

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH



Jewel Mullen, M.D., M.P.H., M.P.A.
Commissioner

Dannel P. Malloy
Governor
Nancy Wyman
Lt. Governor

Date: December 19, 2013
To: All Connecticut EMS Organizations
All Connecticut EMS Sponsor Hospitals
From: Raphael M. Barishansky, MPH, CPM
Director, Office of Emergency Medical Services
Re: Modification to procedure for authorization of BLS skills

Effective immediately, EMS organizations wishing to provide the following skills will no longer be required to submit the *Application for Change in Authorization (MIC)* to the OEMS:

EMR and above: Automatic External Defibrillation (AED)
EMT and above: Aspirin Administration
Glucometry
Epinephrine Auto-injector Administration
Continuous Positive Airway Pressure (CPAP)

These skills have been established to be within the scope of practice of the above referenced EMS provider levels, either by Connecticut's adoption of the 2007 National EMS Scope of Practice Model, the provisions of C.G.S. Sec. 19a-197a or by expansion of the BLS scope of practice through the process outlined in C.G.S. Sec. 19a-179a.

In order to perform these skills, EMS organizations are required to obtain authorization from their EMS sponsor hospital. The EMS sponsor hospital is responsible for ensuring that all training requirements have been fulfilled, EMS providers maintain skill competency, appropriate patient care protocols have been established and maintaining ongoing patient care quality assurance and improvement. EMS organizations are required to ensure 24/7 provision of their authorized level of care to their primary service area.

The OEMS will be adding to license/certificate of operation renewal forms a mechanism for EMS sponsor hospitals and EMS organizations to indicate which of these skills the service's personnel have been trained and authorized to perform.

Please feel free to contact your OEMS Regional EMS Coordinator with any questions in this regard.



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