



Ohio Administrative Code

Rule 4765-16-04 Advanced emergency medical technician scope of practice.

Effective: January 1, 2024

(A) In addition to the emergency medical services listed in rules 4765-12-04 and 4765-15-04 of the Administrative Code, and in accordance with section 4765.38 of the Revised Code, an advanced emergency medical technician may perform the following emergency medical services only pursuant to the written or verbal authorization of a physician or of the cooperating physician advisory board, or authorization transmitted through a direct communication device by a physician, physician assistant designated by physician, or registered nurse designated by a physician, or in accordance with written protocols as specified in division (B) of section 4765.38 of the Revised Code:

- (1) Cardiac monitor strip interpretation;
- (2) Manual defibrillation;
- (3) Obtaining blood specimens;
- (4) Subcutaneous or intramuscular administration of epinephrine;
- (5) Intravenous access and peripheral initiation;
- (6) Intravenous maintenance and fluid administration;
- (7) Intraosseous insertion;
- (8) Saline lock.

(B) In addition to the emergency medical services described in paragraph (A) of this rule, and in accordance with section 4765.38 of the Revised Code, an advanced emergency medical technician who has completed a training program pursuant to this chapter of the Administrative Code may perform the following emergency medical services only pursuant to the written or verbal



authorization of a physician or of the cooperating physician advisory board, or authorization transmitted through a direct communication device by a physician, physician assistant designated by physician, or registered nurse designated by a physician, or in accordance with written protocols as specified in division (B) of section 4765.38 of the Revised Code:

(1) Administration of the following medications:

(a) Sublingual nitroglycerin (non-patient assisted);

(b) Dextrose in water;

(c) Epinephrine at the concentration of one milligram per milliliter via subcutaneous or intramuscular routes;

(d) Diphenhydramine;

(e) Benzodiazepines;

(f) Bronchodilators;

(g) Naloxone via endotracheal tube, intramuscular, intravenous, intraosseous, or subcutaneous;

(h) Glucagon;

(i) Nitrous oxide;

(j) Nalbuphine;

(k) Narcotics or other analgesics for pain relief;

(l) Lidocaine, for pain relief after intraosseous insertions;

(m) Oral ondansetron for patients twelve years or older;



- (n) Ketamine;

- (o) Any additional drug approved by the board.

- (2) Administration of aerosolized or nebulized medications (non-patient assisted);

- (3) Administration of intranasal medications;

- (4) Orotracheal intubation of the apneic patient;

- (5) Orotracheal intubation of the pulseless and apneic patient;

- (6) Dual lumen airway of the apneic patient;

- (7) Extraglottic airway of the apneic patient;

- (8) Needle decompression of the chest;

- (9) Tracheostomy tube replacement;

- (10) Laryngoscopy for removal of airway obstruction;

- (11) Set up and application of a twelve-lead electrocardiogram, in accordance with written protocols, in either of the following instances:
 - (a) When the advanced emergency medical technician is assisting a paramedic; or

 - (b) For the purpose of electronic transmission by the advanced emergency medical technician, provided the following conditions are met:
 - (i) The advanced emergency medical technician does not interpret the electrocardiogram;



(ii) The advanced emergency medical technician minimizes any delay of patient transport while obtaining a twelve-lead electrocardiogram;

(iii) The advanced emergency medical technician utilizes the twelve-lead electrocardiogram in conjunction with destination protocols approved by the local medical director.

(12) Withdraw blood for the purpose of determining the alcohol, drug, controlled substance, metabolite of a controlled substance, or combination content of the whole blood, blood serum, or blood plasma as provided in division (C) of section 4765.38 of the Revised Code when performed in accordance with the criteria established in rule 4765-6-06 of the Administrative Code and the protocols established by the medical director of the emergency medical service organization with which the advanced emergency medical technician is affiliated.

(13) Any other services approved by the board pursuant to rule 4765-6-01 of the Administrative Code.

(14) Any other services pursuant to a research study approved by the board under rule 4765-6-04 of the Administrative Code and within the parameters established by the board for such study.

(C) The utilization of waveform capnography is mandatory for all patients requiring invasive airway devices with the exception of stable patients with no cardiac or pulmonary complaints or symptoms unless ordered by the transferring physician.

As used in this rule, an invasive airway device is any airway device inserted or pre-positioned into a patient's airway by means of the mouth, directly into the trachea, or into the trachea by means of a tracheostomy tube, cricothyrotomy or nasotracheal intubation. Dual lumen and extraglottic airways, even though they are blindly inserted into the hypopharynx or the esophagus, are considered invasive airway devices.

(D) A physician or cooperating physician advisory board that serves as the medical director for any EMS organization may limit, but not exceed, the scope of practice for those advanced emergency medical technicians who provide emergency medical services under the auspices of the physician's certificate to practice medicine and surgery, or osteopathic medicine and surgery, issued under



Chapter 4731. of the Revised Code to include the withdrawing of blood for evidence collection.

(E) An advanced emergency medical technician shall not perform emergency medical services within this rule unless the advanced emergency medical technician has received training as part of an initial certification course or through subsequent training approved by the board. If certain emergency medical services, within the advanced emergency medical technician scope of practice, were not included in the training specified in this paragraph, the advanced emergency medical technician must have received training regarding such services approved by the local medical director before performing those services.