HIGHLIGHTS of the
Idaho Emergency Medical Services Physician Commission (EMSPC)
November 13, 2009 meeting

-Airway Management Data Collection: The EMSPC has radically changed its survey for airway management data collection. The survey has been successfully field tested and will go-live statewide on January 1, 2010. This version of the survey is greatly simplified and is designed to be completed in less than 5 minutes. All EMS providers who attempt intubation on a patient in Idaho while responding with an Idaho-licensed EMS agency must submit data electronically via the internet. The link to the survey will be posted on the EMSPC website: www.emspc.dhw.idaho.gov.

-Scope of Practice Optional Educational Modules (OM): The optional module (OM) training and educational materials will tentatively be ready for use January 1, 2010.

-Carbon Monoxide Monitoring: The CO monitoring protocol was reviewed and will be brought back to the February 12, 2010, EMSPC meeting for further discussion.

-Immunizations: The administration of Intramuscular (IM) medication is in the current Paramedic scope of practice. Medical Directors therefore have the discretion to allow or disallow the administration of immunizations by Paramedics operating under their supervision. The administration of IM medication is not in the scope of practice for EMRs, EMTs and AEMTs. EMS personnel who provide immunizations outside of their EMS agency affiliation (i.e. clinic or Health District) are not functioning under their EMS license and become the responsibility of the clinic or Health District as would any other employee or volunteer.

-AEMT EZ-IO Administration: The administration of lidocaine through the infusion line of an EZ-IO is NOT considered part of the scope of practice of the Advanced EMT.

-Pediatric Patient Care Treatment Guidelines: New pediatric patient care treatment guidelines have been approved by the EMSPC and will soon be available from the EMS Bureau / EMS-C for use by any EMS agency in the state of Idaho. They are guidelines and may be adapted to the needs of the agency under the direction of the medical director.