



PARAMEDICS
AUSTRALASIA

Paramedicine Role Descriptions

The following paramedical role descriptors have been developed by Paramedics Australasia to provide an introduction to the current clinical roles within Paramedicine in Australia and New Zealand. Within Paramedicine there are a variety of different clinical roles and scopes of practice. This work covers the broad classifications of professional, technical and communications streams of practice.

Due to the current absence of national regulation in Australia and New Zealand, the scope of practice for individuals engaged within Paramedicine varies between jurisdictions, practice settings and engaging organisations. The different legislative frameworks in Australia and New Zealand give rise to local variations in practice such as, for example, controlled substances legislation.

A paramedic serving in the Australian or New Zealand Defence Forces operates in accordance with the activities for which they have been given the authority to perform. This is determined by the individual's education and competence, the environment in which they practice and the requirements of the relevant defence service.

For those seeking employment within Paramedicine it is important to be aware that each organisation sets its own employment criteria and selects applicants on merit.

The clinical roles currently found within Paramedicine are described below.

PROFESSIONAL STREAM

- Paramedic (Paramedic)
- Intensive Care Paramedic (ICP)
- Retrieval Paramedic (RP)
- General Care Paramedic (GCP)

TECHNICAL STREAM

- First Responder (FR)
- Patient Transport Attendant – Level 1 (PTA1)
- Patient Transport Attendant – Level 2 (PTA2)
- Basic Life Support Medic (BLSM)

AMBULANCE COMMUNICATIONS STREAM

- Emergency Medical Dispatch Support Officer (EMDSO)
- Emergency Medical Dispatcher (EMD)

Descriptor Sections

Other vocational titles: A list of vocational titles used by Australasian paramedical services: public, private and defence.

Definition: A statement that explains the role.

Education: The education, qualification and experiential learning requirements to fulfil the role.

Operation: An overview of the purpose, vocational contexts and clinical practice outcomes of the role.

Scope of practice: Clinical and operational expectations of practice in this role.



Professional Stream

Paramedic

Other vocational titles Ambulance Paramedic, Paramedic 3, Advanced Care Paramedic, Intermediate Life Support (ILS) Paramedic, Australian Defence Force (ADF) - Medic* or Advanced Medical Technician*, Combat Paramedic (Australian Army), New Zealand Defence Force (NZDF) – Medic (Intermediate Life Support Level)

Other roles using this level of practice (+additional specialist training) Underwater Medic (Royal Australian Navy and Australian Army)

Definition A Paramedic is a health professional who provides rapid response, emergency medical assessment, treatment and care in the out-of-hospital environment.

Education Bachelor Degree in Paramedic or Health Science (or equivalent) and completion of an internship program.

The Diploma of Paramedical Science (Ambulance) is still used by some organisations engaging paramedics as the entry qualification for this level. This educational pathway is reducing with a progressive shift to university-based undergraduate or postgraduate education. All major ambulance services across Australia have now made the decision to move to 'entry to practice' paramedic qualifications via these university programs.

The Australian Defence Force (ADF) concurrently trains medics using the Diploma of Paramedical Science (Ambulance) and the Diploma of Nursing (which is required for registration as a Division 2 Nurse with Australian Health Practitioner Regulation Agency (AHPRA)) as part of the ADF Medic Course.

The NZDF currently uses the Diploma of Military Medicine (level 6) for qualification at this level.

Paramedics with overseas registration and qualifications are currently assessed on an individual basis.

Other Requirements A current unrestricted drivers licence (a general car licence is sufficient in most organisations engaging paramedics).

As paramedics are required to undertake a variety of physical tasks, in some cases over a prolonged period, a suitable level of general health and fitness is required. This level of fitness is prescribed in more detail by individual employers.

Paramedics are required to confirm their suitability to work with vulnerable groups such as children and the elderly via a criminal history check.

Paramedics entering the ADF are required to be Australian citizens.

Paramedics wishing to enlist in the NZDF are required to be residents of New Zealand.

Defence force applicants will be required to attain a security clearance appropriate to their role and assessment of the suitability for a security clearance will occur. Defence paramedics must successfully complete basic military training before commencing any advanced clinical training programs or operational practice.

