of Supraglottic Airway	No	No	Yes	Yes
20	Airway/Ventilation/Oxygenation Gastric decompression by OG tube insertion	No	No	No	Yes
21	Airway/Ventilation/Oxygenation Gastric decompression by NG tube insertion	No	No	No	Yes
22	Airway/Ventilation/Oxygenation Gastric decompression by alternative airway	No	No	Yes	Yes
23	Airway/Ventilation/Oxygenation Head-tilt chin lift	Yes	Yes	Yes	Yes
24	Airway/Ventilation/Oxygenation Inspiratory Impedance Threshold Device (ITD)	No	No	Yes <sup>1</sup>	Yes

25	Airway/Ventilation/Oxygenation	Endotracheal Intubation by direct laryngoscopy (including video intubation devices), nasotracheal, digital and transillumination/lighted stylet techniques	No	No	No	Yes
26	Airway/Ventilation/Oxygenation	Endotracheal Intubations—paralytic assisted, rapid sequence induction (RSI)	No	No	No	No
27	Airway/Ventilation/Oxygenation	Ventilation—maintenance of previous initiated neuro blocker	No	No	No	No
28	Airway/Ventilation/Oxygenation	Endotracheal Intubation retrograde	No	No	No	No
29	Airway/Ventilation/Oxygenation	Mouth to mouth	Yes	Yes	Yes	Yes
30	Airway/Ventilation/Oxygenation	Mouth to nose	Yes	Yes	Yes	Yes
31	Airway/Ventilation/Oxygenation	Mouth to stoma	Yes	Yes	Yes	Yes
32	Airway/Ventilation/Oxygenation	Mouth to barrier	Yes	Yes	Yes	Yes
33	Airway/Ventilation/Oxygenation	Obstruction—direct laryngoscopy (remove with forceps)	No	No	No	Yes
34	Airway/Ventilation/Oxygenation	Obstruction-manual (abdominal thrusts, finger sweep, chest thrusts) upper airway	Yes	Yes	Yes	Yes
35	Airway/Ventilation/Oxygenation	Oxygen therapy—blow by	Yes	Yes	Yes	Yes
36	Airway/Ventilation/Oxygenation	Oxygen therapy—humidifiers	No	Yes	Yes	Yes
37	Airway/Ventilation/Oxygenation	Oxygen therapy—nasal cannulas	Yes	Yes	Yes	Yes
38	Airway/Ventilation/Oxygenation	Oxygen therapy—nonrebreather	Yes	Yes	Yes	Yes
39	Airway/Ventilation/Oxygenation	Oxygen therapy—partial rebreather	No	Yes	Yes	Yes
40	Airway/Ventilation/Oxygenation	Oxygen therapy—regulators	Yes	Yes	Yes	Yes
41	Airway/Ventilation/Oxygenation	Oxygen therapy—simple face mask	No	Yes	Yes	Yes
42	Airway/Ventilation/Oxygenation	Oxygen therapy—Venturi mask	No	Yes	Yes	Yes
43	Airway/Ventilation/Oxygenation	Peak expiratory flow assessment	No	No	Yes	Yes
44	Airway/Ventilation/Oxygenation	Suctioning—meconium aspiration	No	No	No	Yes
45	Airway/Ventilation/Oxygenation	Suctioning—stoma/tracheostomy	Yes	Yes	Yes	Yes
46	Airway/Ventilation/Oxygenation	Suctioning—tracheobronchial by advanced airway	No	Yes <sup>2</sup>	Yes	Yes
47	Airway/Ventilation/Oxygenation	Suctioning—upper airway (nasal)	Yes	Yes	Yes	Yes
48	Airway/Ventilation/Oxygenation	Suctioning—upper airway (oral)	Yes	Yes	Yes	Yes
49	Airway/Ventilation/Oxygenation	Transtracheal jet ventilation	No	No	No	Yes
50	Airway/Ventilation/Oxygenation	Single mode, volume controlled auto vent without blender	No	No	Yes <sup>1</sup>	Yes <sup>1</sup>
51	Airway/Ventilation/Oxygenation	Ventilator, transport single of multimodal with/without blender. Volume control mode only, on patients >1 year of age with no anticipated need to actively titrate ventilator settings during transport.	No	No	No	Yes

