
TITLE	Emergency Medical Responder – Autonomous Practice
POLICY NO:	2018-061

POLICY STATEMENT:

This policy will guide the practice of Emergency Medical Responders, who have completed additional training programs and are certified under the company's medical supervision program to perform skillsets under directives independently.

PRINCIPLES:

Traditionally EMRs have limited scope of practice, however with expanded training and knowledge can safely and effectively practice at a higher scope of practice to provide safe and competent emergency care.

SCOPE:

All Staff and Volunteers

POLICY:

1. Certification
 - a. The EMR-Autonomous must complete the following certification programs:
 - i. Symptom Relief Medication Administration
 - ii. 3-Lead Cardiac Monitoring
 - iii. 12-Lead Cardiac Monitoring
 - iv. Advanced Cardiac Life Support
 - v. Intravenous Initiation and Therapy
2. The EMR-Autonomous must complete comprehensive testing and be recommended by the chief or deputy chief to be considered for certification.
3. The EMR-Autonomous must maintain quarterly proficiency in all skills and certifications in order to retain their EMR-Autonomous status.
4. Failure to maintain any of the skills or knowledge prescribed in (3) of this policy will result in immediate revocation of their EMR-Autonomous status.



5. Failure to meet any other prescribed requirements to maintain competency will result in the immediate revocation of their EMR-Autonomous status.
6. Scope:
 - a. The EMR-Autonomous will be certified under the company's medical supervision program to independently:
 - i. Initiate IV and IO infusions
 - ii. Administer all drugs under the medical directives which a Primary Care Paramedic would be permitted to administer
 - iii. Initiate cardiac monitoring, and interpret ECG's
 - iv. Provide care under the ACLS algorithms including drug administration
 - v. Other skills as identified in the medical directives from time to time

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Authority: Chief



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