Operation

Paramedics respond to, assess and manage patients, transport them to a health facility for ongoing care if necessary or arrange alternative referral, treatment or care options. ADF medics are also responsible for initial primary health care assessments and perform some nursing related roles.

This is the base level professional stream practice in Paramedicine.

The paramedic is often required to make complex and critical clinical judgements without direct supervision. Individuals are responsible for their own continuing professional development which may be supplemented by employer-provided training.

A paramedic may be engaged by a statutory ambulance service, private paramedic service, academic/teaching institution or defence force. They may operate in a variety of community, industrial, resource sector, education, defence or event/public gathering settings. Paramedics also play a key role in the response phase of major incidents or natural disasters such as bushfires or floods.

Commonly, this professional is deployed as part of a two-person crew and operates from a specially designed ambulance that is equipped with a stretcher and a range of clinical equipment. Some paramedics will operate in a solo response capacity. Paramedics involved in education may work in a variety of roles in the university, vocational education & training (VET) or in-service contexts.

Defence force paramedics deliver out-of-hospital care as solo practitioners and also in team environments alongside other health professionals or a merger of specialties. Paramedics engaged in defence forces provide health care to support and maintain the health and well-being of defence force/allied personnel and civilians in times of conflict, disaster or peacetime. This may include the delivery of health care within austere environments and on or in a variety of platforms, such as on land (on foot or in-vehicle), aerospace or on ships. They may attend in situations ranging from a controlled environment through to routine and emergency medical management where a paramedical response is required.

The paramedic may take professional responsibility for the mentoring and support of student and developing paramedics.

Scope of practice

- Australian Resuscitation Council – Intermediate life support including use of supraglottic airway devices e.g. LMA
- New Zealand intermediate life support as defined by Ambulance Service Sector Standard 8156 and New Zealand National Clinical Guidelines
- Use of infection control practices relevant to the clinical environment
- Emergency management of the unconscious patient, cardiac arrest, asthma, anaphylaxis, burns, narcotic overdose, chest pain, acute cardiogenic pulmonary oedema (ACPO), hypoglycaemia, pain control (using narcotics), seizures, traumatic brain injury, spinal injury, abnormalities of ventilation, neurovascular incidents & hypovoleamia
- Use of a range of medications (S4 and S8)
- Electrocardiogram (ECG) monitoring and interpretation
- Mental health crisis intervention
- Management of patients across the lifespan including obstetric emergencies and childbirth
- Use of a stretcher and other patient movement devices
- Emergency driving
- Emergency management and triage
- Extrication and basic rescue
- Access to a range of patient referral pathways (depending upon local circumstance)
- *Basic nursing (AHPRA Division 2 Registration)

Intensive Care Paramedic (ICP)

Other vocational titles Mobile Intensive Care Ambulance (MICA) Paramedic, Clinical Manager (Royal Australian Navy), Intensive Care Paramedic (ALS), Level 5 Paramedic

Other roles using this level of practice (+additional specialist training) Rescue Paramedic, Special Casualty Access Team Paramedic, Underwater Medic (Royal Australian Navy and Australian Army)

Definition An intensive care paramedic (ICP) is an advanced clinical practitioner in Paramedicine who provides medical assessment, treatment and care in the out-of-hospital environment for acutely unwell patients with significant illness or injury.

Education Pre-requisite: Paramedic (with postgraduate experience)

Postgraduate study e.g. Graduate Diploma (ICP) or Masters (ICP) and completion of an internship program.

The Advanced Diploma of Paramedical Science (Ambulance) is still used in some Australian locations as the entry qualification for this level.

New Zealand currently requires either an industrial training qualification or a Postgraduate Certificate in Advanced Paramedic Practice. NZDF currently uses a Level 6 Graduate Diploma in Health Science to achieve this level.

Operation ICPs respond to patients experiencing an acute, life-threatening emergency. They provide rapid and specialist clinical assessment by implementing a targeted management plan for patients with significant alteration or challenge to normal homeostatic function. Whilst this role is tasked with providing clinical oversight during the management of these cases, all patient care is undertaken in a collaborative context with other paramedic staff or health care professionals in attendance.