52	Airway/Ventilation/Oxygenation	Ventilators, that are portable, that are portable and capable of being transported with a patient and are multi-modal, with a blender, that are used on patients requiring pressure control, pressure support or other advanced setting, or when there is an anticipated need by a healthcare provider involved with the care of the patient to actively titrate ventilator settings during transport, regardless of ventilation mode.	No	No	No	No
53	Cardiovascular/Circulation	Blood pressure—auscultation	Yes	Yes	Yes	Yes
54	Cardiovascular/Circulation	Blood pressure—electronic noninvasive	Yes	Yes	Yes	Yes
55	Cardiovascular/Circulation	Blood pressure—palpation	Yes	Yes	Yes	Yes
56	Cardiovascular/Circulation	Electrocardiogram (ECG) monitoring applying leads single lead	No	Yes <sup>2</sup>	Yes <sup>2</sup>	Yes
57	Cardiovascular/Circulation	Electrocardiogram (ECG) monitoring obtain and transmit 12 lead ECG	No	Yes <sup>1</sup>	Yes	Yes
58	Cardiovascular/Circulation	Cardiac monitoring—single lead (interpret)	No	No	No	Yes
59	Cardiovascular/Circulation	Manual chest compressions—adult, child, infant	Yes	Yes	Yes	Yes
60	Cardiovascular/Circulation	Precordial thump	No	No	No	Yes
61	Cardiovascular/Circulation	Cardioversion—synchronized	No	No	No	Yes
62	Cardiovascular/Circulation	Defibrillation—counter shock manual	No	No	No	Yes
63	Cardiovascular/Circulation	Transcutaneous cardiac pacing	No	No	No	Yes
64	Cardiovascular/Circulation	Transvenous or Epicardial pacing, Management of	No	No	No	No
65	Cardiovascular/Circulation	Defibrillation—automated external defibrillator (AED)	Yes	Yes	Yes	Yes
66	Cardiovascular/Circulation	Hemodynamic monitoring/assist (Swan Ganz, central venous pressure)	No	No	No	No
67	Cardiovascular/Circulation	Intra-aortic balloon pump or invasive cardiac assist device monitoring/assist	No	No	No	No
68	Cardiovascular/Circulation	Mechanical chest compression device application and use	Yes <sup>1</sup>	Yes <sup>1</sup>	Yes <sup>1</sup>	Yes <sup>1</sup>
69	Cardiovascular/Circulation	Thrombolytic therapy—initiation	No	No	No	No
70	Cardiovascular/Circulation	Thrombolytic therapy—monitoring	No	No	No	No
71	IV Initiation/Maintenance/Fluid	Central venous cannulation/insertion	No	No	No	No

72	IV Initiation/Maintenance/Fluid	Central venous line-access of existing catheters with external ports	No	No	No	Yes
73	IV Initiation/Maintenance/Fluid	External jugular vein cannulation	No	No	No	Yes
74	IV Initiation/Maintenance/Fluid	Saline lock insertions as no-flow IV	No	No	Yes	Yes
75	IV Initiation/Maintenance/Fluid	Intraosseous-needle placement and infusion-tibia, femur and humerus	No	No	Yes	Yes
76	IV Initiation/Maintenance/Fluid	IV insertion, peripheral venous initiation (cannulation)	No	No	Yes	Yes
77	IV Initiation/Maintenance/Fluid	Sub-cutaneous indwelling catheters—access of existing catheters	No	No	No	No
78	IV Initiation/Maintenance/Fluid	Venous blood sampling, peripheral —for clinical diagnostic purposes only	No	No	Yes	Yes
79	IV Initiation/Maintenance/Fluid	Venous blood sampling, peripheral —for legal purposes only (Applies to Paramedics only, as defined and permitted by Act 142 of 2016)	No	No	No	Yes
80	IV Initiation/Maintenance/Fluid	Venous central line (blood sampling) obtaining	No	No	No	No
81	IV Initiation/Maintenance/Fluid	Arterial line—capped—transport	No	Yes	Yes	Yes
82	IV Initiation/Maintenance/Fluid	Arterial line—monitoring/assist	No	No	No	No
83	IV Initiation/Maintenance/Fluid	Blood/Blood-by-products administration (initiation)	No	No	No	Yes <sup>1</sup>
84	IV Initiation/Maintenance/Fluid	Blood/Blood-by-products administration (monitoring)	No	No	No	Yes <sup>1</sup>
85	Lifting and moving	Patient lifting, moving and transfers	Yes	Yes	Yes	Yes
86	Lifting and moving	Patient restraints on transport devices	Yes	Yes	Yes	Yes
87	Medication administration routes	Endotracheal (ET)	No	No	No	Yes
88	Medication administration routes	Inhalation (aerosolized/nebulized)	No	Yes	Yes	Yes
89	Medication administration routes	Intramuscular (IM)	No	No	Yes	Yes
90	Medication administration routes	Intranasal (IN)	No	No	Yes	Yes
91	Medication administration routes	Intraosseous (IO)—tibia, humerus or femur	No	No	Yes	Yes
92	Medication administration routes	Intravenous (IV)—fluid bolus	No	No	Yes	Yes
93	Medication administration routes	Intravenous (IV)—monitoring or maintaining existing IV infusions, (crystalloid fluid as published in the EMS medication list in the	No	No	Yes	Yes

