This document is designed to provide an overview of the scope of practice for a variety of different health professions. In the event of a critical incident or emergency it is important to have an understanding of the different disciplines and skills that others have to effectively work together in interprofessional medical teams.

**Physician**

The physician will act to maintain wellness, restore wellness or achieve maximal function when illness strikes, and achieve comfort during the process of dying. The physician will serve as a diagnostican, proceduralist, and prescriber of therapies. Additionally, the physician will provide education for patients, healthcare providers, and students within the physician's scope of expertise.

**Resident**

Under the supervision of a physician, the medical resident will care for patients by providing patient education, diagnose medical conditions, perform medical interventions, and prescribe therapies within the resident's scope of expertise. Additionally, the medical resident may act to coordinate care between various team members.
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Medical Student

Under the supervision of a physician, the medical student will provide patient education, collect pertinent patient and situational information, and effectively communicate with the medical team. The medical student may provide basic patient care consistent with his/her own skills and expertise.

Registered Nurse

The practice of professional nursing means the performance of those acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences which shall include, but not be limited to:

1. The observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care; health teaching and counseling of the ill, injured, or infirm; and the promotion of wellness, maintenance of health, and prevention of illness of others.

2. The administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments.
3. The supervision and teaching of other personnel in the theory and performance of any of the above acts.

Advanced Practice Nurse

The Advanced Registered Nurse Practitioner (ARNP) may perform acts of nursing diagnosis and nursing treatment of alterations of the health status. According to the Florida Nurse Practice Act the ARNP may also perform acts of medical diagnosis and treatment, prescription, and operation. According to American Nurses Association (ANA) the APN, will consider her/his own skills and expertise, in conjunction with the clinical setting and the skills and expertise of other members of the healthcare team, including the consultant physician(s).

Pharmacist

Pharmacists have several roles in emergency preparedness from planning how to handle such events to implementation. Some of the roles include:

- Planning and execution of pharmaceutical distribution and control
- Participate in drug therapy management within an interprofessional team
- Triage the need for crucial medications during a disaster
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- Coordinate emergency services to obtain medications from nearby pharmacies
- Participate in the development of plans that involve medications at the local, regional, and state levels
- Dispensing and administration of vaccines in response to large-scale disasters

Physical Therapist

Physical therapy (PT) is a dynamic profession with an established theoretical and scientific base and widespread clinical applications in the restoration, maintenance, and promotion of optimal physical function. PTs are Movement Scientists whose knowledge, skills and abilities are in the human movement system.

PT’s serve roles in primary, secondary and tertiary care, as well as prevention and the promotion of health, wellness, and fitness.

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<tr>
<th>Description</th>
<th>Prevention Role</th>
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<tr>
<td><strong>Primary Care</strong></td>
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<tr>
<td>Practicing across the continuum of activity—acute, rehabilitative, and chronic care management—help individuals restore</td>
<td>Identification of risk factors and implement service to reduce risk in individuals and populations.</td>
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<th>Health and alleviate pain.</th>
<th>Prevent or slow the progression of functional decline and disability, as well as enhance activity and participation in chosen life roles and situations in individuals and populations with an identified condition.</th>
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<td><strong>Secondary Care</strong></td>
<td>Through referral form other practitioners, provide secondary care in a wide range of settings, including acute care and rehabilitation hospitals, outpatient clinics, home health, and school systems.</td>
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<tr>
<td><strong>Tertiary Care</strong></td>
<td>Highly specialized, complex, and technology-based settings (e.g., heart and lung transplant services, burn units) or in response to the requests of other health care practitioners for consultation and specialized services (e.g., for individuals)</td>
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The scope of practice for physical therapists is dynamic, evolving with evidence, education, and societal needs, and has 3 components: professional, jurisdictional, and personal.

- **Professional** – The professional scope of practice of physical therapy is defined as practice that is grounded in the profession’s unique body of knowledge, supported by educational preparation, based on a body of evidence, and linked to existing or emerging practice frameworks.

- **Jurisdictional** – The jurisdictional (i.e. legal) scope of practice is established by a state’s practice act governing the specific physical therapist’s license, and the rules adopted pursuant to that act.

- **Personal** – The personal scope of practice consists of activities undertaken by an individual physical therapist that are situated within a physical therapist’s unique body of knowledge where the individual is educated, trained, and competent to perform that activity.
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The Public Health role in disaster mitigation, preparedness, response and recovery includes:

- Identifying community resources applicable to the physical, social, and psychosocial effects of a disaster.
- Identifying groups most at risk from disasters such as children, older adults, homeless, chronically ill, homebound, physically or mentally disabled.
- Providing disaster education both in advance of (such as what to expect in a disaster) and after (or how to deal with the effects) an event.
- Taking responsibility for the health of a community following a disaster.
- Using such resources as assessment, epidemiology, and data analysis to make and implement recommendations for limiting morbidity and mortality following a disaster.
- Cooperating and collaborating with other partners to ensure that primary health, public health, and mental health issues are adequately addressed in disaster planning.
- Helping to prevent disease by providing health advisories on injury prevention, food and water safety, and vector control.
- Assuring that health services continue after an impact including acute care, continuity of care, primary care and emergency care.
- Communicating with government officials about the public health effects of potential disasters and providing expert assistance during and after disasters.
• Developing and advocating public policies designed to reduce the public health impact of potential disasters.
• Collaborating with other health and human service professionals to rigorously evaluate intervention outcome.