The ICP is required to make rapid, often complex and critical clinical judgements without direct supervision. Individuals are responsible for their own continuing professional development which may be supplemented by employer-provided training.

An ICP is usually engaged by a statutory ambulance service, private paramedic service or defence force and may operate in a variety of community, industrial, resource sector, defence or event/public gathering settings including disaster response.

This professional may be deployed as part of a two-person crew operating in an ambulance equipped with a stretcher and specialist clinical equipment or may practice as a single operator from a purpose-designed response vehicle (typically a marked station wagon).

Defence force ICP's deliver out-of-hospital care as solo practitioners and in team environments alongside other health professionals or a merger of specialties. ICP's engaged in defence forces provide health care to support and maintain the health and well being of defence force/allied personnel and civilians in times of conflict, disaster or peacetime. This may include the delivery of health care within austere environments and on /in a variety of platforms such as on land (on foot or in-vehicle), aerospace or on ships. They may attend in situations ranging from a controlled environment through to routine and emergency medical management where a paramedical response is required.

The ICP may take professional responsibility for the mentoring and support of paramedics, developing ICP's, paramedics and students.

- Scope of practice
- Includes paramedic scope of practice
 - Australian Resuscitation Council – Advanced Life Support
 - New Zealand Advanced Life Support as defined by Ambulance Service Sector Standard 8156 & New Zealand National Clinical Guidelines
 - Advanced airway management (including medication facilitated intubation in some jurisdictions)
 - Intra-osseous access
 - External cardiac pacing and synchronised cardioversion
 - Advanced clinical management of pain, ACS and cardiac dysrhythmias including cardiac arrest, trauma and abnormalities of ventilation
 - Use of an expanded range of medications relevant to the role



Retrieval Paramedic (RP)

Other vocational titles Flight Paramedic, Air Ambulance Paramedic, MICA Flight Paramedic, Critical Care Paramedic, Flight ICP, Aero Medical Evacuation Medic (ADF)

Other roles using this level of practice (+additional specialist training) Rescue Paramedic, Special Casualty Access Team Paramedic

Definition A retrieval paramedic (RP) is an advanced clinical practitioner in Paramedicine who provides medical assessment, treatment and care in the out-of-hospital environment to facilitate the safe and effective transfer of critically unwell patients to a specialist receiving facility.

Education Pre-requisite: Intensive care paramedic (with postgraduate experience)
Specialist postgraduate study e.g. Graduate Certificate (RP) or Masters (RP) and completion of an internship program

New Zealand currently requires a Postgraduate Certificate in Advanced Paramedic Practice or relevant industrial training program.

The ADF currently uses an internally accredited Rotary Wing and/or Fixed Wing Aero Medical Evacuation (RWAME / FWAME) course to credential for this level.

The NZDF currently uses an internally accredited Fixed and Rotary Wing course to credential for this level.

Operation RPs respond to critically unwell patients based on either initial information from an incident scene (referred to as a primary response) or where patients have been assessed by a primary treating clinician (e.g. general practitioner/primary responding ambulance crew) as requiring transfer to a specialist clinical facility. The role liaises extensively with onsite clinicians and undertakes a specialist clinical assessment and implements a patient management plan to support the safe transfer of these often complex and time critical patients.

The RP is required to make complex and critical clinical judgements often without direct supervision. Like all other professional levels, individuals are responsible for their own continuing professional development which may be supplemented by any employer provided training.

An RP is usually engaged by a statutory ambulance service or private paramedic/retrieval service and may operate in a variety of settings such as high acuity inter-hospital transfers or primary and disaster response.

This professional may be deployed as part of a two-person crew operating in conjunction with a medical doctor or may operate as a single practitioner. They may operate from either a road ambulance or aero-medical (fixed or rotary wing) platform settings. RP's engaged in defence forces may operate in peacetime, disaster and conflict situations either within or outside of specialist AME units or squadrons.

The RP may take professional responsibility for the mentoring and support of other health care professionals both within and outside of Paramedicine.