		<i>Pennsylvania Bulletin</i> ), during interfacility transport				
94	Medication administration routes	Intravenous (IV) infusion with added medication, including by intravenous pump	No	No	No	Yes
95	Medication administration routes	Nasogastric	No	No	No	Yes
96	Medication administration routes	Enteral feeding devices, Management of	No	No	No	No
97	Medication administration routes	Oral—over-the-counter medications for pain, fever and hypoglycemia (as listed in the approved medication list)	No	Yes	Yes	Yes
98	Medication administration routes	Inhalation over-the-counter medication inhalation of alcohol prep pad	Yes	Yes	Yes	Yes
99	Medication administration routes	Rectal	No	No	No	Yes
100	Medication administration routes	Subcutaneous	No	No	Yes	Yes
101	Medication administration routes	Sublingual ( <i>Note</i> : EMT may only assist patient with his/her prescribed Nitroglycerin (NTG))	No	Yes	Yes	Yes
102	Medication administration routes	Topical	No	No	No	Yes
103	Medications	Auto-injector benzodiazepine for seizure	No	No	No	Yes
104	Medications	Auto-injector epinephrine (assist patient with his/her prescribed medication)	No	Yes	Yes	Yes
105	Medications	Auto-injected epinephrine—primary use—not patients own prescription	No	Yes <sup>1</sup>	Yes	Yes
106	Medications	IM injection of Epinephrine as approved by PA EMS protocol	No	Yes <sup>1</sup>	Yes	Yes
107	Medications	Medications as published in the <i>Pennsylvania Bulletin</i> by the Department	Yes	Yes	Yes	Yes
108	Medications	Immunizations as published in the <i>Pennsylvania Bulletin</i> by the Department	No	No	No	Yes
109	Medications	Over the counter (OTC) medications (except as listed elsewhere for pain, fever, hypoglycemia)	No	No	No	No
110	Medications	Oxygen	Yes <sup>1</sup>	Yes	Yes	Yes
111	Medications	Auto-injector nerve agent antidote — self or peer rescue	Yes	Yes	Yes	Yes
112	Medications	Auto-injector nerve agent antidote —	No	Yes <sup>3</sup>	Yes <sup>3</sup>	Yes

