



WISCONSIN EMS SCOPE OF PRACTICE PARAMEDIC



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

AIRWAY / VENTILATION / OXYGENATION
Airway – Lumen (Non-Visualized)
Airway – Nasal (Nasopharyngeal)
Airway – Oral (Oropharyngeal)
Airway – SALT*
Bag-Valve-Mask (BVM)
Chest Decompression – Needle
CO Monitoring**
CPAP **
Cricoid Pressure (Sellick)
Cricothyrotomy – Surgical/Needle*
End Tidal CO ₂ Monitoring/Capnometry*
Gastric Decompression – NG/OG Tube*
Intubation- Endotracheal
Intubation- Nasotracheal
Intubation – Medication Assisted (non-paralytic)*
Intubation – Medication Assisted (paralytics) (RSI)** (Requires 2 Paramedics Patient Side)
Manual Airway Maneuvers
Obstruction – Forceps & Laryngoscope (direct visual)
Obstruction – Manual
Oxygen Therapy – Nebulizer
Oxygen Therapy – Nasal Cannula
Oxygen Therapy – Non-Rebreather Mask
Pulse Oximetry*
Suctioning – Tracheobronchial
Suctioning – Upper Airway (Soft & Rigid)
Ventilators – Simple Function ATV*

CARDIOVASCULAR/ CIRCULATION
Cardiocerebral Resuscitation (CCR)**
Cardiopulmonary Resuscitation (CPR)
Cardioversion – Electrical
CPR Mechanical Device**
Defibrillation – Manual
ECG Monitor
12 Lead ECG
Hemorrhage Control–Direct Pressure
Hemorrhage Control–Pressure Point
Hemorrhage Control–Tourniquet*
Hemorrhage Control–Hemostatic Agents*
ITD or Impedance Threshold Device**
Pericardiocentesis
Transcutaneous Pacing
Valsalva Manuever

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*

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

* *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*

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

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MEDICATIONS
DHS 110.12 limits the administration of medications to those specified in the Scope of Practice to which an individual is licensed, certified or credentialed.
DHS 110.35(2)(b) identifies a formulary list of medications the EMS provider will use as an addendum to the service provider Operational Plan.

MEDICATION ADMINISTRATION - ROUTES
Aerosolized/Nebulized
Auto-Injector
Endotracheal Tube (ET)
Intramuscular (IM)
Intranasal (IN)**
Intraosseous (IO)
Intravenous (IV) Push
Oral (PO)
Rectal
Subcutaneous (SQ)
Sub-Lingual (SL)

INITIATION / MAINTENANCE / FLUIDS
Central Line – Use and Maintenance** (No add'l training req'd in code situation)
Medicated* or Non-Medicated IV Fluids
IV Pump – 2 or fewer medications infused from Paramedic Medication List*
Intraosseous*
Peripheral
PICC Line – Access and Use**
Saline Lock

APPROVED MEDICATIONS BY PROTOCOL
<ul style="list-style-type: none"> ONLY medications listed on the Wisconsin Paramedic Medication List

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

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

* *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*

Unstable cardiac patients are defined by the AHA under ACLS guidelines

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