- Scope of practice
- Includes intensive care paramedic scope of practice
 - Advanced clinical assessment including interpretation of blood tests and x-rays
 - Specialist clinical management to support the safe transfer of critically injured or ill patients to definitive care
 - Rapid sequence intubation
 - Use of mechanical ventilators and medication administration devices
 - Use of an expanded range of medications relevant to the role



General Care Paramedic (GCP)

Other vocational titles	Extended Care Paramedic, Community Paramedic
Definition	<p>A general care paramedic (GCP) is an advanced clinical practitioner in Paramedicine who specialises in facilitating a comprehensive medical history/assessment, initiation of relevant treatment and appropriate referral for low and medium acuity patients in a variety of community and clinical settings with an emphasis on managing a patient in their own environment/context.</p>
Education	<p><u>Pre-requisite:</u> Paramedic (with postgraduate experience)</p> <p><i>In some paramedical services it is currently a requirement to achieve intensive care paramedic practice as the entry qualification for this level.</i></p> <p>Postgraduate study i.e. Masters (GCP) and completion of an internship program.</p> <p><i>Currently in Australia and New Zealand, GCP's are usually educated via internal development programs developed and delivered by employing service providers</i></p>
Operation	<p>GCPs attend both scheduled and unscheduled low acuity patients where they undertake a thorough clinical assessment of the patient's medical history and condition, order any pathology testing as required, interpret the results and, based on a clinical diagnosis, institute a short to medium term care plan with appropriate medical referral as required. The GCP has a significant understanding of pathophysiology, pharmacology and disease process.</p> <p>The GCP makes complex and critical clinical judgements in a multidisciplinary, collaborative team environment ensuring involvement of the patients primary treating health care professional, where possible, and without direct supervision. Individuals are responsible for their own continuing professional development which may be supplemented by employer provided training.</p> <p>This relatively new professional role has meant that GCPs have been mostly engaged by statutory ambulance services. However with the future expansion of this role and the associated scope of practice, it is anticipated that these practitioners may be engaged by hospitals (particularly rural and remote), health care clinics, private sector providers or be self-employed (as occurs in other countries). This role currently operates predominantly in the community, residential aged care or supported care facilities or, on occasions, in rural and remote hospitals and clinics.</p> <p>Typically this professional is deployed as a single operator in a purpose equipped vehicle without stretcher capacity or as an expert clinical resource in an ambulance communications facility. It is anticipated that as this role becomes better recognised, these practitioners will also operate from small hospital emergency departments, health care clinics or in the industrial/private sector.</p> <p>The GCP takes professional responsibility for actively participating in the multidisciplinary health care team providing leadership and support where relevant. This practitioner also actively participates in the mentoring and support of other paramedic staff.</p>

- Scope of practice
- Includes paramedic scope of practice
 - Specialist patient assessment including point of care blood testing, ordering plain film x-rays and various specimen testing
 - Immunisations e.g. tetanus, influenza, hepatitis
 - Specialist management of wounds (cleaning, closure and dressing), infections (including a broad range of oral and IV antibiotics), dehydration, soft tissue injury, chronic pain and palliative care
 - Use of an expanded range of medications relevant to the role
 - Reduction of common dislocations e.g. patella, anterior shoulder, finger
 - Urinary catheter (male and female) and percutaneous endoscopic gastrostomy (PEG) tube reinsertion
 - Use of a wide range of generalist and specialist referral pathways: general medical practitioner, district nurses, palliative care services and community social services





Technical Stream

First Responder (FR)

