



**North Country
Regional Emergency Medical
Advisory Committee
Policy Statement**

Serving: St. Lawrence, Jefferson, and Lewis Counties

No. 17-01

Date: 04/03/2017

Updated: 01/27/2020

Re: Approved Alternate
Airways

Page 1 of 1

Supersedes:

PURPOSE

Approval of “Alternate Airway Devices” for use by North Country Advanced Providers.

BACKGROUND

Reference Current NYS Collaborative EMS Protocol Oxygen Administration and Airway Management.

LIMITATIONS

For use by North Country Advanced Care Providers.

EXPECTATIONS

- Combitube or equivalent, LMA, Dual Lumen Airway, King Airway or equivalent, i-gel.
 - Specific devices and training is the responsibility of the Agency and Agency Medical Director.
- Paramedic nasal endotracheal intubation for adults is not approved in the North Country Region, unless ordered by Medical Control and the provider is trained for nasal endotracheal intubation.