

P09: Palliative Care - Medications Prepared for Deferred Subsequent Use

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Reviewed:

Introduction

In November 2020, the Emergency Medical Assistant Licensing Board (EMALB) provided direction and support with regards to the preparation of medications for deferred, subsequent use. Medication administration and assistance are permitted under the EMA Regulations, while dispensing is a controlled act performed by various professions under the authority of other statutes and regulations.

Essentials

Under this guideline, advanced care paramedics (ACPs) are permitted to prepare a palliative care medication for parenteral use and administration by a family member or household caregiver, after the paramedic has left the scene.

An ACP with the appropriate license endorsements (Schedule 2, Section 4(b)) is permitted to prepare a palliative care medication for parenteral use and administration by a family member or household caregiver after the paramedic has left the scene under the following conditions:

1. The medication is specified and prepared in accordance to a palliative care management plan developed and authorized by a physician or nurse practitioner;
2. The medication has already been prescribed to the patient and is in the possession of the patient (i.e., the paramedic is not providing the medication from BCEHS supply); and,
3. Authorization from an EPOS physician has been obtained if the medication is not specified in the Regulation; and
4. The ACP has successfully completed the BCEHS - Schedule 2 Endorsement: Palliative Medication on the PHSA Learning Hub; and
5. The ACP has received the EMA Regulation Schedule 2, Section 4(b) endorsement for administration of drug therapy on the direct order of a medical practitioner who is designated by BCEHS as a Transport Advisor.

Additional Treatment Information

- Paramedics will complete a full history, obtain a full set of vital signs, and conduct a patient assessment prior to the preparation of palliative medications for administration by a family member or household caregiver.
- Paramedics will complete a full ePCR, documenting the nature of the call, any collaborative care, and ensure that the patient signs the refusal of transport or referral of care section (as appropriate).

Referral Information

Clinical Pathway: Palliative Clinical Pathway (ASTaR link forthcoming)

Interventions

First Responder

Not authorized.

Emergency Medical Responder – All FR interventions, plus:

Not authorized.

Primary Care Paramedic – All FR and EMR interventions, plus:

Only authorized to administer medications under existing scope.

Advanced Care Paramedic – All FR, EMR, and PCP interventions, plus:

CliniCall consultation required.

Authorized to prepare palliative medication for administration by a family member or household caregiver, following EPOS consult, under the provisions of a Schedule 2, Section 4(b) endorsement.

Community Paramedic (CP) Interventions

Authorized to administer medications under existing scope.

Critical Care Paramedic – All FR, EMR, PCP, and ACP interventions, plus:

Authorized as per operational scope.