Other vocational titles	Ambulance Responder, Combat First Aider (Australian Army), Community Responder, Primary Care, Defence First Aider & Combat Life Saver (NZDF)
Definition	A first responder (FR) is an individual who has completed accredited training in advanced first aid and emergency scene management and responds to emergency situations to provide initial clinical management in the out-of-hospital environment.
Education	<p>Australia: Certificate II in Emergency Medical Service First Response</p> <p><i>This level is used in some situations as a midpoint achievement credential for student BLS Medics (description to follow).</i></p> <p>New Zealand: Pre-Hospital Emergency Care Course</p>
Other Requirements	Same as for the Paramedic but appropriate to the FR role e.g. in some contexts may not require a drivers licence.
Operation	<p>FRs attend to patients and provide initial patient management whilst awaiting the arrival of a practitioner who can deliver a higher level of clinical care and/or transport the patient to a health facility or arrange an alternative care pathway.</p> <p>The FR undertakes primary clinical management in relation to a known range of common clinical situations usually via the implementation of structured protocols.</p> <p>A FR is typically engaged by a statutory ambulance service, private paramedic service or a defence force and may operate in a variety of community, rural/remote, industrial, resource sector, defence or event/public gathering settings including disaster response. Many police officers and fire personnel are trained and operate as FRs.</p> <p>Typically the FR is deployed as a single operator with a limited range of equipment. They may or may not be supplied with a first response ambulance vehicle. FR's in defence forces may operate on foot (or from a vehicle) and without the capability to rapidly access additional clinical support in both peacetime and conflict situations.</p>
Scope of practice	<ul style="list-style-type: none">• Advanced first aid• Use of infection control practices relevant to the clinical environment• Use of an automated external defibrillator• Emergency management of cardiac arrest• Basic airway management• Administration of a limited range of medications according to protocol e.g. oxygen therapy, inhaled analgesia and adrenaline via an auto-injector• Spinal stabilisation• Basic emergency triage

Patient Transport Attendant - Level 1 (PTA1)

Other vocational titles	Patient Transport Officer, Ambulance Officer
Definition	A patient transport attendant – level 1 is an individual who has completed accredited training in advanced first aid and patient transport and who provides quality care and transport for low acuity and non-ambulant stable patients between health facilities and/or home.
Education	Australia: Certificate III in Non-emergency Client Transport
Other Requirements	Same as for the Paramedic but appropriate to the PTA1 role.
Operation	<p>Patient transport attendants – Level 1 (PTA1) attend to scheduled, clinically stable patients with the aim of transporting them to a health facility for ongoing care or a residence following discharge, where there is no expected requirement for clinical intervention. PTA1's may be required to perform a FR role if a patient's condition unexpectedly deteriorates, they incidentally come across a clinical incident while in transit, or if tasked by a statutory ambulance service in times of significant emergency workload or disaster response.</p> <p>The PTA1 undertakes clinical management with limited autonomy in relation to a known range of clinical situations usually via the implementation of structured protocols. A thorough medical assessment is used to identify a patient's suitability to be managed by these staff.</p> <p>A PTA1 is usually engaged by a statutory or private ambulance service or paramedic service provider. Some PTA1's are employed directly by hospitals in Australia.</p> <p>Typically these individuals are deployed as part of a two-person crew and operate from an ambulance vehicle which contains limited clinical equipment and is equipped with at least one stretcher. The PTA1 may provide care during the transport of more than one patient in a purpose-built, multi-patient capacity vehicle where the patients have been assessed as clinically and otherwise compatible.</p>
Scope of practice	<ul style="list-style-type: none">• Advanced first aid• Use of an automated external defibrillator (AED)• Use of infection control practices relevant to the clinical environment• Emergency management of cardiac arrest• Basic airway management• Administration of a limited range of medications according to protocol e.g. oxygen therapy, inhaled analgesia and adrenaline via an auto-injector• Use of stretchers and patient movement devices• Emergency triage• Non-emergency driving

Patient Transport Attendant - Level 2 (PTA2)

