

VBEMS Prehospital Skills Delineation for Affiliated Providers

SKILL	EMT	AEMT	EMT-Intermediate	Paramedic	Physician	VBEMS Specific Protocol/Policy	VBEMS Specific Instruction(s) Required
AIRWAY							
King Airway >14 y/o age		X	X	X	X		Yes
I-Gel		X	X	X	X		Yes
Endotracheal Intubation							
Oral > 12 y/o age			X	X	X		
Oral < 12 y/o age				X	X		Yes*
Nasal				X	X		
Magills Use		X	X	X	X		
Endotracheal Tube Introducer (Bougie)			X	X	X		Yes
Glidescope			X	X	X		Yes
Rapid Sequence Intubation (RSI)				X1	X		Yes*
End Tidal Carbon Dioxide Detection	X	X	X	X	X		Yes**
Wave-form Capnography	X	X	X	X	X		Yes**
CPAP		X	X	X	X		Yes*
Needle Cricothyrotomy				X	X		
Surgical (kit) Cricothyrotomy				X1	X		Yes
Chest Decompression			X	X	X		
Gastric Decompression (OG/NG)			X	X	X		
CIRCULATORY SUPPORT							
Peripheral IV		X	X	X	X		
Intraosseous Cannulation							
Manual (Jamshidi)			X	X	X		
EZ-IO			X	X	X		Yes
External Jugular Cannulation			X	X	X		
Glucometry	X	X	X	X	X		
12-Lead EKG Acquisition	X	X	X	X	X		Yes
12-Lead EKG Interpretation			X	X	X		Yes
Defibrillation							
Automatic	X	X	X	X	X		Yes
Manual			X	X	X		Yes
Synchronized Cardioversion			X	X	X		Yes
Pacing			X	X	X		Yes
Lucas Device	X	X	X	X	X	Yes	Yes
Tourniquet (CAT)	X	X	X	X	X		Yes
Medications (Skill Only)	Medications administered via these routes must comply with those approved for the provider level by local policy or TEMS regional protocol.						
Patient Assisted Medication (PAM)	X	X	X	X	X		
Inhalized Medication - Nebulizer	X	X	X	X	X		
Sublingual Medication	X	X	X	X	X		
Subcutaneous Medication		X	X	X	X		
PO Medication	X	X	X	X	X		
Transdermal Medication		X	X	X	X		
Intramuscular Medication		X	X	X	X		
Rectal Medication			X	X	X		
Intranasal Medication	X	X	X	X	X		
Intravenous Infusions (Drips)		X	X	X	X		
Miscellaneous							
Ultrasound				X5	X	Yes	Yes*
Patient Chemical Restraint			X	X	X		Yes*
Whole Blood administration				X4	X	Yes	Yes*
MCRT Medical Clearance				X3	X3	Yes	Yes
Cyanokit Administration			X	X	X		Yes
Autovent				X	X		Yes*
Blood Chemistry Analysis (excluding BGL)				X3	X3	Yes	Yes*
Air Ambulance							
Standby or launch prior to EMS arrival		X2	X2	X2		Yes	Yes
Launch once on scene (AIC)	X	X	X	X	X	Yes	

* = Outside of standard scope of practice and the state requires additional training

** = Outside of the standard scope of practice for EMT's only and the state requires additional training

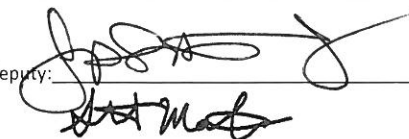
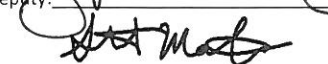
X1 = Provider must be specifically authorized for RSI

X2 = May be performed by an EMS Field Supervisor or higher

X3 = Provider must be specifically authorized for MCRT

X4 = Provider must be specifically authorized for Whole Blood administration

X5 = Provider must be specifically authorized for Ultrasound

Ops Deputy: 
 OMD: 

Approved: 5/7/2022