

# Summary of Changes

## EMS Physician Commission Standards Manual

### 2016-1 to 2017-1

*Updated IDAPA reference (pages 4-5)*

#### **III. EMS PERSONNEL AUTHORITY TO ACT**

Licensed EMS personnel who are representing an Idaho EMS agency and who possess a valid credential issued by that agency's EMS medical director may act and provide services in the out-of-hospital setting under the following conditions:

1. When participating in a planned deployment **or agency sanctioned standby** of personnel resources approved by the EMS medical director; or

Licensed EMS personnel who are representing a hospital or medical clinic and who possess a valid credential issued by the hospital or medical clinic supervising physician may act and provide services in the hospital and medical clinic setting under the following conditions:

1. When participating in a planned deployment **or agency sanctioned standby** of personnel resources approved by the hospital or medical clinic supervising physician; or

*Effective date of new standards manual and scope of practice (page 14): July 1, [2017](#)*

#### *Appendix A Changes:*

- Item numbering updated
- EMR/FR95
  - Scope of practice removed
- EMR – 2011
- EMT/EMTB94
  - Scope of practice removed
- EMT - 2011
  - Aerosolized (MDI) added to scope of practice (line 88)
  - Nebulized (SVN) added to scope of practice (line 104)
  - Inhaled Beta Agonist changed from X\*\* to X\*\*2, OM (line 138)
  - Inhaled Beta Agonist (SVN) X\*\* to X\*\*2, OM (line 139)

#### *Appendix B Changes:*

- “Video Laryngoscopes” added under available options for Laryngoscope blades
- “must use quantitative or wave form for continuous end tidal” added under Requirements for Tube Placement
- “All intubations, including RSI, must be reviewed by the Medical Director.” Added under PCR Documentation

#### *Appendix C Changes:*

- “Video Laryngoscopes” added under available options for Laryngoscope blades
- “must use quantitative or wave form for continuous end tidal” added under Requirements for Tube Placement
- “All intubations, including RSI, must be reviewed by the Medical Director.” Added under PCR Documentation

#### *Appendix C Changes:*

- “Cuffed sizes = 3.5mm – 8.0mm” and “Uncuffed Size = 2.5mm” added under available options for Selection of tube size (page 38)

*New Appendices:*

- [EMSPC Ventilator Standards “Appendix D”](#)
- [EMSPC Critical Care Transport Guidelines “Appendix E”](#)