Other vocational titles	Ambulance Officer (Patient Transport Service)
Definition	A patient transport attendant – level 2 (PTA2) is an individual who has completed accredited training in patient transport and management and who provides quality care and transport for medium acuity, stabilised patients between health facilities and/or home.
Education	Australia: Diploma of Paramedical Science (Ambulance)
Other Requirements	Same as for the Paramedic but appropriate to the PTA2 role.
Operation	<p>PTA2's attend to scheduled, clinically stabilised patients with the aim of transporting them to a health facility for ongoing care (or a residence following discharge) where there is a possibility of the requirement for clinical intervention during the transfer. These patients may require ongoing clinical monitoring which may involve the taking of basic observations or ECG rhythm strip.</p> <p>On occasions PTA2's may be required to perform an FR role if a patient's condition unexpectedly deteriorates, they incidentally come across a clinical incident in transit, or if tasked by a statutory ambulance service in times of significant emergency workload or disaster response.</p> <p>The PTA2 undertakes clinical management with greater individual responsibility and autonomy than the PTA1 in relation to a range of situations where individuals are expected to demonstrate initiative and judgement in clinical practice. Practice, particularly the administration of medications, is usually regulated via structured protocols.</p> <p>A PTA2 is usually engaged by a private ambulance service or paramedic service provider.</p> <p>Typically these individuals are deployed as part of a two-person crew and operate from an ambulance vehicle which contains a range of relevant clinical equipment and is equipped with at least one stretcher. The PTA2 may provide care during the transport of more than one patient in a purpose-built, multi-patient capacity vehicle where the patients have been assessed as clinically and otherwise compatible.</p> <p>The PTA2 takes some responsibility for the work of others and the mentoring and support of student PTA's.</p>

- Scope of practice
- Australian Resuscitation Council - Basic Life Support including use of Laryngeal Mask Airway
 - Use of infection control practices relevant to the clinical environment
 - Use of ECG monitor, basic interpretation of ECG rhythm strip and pulse oximetry
 - Use of an automated and/or manual external defibrillator
 - Emergency management of cardiac arrest
 - Transfer of patients experiencing a mental health crisis or subject to detention orders
 - Administration of a limited range of medications according to protocol
 - Ongoing management of intravenous infusions
 - Spinal stabilisation
 - Use of stretchers and patient movement devices
 - Emergency triage
 - Emergency driving



Basic Life Support Medic (BLSM)

Other vocational titles Ambulance Officer, Paramedic 1, Ambulance Volunteer, Ambulance Community Officer, Emergency Medical Technician (BLS)

Definition A basic life support medic (BLSM) is an individual who has completed accredited training in emergency patient care to provide rapid access to clinical assessment, treatment and care in the out-of-hospital environment (particularly in rural and remote areas).

Education Australia: Certificate IV in Health Care (Ambulance)
New Zealand: National Diploma in Ambulance Practice (level 5)

Other Requirements Same as for the Paramedic.

Operation BLS Medics respond to, assess and manage patients in an emergency situation and facilitate either the attendance of a higher level of clinical response or transport the patient to a health facility for ongoing care. The BLS Medic may also facilitate the transfer of patients between health facilities or a residence for which the patient is clinically suitable and there are no other suitable resources available to achieve this.

The BLS Medic is required to operate without direct supervision and perform a defined range of routine and non-routine clinical management strategies in the emergency patient intervention setting.

A BLSM is usually engaged by a statutory ambulance service, private paramedic service or a defence force and may operate in a variety of rural and remote, community, industrial, resource sector, defence or event/public gathering settings including disaster response. Many of the volunteers operating in the Australian & New Zealand Paramedicine context are expected to achieve relevant competency and operate at this clinical level.

Typically these individuals are deployed as part of a two-person crew and operate from an ambulance vehicle that is equipped with a stretcher and a range of clinical equipment.

The BLS Medic takes some responsibility for the work of others and the mentoring and support of student BLS Medics.

- Scope of practice
- Australian Resuscitation Council - Basic Life Support including use of Laryngeal Mask Airway
 - New Zealand Basic Life Support as defined by Ambulance Service Sector Standard 8156 & New Zealand National Clinical Guidelines
 - Use of infection control practices relevant to the clinical environment
 - Attendance at and initial management of the full range of emergency callouts
 - Use of ECG monitor and pulse oximetry
 - Use of an automated external defibrillator
 - Emergency management of cardiac arrest
 - Administration of a limited range of medications according to protocol to assist with the management of asthma, anaphylaxis, burns, narcotic overdose, chest pain, ACPO, hypoglycaemia, pain control & seizures
 - Mental health crisis intervention
 - Management of patients across the lifespan including emergency childbirth (uncomplicated)
 - Ongoing management of intravenous infusions
 - Spinal stabilisation
 - Use of stretchers and patient movement devices
 - Emergency triage
 - Emergency driving



