



**65-6121. Emergency medical technician; authorized activities.** (a) Notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any of the following activities:

- (1) Patient assessment and vital signs;
- (2) airway maintenance including the use of:
  - (A) Oropharyngeal and nasopharyngeal airways;
  - (B) esophageal obturator airways with or without gastric suction device;
  - (C) multi-lumen airway; and
  - (D) oxygen demand valves.
- (3) Oxygen therapy;
- (4) oropharyngeal suctioning;
- (5) cardiopulmonary resuscitation procedures;
- (6) control accessible bleeding;
- (7) apply pneumatic anti-shock garment;
- (8) manage outpatient medical emergencies;
- (9) extricate patients and utilize lifting and moving techniques;
- (10) manage musculoskeletal and soft tissue injuries including dressing and bandaging wounds or the splinting of fractures, dislocations, sprains or strains;
- (11) use of backboards to immobilize the spine;
- (12) administer activated charcoal and glucose;
- (13) monitor intravenous line delivering intravenous fluids during interfacility transport with the following restrictions:
  - (A) The physician approves the transfer by an emergency medical technician;
  - (B) no medications or nutrients have been added to the intravenous fluids; and
  - (C) the emergency medical technician may monitor, maintain and shut off the flow of intravenous fluid;
- (14) use automated external defibrillators;
- (15) administer epinephrine auto-injectors provided that:
  - (A) The emergency medical technician successfully completes a course of instruction approved by the board in the administration of epinephrine;
  - (B) the emergency medical technician serves with an ambulance service or a first response organization that provides emergency medical services; and
  - (C) the emergency medical technician is acting pursuant to medical protocols;
- (16) perform, during nonemergency transportation, those activities specified in this section when specifically authorized to perform such activities by medical protocols; or
- (17) when authorized by medical protocol, assist the patient in the administration of the following medications which have been prescribed for that patient: Auto-injection epinephrine, sublingual nitroglycerin and inhalers for asthma and emphysema.

(b) An individual who holds a valid certificate as an emergency medical technician at the current basic level once successfully completing the board prescribed transition course, and validation of cognitive and psychomotor competency as determined by rules and regulations of the board, may apply to transition to become an emergency medical technician. Alternatively, upon application for renewal, such individual shall be deemed to hold a certificate as an emergency medical technician under this act, provided such individual has completed all continuing education hour requirements inclusive of successful completion of a transition course, and such individual shall not be required to file an original application for certification as an emergency medical technician.

(c) "Renewal" as used in subsection (b), refers to the first opportunity after December 31, 2011, that an emergency medical technician has to apply for renewal of a certificate following the effective date of this act.

(d) Emergency medical technicians who fail to meet the transition requirements as specified may successfully complete the board prescribed emergency medical responder transition course, provide validation of cognitive and psychomotor competency and all continuing education hour requirements inclusive of the successful completion of a transition course as determined by rules and regulations of the board. Alternatively, upon application for renewal of an emergency medical technician certificate, the applicant shall be deemed to hold a certificate as an emergency medical responder under this act, and such individual shall not be required to file an original application for certification as an emergency medical responder.

(e) Failure to successfully complete either an emergency medical technician transition course or emergency medical responder transition course will result in loss of certification.

(f) Upon transition, notwithstanding any other provision of law to the contrary, an emergency medical technician may perform any activities identified in K.S.A. 65-6144, and amendments thereto, and any of the following interventions, by use of the devices, medications and equipment, or any combination thereof, after successfully completing an approved course of instruction, local specialized device training and competency validation and when authorized by medical protocols, or upon order when direct communication is maintained by radio, telephone or video conference is monitored by a physician, physician assistant when authorized by a physician, an advanced practice registered nurse when authorized by a physician or a licensed professional nurse when authorized by a physician, upon order of such person:

- (1) Airway maintenance including use of:
  - (A) Single lumen airways as approved by the board;
  - (B) multilumen airways;
  - (C) ventilator devices;
  - (D) forceps removal of airway obstruction;
  - (E) CO2 monitoring;
  - (F) airway suctioning;
- (2) apply pneumatic anti-shock garment;
- (3) assist with childbirth;
- (4) monitoring urinary catheter;
- (5) capillary blood sampling;
- (6) cardiac monitoring;
- (7) administration of patient assisted medications as approved by the board;

- (8) administration of medications as approved by the board by appropriate routes; and
- (9) monitor, maintain or discontinue flow of IV line if a physician approves transfer by an emergency medical technician.

**History:** L. 1988, ch. 261, § 21; L. 1990, ch. 235, § 3; L. 1991, ch. 203, § 4; L. 1994, ch. 154, § 4; L. 1998, ch. 133, § 7; L. 2002, ch. 203, § 2; L. 2010, ch. 119, § 5; L. 2011, ch. 114, § 84; L. 2011, ch. 114, § 62; Jan. 1, 2012.