



## Ohio Administrative Code Rule 4765-17-03 Paramedic scope of practice.

Effective: January 1, 2021

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(A) In addition to the skills listed in rules 4765-12-04, 4765-15-04 and 4765-16-04 of the Administrative Code, and in accordance with section 4765.39 of the Revised Code, a paramedic 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 a physician, or registered nurse designated by a physician, or in accordance with written protocols as specified in division (C) of section 4765.39 of the Revised Code:

- (1) Orotracheal intubation;
- (2) Nasotracheal intubation;
- (3) Cricothyrotomy (surgical);
- (4) Cricothyrotomy (needle);
- (5) Dual lumen airways;
- (6) Extraglottic airways;
- (7) Positive end-expiratory pressure;
- (8) Bilevel positive air pressure;
- (9) Ventilator management of patients sixteen years of age or older;
- (10) Chest tube monitoring and management;



- (11) Central line monitoring;
- (12) Transcutaneous cardiac pacing;
- (13) Administration of cardiac medication;
- (14) Cardioversion;
- (15) Carotid massage;
- (16) Twelve-lead electrocardiogram performance and interpretation;
- (17) Administration of nitroglycerin;
- (18) Administration of aerosolized or nebulized medication;
- (19) Epinephrine administration via intravenous or intraosseous route;
- (20) Placement of nasogastric or orogastric tubes;
- (21) Administration of other medications pursuant to written protocols;
- (22) Intravenous infusion pump;
- (23) Blood chemistry analysis;
- (24) Thrombolytic therapy initiation and monitoring;
- (25) Immunizations for influenza to firefighters, EMTs, AEMTs, or paramedics in accordance with section 4765.391 of the Revised Code;
- (26) Maintenance of medicated intravenous fluids;



(27) Maintenance of blood administration;

(28) Eye irrigation morgan lens;

(29) 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 (D) of section 4765.39 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 paramedic is affiliated;

(30) 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;

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

(B) A paramedic may perform non-emergent ambulance transport of a stable patient less than sixteen years of age who has a chronic condition requiring a tracheostomy tube and a ventilator provided the patient's caregiver accompanies the patient during transport and the patient's caregiver has received appropriate training in use of the patient's ventilator.

A caregiver is not required to accompany the patient if the patient is accompanied by an Ohio licensed registered nurse or respiratory therapist, or other appropriately trained and licensed Ohio healthcare provider.

(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 paramedics 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) A paramedic shall not perform emergency medical services within this rule unless the paramedic 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 paramedic scope of practice, were not included in the training specified in this paragraph, the paramedic must have received training regarding such services approved by the local medical director before performing those services.