

Out of Province Assessment Checklist

EMR

- scene assessment;
- assessment of level of consciousness, skin colour and temperature, pulse, and respiration;
- rapid body survey to identify and attend to any life-threatening injuries followed by a secondary assessment consisting of a physical examination, medical and incident history, and vital signs;
- cardiopulmonary resuscitation;
- maintenance of airways and ventilation, including by
 - insertion and maintenance of oropharyngeal airway devices and nasopharyngeal airway devices, and
 - use of suction devices and bag-valve-mask devices;
- oxygen administration and use of oxygen administration equipment;
- use of automatic and semi-automatic defibrillators;
- wound management not requiring tissue puncture or indentation;
- fracture management and immobilization;
- lifting/loading and extrication/evacuation.
- spinal motion restriction;
- administration of oral glucose;
- emergency childbirth;
- *assistance to a patient with the administration of a medication to the patient, provided that
 - if, under the Pharmacy Operations and Drug Scheduling Act, a particular medication is available only on the prescription of a health professional, the medication has already been prescribed to the patient by a health professional,
 - the patient has requested the EMA to assist the patient with the administration of the medication,
 - the administration of the medication is related to emergency services the EMA is providing to the patient,
 - the medication is administered as prescribed, and
 - the patient is not being transported between health facilities;
- use and interpretation of pulse oximeters and CO-oximeters;
- use and interpretation of glucometers;
- *administration of epinephrine by intramuscular auto-injector or intranasal or sublingual preparations;
- *topical administration of pro-coagulants and anti-fibrinolytics;
- *intramuscular and intranasal administration of opioid antagonists;
- non-invasive blood pressure measurement;
- *intramuscular and intranasal administration of anti-hypoglycemic agents;
- *administration of oral analgesics;
- administration of acetylsalicylic acid.
- occupational first aid;
- transportation;
- soft tissue injury treatment.

Endorsements

- maintenance of intravenous lines without medications or blood products;
- administration of the following oral , sublingual or inhaled medications:
 - anti-anginal;
 - analgesics;
 - platelet inhibitors;
- chest auscultation;
- *intramuscular administration of epinephrine;
- *administration of bronchodilators by inhalation and nebulization.

PCP

administration of the following inhaled , intramuscular , *intranasal , *intraosseous , intravenous , nebulized , oral , subcutaneous or sublingual medications:

- opioid antagonist;
- anti-histaminic;
- sympathomimetic agent;
- procoagulant;
- anti-hypoglycemic agent;
- anti-pyretic;

insertion and maintenance of airway devices not requiring visualization of the larynx;

maintenance of intravenous lines, including use of infusion devices and saline locks;

initiation of peripheral intravenous lines;

*point-of-care testing to inform emergency treatment or transportation decisions or to provide information for subsequent treatment;

*end-tidal carbon dioxide monitoring.

Endorsements

administration of isotonic crystalloid solutions;

endotracheal intubation;

electrocardiogram acquisition;

initiation and maintenance of non-invasive positive pressure airway devices;

administration of the following inhaled , intramuscular , *intranasal , *intraosseous , intravenous , nebulized , oral , subcutaneous or sublingual medications:

- anti-emetic — anti-nauseant;
- vitamins;
- *corticosteroids;
- *opioid analgesics;
- *anti-cholinergic;

*collection of capillary and venous blood samples;

*initiation and maintenance of intraosseous needle cannulation with local anesthetic instillation;

*taking microbiology swabs of dermal and mucosal sites;

*manual defibrillation with cardiac rhythm interpretation;

*electrocardiogram interpretation;

*needle thoracentesis;

*administration of chemical and biological agent countermeasures.

ACP

- cardioversion and external pacing;
- initiation of external jugular vein cannulation;
- cricothyrotomy;
- gastric intubation and suction;
- maintenance of intravenous lines with medications;
- insertion and maintenance of advanced airway devices which do not require laryngoscopy;
- administration of colloid and non-crystalloid volume expanders;
- administration of the following intravenous , oral , nebulized , endotracheal , intraosseous , intramuscular and rectal medications:
 - anti-arrhythmic;
 - electrolyte — calcium therapy;
 - diuretic;
 - anti-coagulant;
 - sedative;
 - anti-emetic — anti-nauseant;
 - histamine antagonist;
 - anti-convulsant;
 - alkalizer;
- *reduction of joint dislocations involving neurological or vascular compromise;
- *administration of drug therapy after consultation with a medical practitioner who is designated by an employer as a medical oversight advisor and who has advised the EMA to administer the drug therapy.

Endorsements

- automated mechanical ventilation;
- urinary catheterization;
- arterial line management and central venous pressure monitoring;
- infusion of blood products;
- collection of arterial blood samples;
- interpreting laboratory and radiologic data;
- chest tube management;
- central line management;
- management of parenteral feeding lines and equipment;
- provision of trans-venous pacing;
- *invasive wound management;
- *subcutaneous application of a local anesthetic;
- *finger thoracostomy.

CCP

- initiation of arterial lines;
- use of incubators for thermoregulation;
- *chest tube insertion;
- *initiation of central venous line;
- *escharotomy;
- *esophageal manometry;
- *pericardiocentesis;
- *mechanical ventilation management and strategy development.