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Certificate of Waiver for
Emergency Medical Technician Scope of Practice
Pursuant to the Provisions of the New Jersey Administrative Code
Specifically, N.J.A.C. 8:40 and N.J.A.C. 8:40A, a waiver is issued to:

All New Jersey Emergency Medical Technicians (EMT) providing Basic Life Support (BLS) services on a BLS ambulance and for a licensed BLS Ambulance Service

Granting relief from the limited scope of practice set out in N.J.A.C. 8:40-7.1(b)6 and 13i and N.J.A.C. 8:40A-10.1(b)6 and 13i

Pursuant to N.J.A.C. 8:40-7.0 and N.J.A.C. 8:40A-10.1, the skills and procedures an EMT is authorized to perform are limited to those outlined in the National Standard Curriculum for EMT-Basics. In 2009, the National Highway Traffic Safety Administration (NHTSA) Office of Emergency Medical Services (EMS) replaced the NHTSA National Standard Curriculum with the National EMS Education Standards. These Standards define the competencies, clinical behaviors, and judgements that EMTs must meet according to the practice guidelines outlined in the Scope of Practice. In order to enhance emergency preparedness for both natural and manmade disasters and to ensure alignment with the National EMS Education Standards and the evolving National Scope of Practice, it is necessary to waive specific provisions of the New Jersey Administrative Code. This waiver will allow the scope of practice for EMTs in New Jersey to reflect current national standards.

Pursuant to N.J.A.C. 8:40-1.4 and N.J.A.C. 8:40A-1.4, the New Jersey Office of Emergency Medical Services (OEMS) may waive a rule provision if the waiver would not "[e]ndanger the life of any person;…[e]ndanger the public health, safety, or welfare; or …[a]dversely affect the provision of basic life support care." OEMS finds that expanding the EMTs scope of practice will not endanger the public health or adversely affect the provision of basic life support care. Rather, this waiver will assist with preserving public and provider health by ensuring proper safeguards are in place to aid clinicians in responding to specific health threats outside the scope of practice outlined in New Jersey Administrative Code. Accordingly, OEMS is issuing this waiver of N.J.A.C. 8:40-7.1 and N.J.A.C. 8:40A-10.1 to expand the EMTs' scope of practice.

Pursuant to the authority granted to the New Jersey Department of Health (the Department) Office of Emergency Medical Services, this waiver authorizes the administration of nerve agent antidote auto-injectors by certified EMTs while providing service under a licensed EMS agency, under the following conditions and provisions:

1. **Scope and Training Authorization**

    a. EMTs are authorized to administer nerve agent antidote auto-injectors upon completion of approved education and demonstrated competency, and upon receiving credentialing by the EMS agency's medical director. This authorization is valid only under the provisions of this waiver and is contingent upon adherence to all applicable protocols, clinical oversight, and documentation requirements established by the Department.

2. Conditions for use.

EMTs are authorized to administer nerve agent antidote auto-injectors to affected patients only under the following conditions:

a. The EMT is responding to a disaster or assigned to a pre-planned event during which the on-scene Incident Commander, in consultation with an EMS physician at the scene, or an on-line medical control physician, has determined that a nerve agent exposure has occurred or is reasonably suspected and authorizes use of the antidote by EMTs for the duration of the operational period.

b. When feasible, consultation with the New Jersey Poison Information and Education System (NJPIES) shall be sought to aid in the decision-making process regarding appropriateness of administration.

c. This authorization may apply to all EMT units that have met the conditions outlines in section (a) and are deployed to the scene or event, provided it is appropriately communicated and documented by the Incident Commander or designated EMS physician.

3. Agency and Medical Oversight Requirements

a. The issuing EMS agency shall be licensed by the Department and shall designate a medical director who is actively involved in the oversight of clinical care, training, and operational implementation related to this waiver.

b. The EMS agency must ensure that EMTs receive hazardous materials awareness level training and education on nerve agent recognition and safety.

c. Personal Protective Equipment (PPE) appropriate to the potential exposure shall be available, and EMTs shall not be expected or authorized to enter contaminated zones unless properly trained and equipped.

d. Only EMTs certified to the level of:

i. A Hazmat Technician, with available appropriate PPE, and authorized by the incident commander may operate in a Hot Zone (treatment zones with known or suspected contamination).

ii. Hazmat Operations, with available appropriate PPE, may operate in the Warm Zone (decontamination and treatment area).

4. Operational Period Authorization

a. Operational period is a defined interval within an EMS response during which specific objectives, tactics, and resource assignments are established and executed.

b. Authorization for EMTs to administer the nerve agent antidote auto-injector shall be reviewed and renewed for each distinct operational period to ensure continuous clinical oversight, situational appropriateness, and resource readiness.

c. For pre-planned events, EMS agencies may submit a request for authorization in advance, detailing anticipated risks, EMS deployment, and medical oversight arrangements in accordance with section 7 of this waiver.