***Ambulance
Communications
Stream***

Emergency Medical Dispatch Support Officer (EMDSO)

Other vocational titles	Call taker, Assistant Control Centre Officers, Emergency Medical Dispatch Call Taker
Definition	An emergency medical dispatch support officer (EMDSO) is an individual who has completed accredited training to receive and process requests for both emergency (via 000) and non-emergency ambulance attendance.
Education	<p>Australia: Certificate III in Ambulance Communications (Call-taking)</p> <p><i>If operating with a paramedic service provider that uses AMPDS®, accreditation via the National Academies of Emergency Dispatch (NAED) is required in this telephone triage system. (Please note that not all paramedic service providers use the above product as their call triage tool)</i></p> <p><i>Not all employers of EMDSO's in Australia use the above qualification for entry.</i></p>
Operation	<p>EMDSOs are most often the first point of interaction between a patient and a paramedical service. These staff are responsible for receiving calls for both emergency and non-emergency ambulance response from a variety of sources e.g. members of the public, health care professionals and residential care facilities. The location of all calls for assistance is rapidly established and a structured process of triage undertaken to identify the urgency of ambulance response required. Once this has been obtained and data entered, where relevant, the EMDSO will provide scripted first aid advice to the caller to commence patient management whilst the service provider is responding.</p> <p>The EMDSO is required to operate within the defined operating processes of the respective call taking system/software being used by the ambulance service. EMDSO's usually work under the indirect supervision of a communications team leader. Some continuing accreditation requirements exist in relation to some of the proprietary call taking triage products.</p> <p>An EMDSO is usually engaged by statutory ambulance services or multifunction emergency call centres.</p> <p>Typically this role operates individually in a call centre environment with communication and IT infrastructure to support the required functions. This role requires a high level of verbal communication skills and ability to use and interpret medical terminology</p> <p>The EMDSO takes responsibility for the mentoring and support of student EMDSO's.</p>
Scope of practice	<ul style="list-style-type: none">• Apply advanced first aid• Use of telephone communications, mapping and computer aided dispatch (CAD) technology to support the role• Use of telephone triage software including providing first aid advice and caller support• Use of an interpreter service to assist with the management of information from culturally and linguistically diverse callers

Emergency Medical Dispatcher (EMD)

Other vocational titles	Ambulance Coordinator, Ambulance Controller, Control Centre Officers
Definition	An emergency medical dispatcher (EMD) is an individual who has completed accredited training to triage and coordinate the timely deployment of requests for both emergency and non-emergency ambulance attendance.
Education	Australia: Certificate IV in Ambulance Communications (Dispatch) <i>Not all employers of EMD's in Australia use the above qualification for entry.</i>
Operation	EMDs are responsible for the coordination of service provider resources within a defined geographic area in order to respond to requests for both emergency and non-emergency ambulance in a timely manner. EMD's have the crucial responsibility for ensuring that the right paramedical resource is sent to the right patient at the right time.

EMD's will commonly liaise with counterparts in emergency services in relation to attendance requirements.

The EMD is required to operate within the defined processes and business rules being used by the respective ambulance service. EMD's often work with significant autonomy whilst under the indirect supervision of a communications team leader.