	patient treatment				
113 Medications	Metered-dose inhaler (MDI) bronchodilator (EMT may only assist patient with their own prescribed inhaler)	No	Yes	Yes	Yes
114 Medications	Naloxone—Intranasal or intramuscular auto injector	Yes <sup>1,4</sup>	Yes <sup>1,4</sup>	Yes	Yes
115 Medications	Glucagon—Intranasal (powder spray) or intramuscular auto-injector	No	Yes <sup>1</sup>	Yes	Yes
116 Patient assessment/management	Behavioral—restrain violent patient	Yes <sup>1</sup>	Yes	Yes	Yes
117 Patient assessment/management	Blood glucose assessment	No	Yes <sup>1</sup>	Yes	Yes
118 Patient assessment/management	Portable blood analysis devices, use of (glucometer covered elsewhere)	No	No	No	No
119 Patient assessment/management	Childbirth—umbilical cord cutting	Yes	Yes	Yes	Yes
120 Patient assessment/management	Childbirth—(abnormal/complications)	No	Yes	Yes	Yes
121 Patient assessment/management	Childbirth (normal)—cephalic	Yes	Yes	Yes	Yes
122 Patient assessment/management	Carbon Monoxide CO—oximetry monitoring	No	Yes <sup>1</sup>	Yes <sup>1</sup>	Yes <sup>1</sup>
123 Patient assessment/management	Carbon Monoxide CO—exhaled analysis device	No	Yes <sup>1</sup>	Yes <sup>1</sup>	Yes <sup>1</sup>
124 Patient assessment/management	Carbon Monoxide with environmental surveillance devices	Yes	Yes	Yes	Yes
125 Patient assessment/management	Hemodynamic monitoring/assist (Swan Ganz, central venous pressure)	No	No	No	No
126 Patient assessment/management	Dislocation reduction	No	No	No	No
127 Patient assessment/management	Eye irrigation (irrigation through corneal contact device limited to AEMT and P)	Yes	Yes	Yes	Yes
128 Patient assessment/management	Intracranial monitoring/assist	No	No	No	No
129 Patient assessment/management	Patient management per Statewide EMS protocols and Department approved protocols	Yes	Yes	Yes	Yes
130 Patient assessment/management	Pulse oximetry monitoring	No	Yes	Yes	Yes
131 Patient assessment/management	Splinting, extremity—manual, rigid, soft, vacuum	Yes	Yes	Yes	Yes
132 Patient assessment/management	Splinting, femur—traction	No	Yes	Yes	Yes
133 Patient assessment/management	Urinary catheterization	No	No	No	No
134 Patient assessment/management	Wound care, dressing bandaging	Yes	Yes	Yes	Yes
135 Patient assessment/management	Wound care, removal of Taser probe/barb	No	No	No	No
136 Patient assessment/management	Wound drain—vacuum devices, monitoring	No	Yes	Yes	Yes

137 Patient assessment/management	Wound care, hemorrhage control — direct pressure, wound packing, tourniquet, bandaging, hemostatic agents	Yes	Yes	Yes	Yes
138 Patient assessment/management	Wound care, irrigation and skin closure with tape or adhesive glue	No	No	No	No
139 Spinal Care	Restrict spinal motion—Cervical collar application	Yes	Yes	Yes	Yes
140 Spinal Care	Restrict spinal motion—Helmet removal or stabilization	No	Yes	Yes	Yes
141 Spinal Care	Restrict spinal motion—manual cervical spine stabilization	Yes	Yes	Yes	Yes
142 Spinal Care	Restrict spinal motion—rapid extrication with precautions to restrict spinal movement	No	Yes	Yes	Yes
143 Spinal Care	Devices to restrict spinal motion, vacuum mattress, extrication device, scoop stretcher and spine board	No	Yes	Yes	Yes

*EMR*—Emergency Medical Responder;

*EMT*—Emergency Medical Technician;

*AEMT*—Advanced Emergency Medical Technician;

*P\**—Paramedic (\*includes—PHRN/PHPE/PHP)

No—The skill is not in the scope of practice for the level certification.

Yes—The skill is in the scope of practice for the level of certification.

1. Additional training and authorization by EMS agency medical director is required, and this skill may only be used when functioning with a licensed EMS agency that complies with Department requirements for providing this skill.

2. May assist a P, PHRN, PHPE or PHP with this skill only in the physical presence of and under the direct supervision of the higher-level provider.

3. May perform this skill only in the physical presence of and under the direct supervision of a P, PHRN, PHPE or PHP.

4. Department-approved Act 139 training required and approval of the EMS medical director, and this skill may only be used when functioning with a licensed EMS agency that complies with Department requirements for providing this skill.

DR. DEBRA L. BOGEN,  
Acting Secretary

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