

Wisconsin EMS Scope of Practice Intermediate

This level of EMS provider has successfully completed a program of training based upon the WI Intermediate Curriculum, and has successfully completed the department's testing requirements. Individuals must hold a valid WI license and credential with an approved EMS Service to practice at this level.

AIRWAY / VENTILATION / OXYGENATION
Airway – Lumen (Non-Visualized)
Airway – Nasal (Nasopharyngeal)
Airway – Oral (Oropharyngeal)
SALT Airway as intubation device**
Bag-Valve-Mask (BVM)
Chest Decompression – Needle
CO Monitoring**
CPAP **
Cricoid Pressure (Sellick)
End Tidal CO ₂ Monitoring/Capnometry*
Gastric Access-Via King LTS-D Only**
Intubation- Endotracheal
ITD or Impedance Threshold Device*
Intubation- Nasotracheal
Manual Airway Maneuvers
Obstruction – Forceps (Direct Visual)
Obstruction – Manual
Oxygen Therapy - Nebulizer
Oxygen Therapy – Nasal Cannula
Oxygen Therapy – Non-rebreather Mask
Oxygen Therapy – Regulators
Pulse Oximetry*
Suctioning – Tracheobronchial
Suctioning – Upper Airway (Soft & Rigid)

CARDIOVASCULAR/ CIRCULATION
Cardiocerebral Resuscitation (CCR)**
Cardiopulmonary Resuscitation (CPR)
Cardioversion (Unstable Patients only)
CPR Mechanical Device**
Defibrillation – Automated / Semi-Automated(AED)
Defibrillation – Manual*
ECG Monitor
12 Lead ECG*
Hemorrhage Control – Direct Pressure
Hemorrhage Control – Pressure Point
Hemorrhage Control - Tourniquet
Hemorrhage Control- Hemostatic agent
Pacing-Transcutaneous
Trendelenberg Positioning
Valsalva

IMMOBILIZATION
Selective Spinal Immobilization **
Spinal Immobilization – Cervical Collar
Spinal Immobilization – Long Board
Spinal Immobilization – Manual Stabilization
Spinal Immobilization – Seated Patient (KED, etc.)
Splinting – Manual
Splinting-Pelvic Wrap/PASG*
Splinting – Rigid
Splinting – Soft
Splinting – Traction
Splinting – Vacuum*

REMINDER: Personnel must be trained & competent in all equipment that is used by the service

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IV INITIATION / MAINTENANCE / FLUIDS

IV Solutions-Initiation-D5W, Normal Saline, Lactated Ringers
IV Solutions-Maintenance Non-Medicated IV Fluids (D5W, LR, NS)
Intraosseous – Initiation
Peripheral – Initiation
Saline Lock- Initiation

MEDICATION ADMINISTRATION - Routes

Aerosolized/Nebulized
Auto-Injector
Buccal
Endotracheal Tube (ET)
Intramuscular (IM)
Intranasal (IN)**
Intraosseous (IO)
Intravenous (IV) Push
Oral
Rectal
Subcutaneous (SQ)
Sub-lingual (SL)

Unstable cardiac patients are defined by the AHA under ACLS guidelines

* *Optional use by service*

** *Optional use by service and*

Requires:

- *Prior written approval of the Operational Plan by the State EMS office and*
- *Medical Director approval and*
- *Documentation of additional training*

All skills are mandatory unless otherwise indicated and requires an approved protocol.

APPROVED MEDICATIONS BY PROTOCOL

Activated Charcoal*
Adenosine
Albuterol (Nebulized)
Albuterol & Atrovent - Premix Combined
Amiodarone (Bolus only)
Aspirin (ASA) for chest pain
Ativan, Valium, Versed- CHOOSE 1 for Seizures only
Atropine
Atrovent (Nebulized)
Beta agonist-short acting-for asthma (nebulized – unit dose)**
Dextrose 50%
Epinephrine Auto-Injector or Manually drawn 1:1000
Epinephrine 1:10,000
Glucagon*
Lasix
Lidocaine (Bolus Only)
Mark I (or equivalent) Auto-Injector (For Self & Crew)*
Morphine or Fentanyl- CHOOSE 1
Narcan
Nitroglycerin (SL only)
Oral Glucose
Vasopressin

MISCELLANEOUS

Assisted Delivery (childbirth)
• Blood Glucose Monitoring
Blood Pressure –Automated
Eye Irrigation
• Patient Physical Restraint Application
Venous Blood Sampling – Obtaining**
Vital Signs
Immunizations*

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