5. Use for Self-Rescue

a. EMTs who have received education, training, and demonstrated competency in the administration of nerve agent antidote auto-injectors are authorized to use them for self-rescue at any time, without prior approval, if exposure is suspected.

6. Documenting and Reporting

In accordance with N.J.A.C. 8:40-3.8 and 3.9, the EMS agency shall maintain comprehensive records documenting:

a. Initial and ongoing education and training in the recognition of nerve agent exposure and the appropriate use of nerve agent antidote auto-injectors.

b. Verification of individual EMT competency through a credentialing process overseen by the agency's medical director.

   i. The agency shall have policies and procedures signed by their medical director regarding the administration of a nerve agent antidote auto-injector, including self-administration.

c. Inventory and deployment of nerve agent antidote auto-injectors across applicable response units.

d. The BLS Ambulance Service shall:

   i. Document all nerve agent antidote auto-injector administrations in a patient care report and include details of exposure, medical oversight consultation, and authorization source.

   ii. Submit data via electronic patient care reporting (ePCR) in accordance with N.J.S.A. 26:2K-67.

   iii. Utilize the EMT's New Jersey EMS Identification number and legal name as the crewmember identification.

   iv. Conduct 100% chart review to ensure skills are performed appropriately and documentation is completed within 24 hours.

   v. Notify OEMS immediately following, but no later than 2 hours following administration via email, telephone, and through an unusual occurrence report.

   vi. Agencies shall provide the Department with the emergency department disposition for every patient treated with a nerve agent antidote auto-injector approved under this waiver.

e. Documentation shall ensure electronic patient care reporting is transmitted to the Department in the following format:

Description	NEMSIS Element	ID Code:	Value
Medication Administered	eMedications.03	1223	Atropine
Medication Administered	eMedications.03	34345	Pralidoxime (2-PAM)
Medication Administered	eMedications.03	717229	Atropine/Pralidoxime (Duodote)

Medication Administered Route	eMedications.04	9927015	Intramuscular (IM)
Medication Dosage	eMedications.05	Numerical Value	Atropine autoinjector: 2mg / 0.7cc
Medication Dosage	eMedications.05	Numerical Value	Pralidoxime autoinjector (2-PAM): 600mg / 2cc
Medication Dosage	eMedicstions.05	Numerical Value	Atropine 2.1mg / 0.7mL, Pralidoxime Chloride 600mg / 2 mL
Medication Dosage Units	eMedications.06	3706021	Milligrams (mg)
Response to Medication	eMedications.07	9916001, 9916003, or 9916005	"Improved", "Unchanged", or "Worse"

f. For more information about electronic patient care reporting, data collection, and software available free of charge go to: https://www.nj.gov/health/ems/data_resources/index.shtml or contact the office at (609) 633-7777.

7. To activate this waiver, the EMS agency shall submit a formal application to ems@doh.nj.gov, including:

a. Request for authorization to expand the EMTs scope of practice to include nerve agent antidote auto-injectors.

b. Attestation from the agency's medical director verifying education, training and credentialing.

c. Description of operational planning (e.g., event or disaster response plan).

d. Anticipated operational period or event(s) during which the antidote may be deployed.

i. In addition to obtaining approval through this waiver, requests for **event specific authorization** shall be submitted as follows:

1. **Pre-planned events:** A written request shall be submitted via email at least 30 days in advance of the scheduled event.

2. **Emergent Events:** Initial requests shall be made by telephone, followed by a formal email submission within 24 hours of initial request.

ii. An event specific waiver control number will be issued for each approved event.

1. Each event waiver will include an associated expiration date.

a. If the event end date is unknown at the time of issuance, the expiration date will be documented as undetermined or listed as none until such time that the Department revokes or explicitly expires the waiver.

iii. NOTE: Each event must be applied for individually in order to be considered active.

e. Acknowledgement of reporting, documentation, record keeping, personnel files, and quality assurance provisions.

f. The full name, signature, email, and telephone number of the Agency's medical director and the owner, chief, or chief executive.

i. The medical director shall:

1. Approve and support the EMTs use of nerve agent antidote auto-injectors.

2. Provide education, oversight, and verify EMT competency of nerve agency antidote auto-injector administration.

Upon receipt of the information required above, the Department shall transmit via email and/or telephone correspondence to the agency indicating whether its request is complete or whether additional information is required. The Department reserves the right to suspend, modify, or revoke an Agency's ability to utilize this waiver for failure to adhere to the requirements outlined above and/or violation of N.J.A.C. 8:40-1.1 et seq. and/or N.J.A.C. 8:40A-1.1 et seq. or any instance that the Department deems to be a threat to public health and safety.

FOR: Jeffrey A. Brown
Acting Commissioner

BY: Candace Gardner, Paramedic
Director
Office of Emergency Medical Services

Novneet Sahu, MD
Medical Director
Office of Emergency Medical Services

DATE ISSUED: June 9, 2025
WAIVER CONTROL NUMBER: 25 – N.J.A.C. 8:40-7.1 & 8:40A-10.1 – 11
EXPIRES: Upon promulgation of new regulations