



EMSIB 2020-10

DATE: March 31, 2020

SUBJECT: EMS Providers Obtaining Nasopharyngeal Swabs

TO: EMS Agencies
EMS Agency Medical Directors

FROM: Douglas Kupas, MD, State EMS Medical Director
Bureau of EMS

Thru: Dylan J. Ferguson, Director
Bureau of EMS

A handwritten signature in black ink, enclosed in a hand-drawn oval. The signature appears to be 'DJF'.

The Bureau of EMS (Bureau) is issuing this Informational Bulletin to clarify that EMS providers at or above the level of AEMT may obtain and label nasopharyngeal (NP) swabs for laboratory analysis, when the provider has been appropriately trained to obtain these samples.

Because EMS providers at or above the level of AEMT are already able to obtain blood specimens, label specimens, and do nasopharyngeal procedures such as, inserting NP airways, administration of intranasal medications, and nasal and bronchial suctioning, the Department considers NP swabbing to be within the scope of practice of these providers. At this point, the published scope of practice in the Pennsylvania Bulletin is not being changed, but the purpose of this EMSIB is to clarify that the Department considers NP swabbing by these providers to be within their scope of practice.

EMS agencies that choose to provide NP swabbing must ensure that the providers are adequately trained to obtain these samples. Viral testing has an increased rate of false negatives when NP swabs are not obtained properly. Additionally, agencies that stock swabs in their vehicles must work with a lab and their medical director to be sure that there is a process for properly labeling, storing, transporting, and dropping off specimens. There must also be a plan for how physicians will order these labs. Due to the shortage of swabs and testing materials, NP swabs should only be done when ordered by a medical command physician (or potential when following protocol in the future).