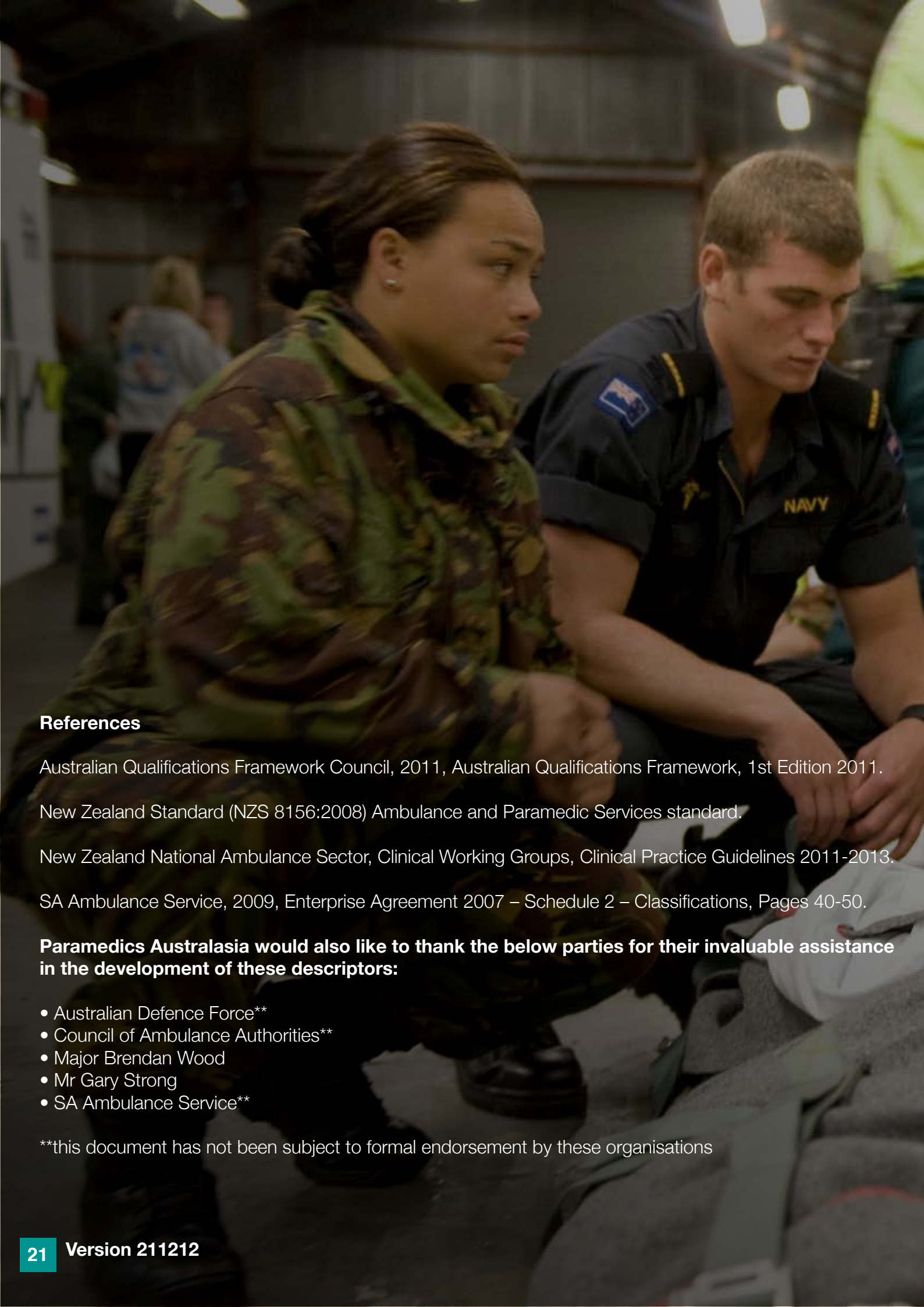
An EMD is usually engaged by statutory ambulance services or multifunction emergency call centres.

Typically this role operates individually in a booth with communication and IT infrastructure to support the required functions.

The EMD takes responsibility for the mentoring and support of student EMD's and provides feedback and support to EMDSO's.

Scope of practice	<ul style="list-style-type: none">• Includes EMDSO scope of practice• Use of radio and data communications to support role• Use of computer aided dispatch (CAD) and automatic vehicle location (AVL) systems
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A woman in military camouflage and a man in a navy uniform are sitting together in a medical setting. The woman is on the left, looking towards the right. The man is on the right, looking down at something in his hands. The background is slightly blurred, showing other people and equipment.

References

Australian Qualifications Framework Council, 2011, Australian Qualifications Framework, 1st Edition 2011.

New Zealand Standard (NZS 8156:2008) Ambulance and Paramedic Services standard.

New Zealand National Ambulance Sector, Clinical Working Groups, Clinical Practice Guidelines 2011-2013.

SA Ambulance Service, 2009, Enterprise Agreement 2007 – Schedule 2 – Classifications, Pages 40-50.

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