# EMT Drugs List: Medications EMTs Can Give

The national EMT medication scope with indications, contraindications and typical doses; always follow local protocol

**Medic Basics**
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## EMT DRUGS LIST AT A GLANCE

Under the National EMS Scope of Practice Model, EMTs can give oxygen, oral glucose, aspirin and naloxone, use an epinephrine auto-injector, give inhaled albuterol and ipratropium, and help a patient take their own nitroglycerin. Your state sets the final list and your medical director sets the protocol, so learn the national list for the exam and follow local protocol on the job.

*Typical national doses. States vary; always follow your local protocol and medical direction.*

| DRUG | GIVE IT FOR | TYPICAL DOSE | DO NOT GIVE IF |
|---|---|---|---|
| **Oxygen** | Low SpO2, respiratory distress | Titrate to SpO2 94-98% | Not needed when SpO2 is normal and no distress |
| **Oral glucose** | Low sugar (60 mg/dL or less) with symptoms | 25 g adult; 0.5-1 g/kg child | Cannot swallow or protect the airway |
| **Aspirin** | Suspected heart attack (ACS) | 162-325 mg chewed, non-enteric | Aspirin or NSAID allergy, active GI bleeding |
| **Nitroglycerin (patient's own)** | Chest pain of cardiac origin | 0.4 mg under the tongue q5 min, max 3 | SBP under 100; erectile dysfunction drug in past 48 h |
| **Epinephrine auto-injector** | Anaphylaxis | 0.3 mg adult; 0.15 mg small child; IM thigh | None in anaphylaxis |
| **Albuterol** | Wheezing, bronchospasm | 2.5-5 mg nebulized or patient's inhaler | Allergy; caution with heart-related fast rhythms |
| **Ipratropium** | Asthma or COPD, with albuterol | 0.5 mg nebulized, up to 3 doses | Allergy to ipratropium or atropine |
| **Naloxone** | Opioid overdose with slow breathing | 4 mg nasal spray; repeat in 2-3 min if needed | Breathing adequately (ventilate first if not) |
| **Activated charcoal (if in protocol)** | Recent toxic ingestion | 1 g/kg by mouth, within 1 hour | Unprotected airway, caustic ingestion |

## GIVE IT YOURSELF OR HELP THE PATIENT

- EMT-administered from your kit: oxygen, oral glucose, aspirin, naloxone, epinephrine auto-injector, and in many states albuterol and ipratropium.
- Patient-assisted: nitroglycerin and often the metered-dose inhaler, using the patient's own prescription.
- Before helping with a patient's own drug: right patient name on the label, not expired, and medical direction or protocol allows it.

## CHECKS BEFORE EVERY DOSE

1. Right patient, right drug, right dose, right route, right time.
2. Ask about allergies again.
3. Check the expiration date, clarity and color.
4. Confirm the indication and rule out each contraindication aloud.
5. Reassess and record the effect, vitals and time.

**SAFETY** Nitroglycerin: ask every patient about erectile dysfunction or pulmonary hypertension drugs (sildenafil, vardenafil, tadalafil) in the past 48 hours, and IV epoprostenol or treprostinil. Combined with nitro they can drop the blood pressure dangerously.

**Sources** (5) are listed with links at medicbasics.com/sheets/emt-drugs-list.html. For education and exam preparation only. Not medical advice; follow current guidelines and your institution’s protocols. Medic Basics is an independent study aid not affiliated with any certifying body.