



College of Respiratory
Therapists of Ontario

Ordre des thérapeutes
respiratoires de l'Ontario

PERFORMING AUTHORIZED ACTS WITHOUT AN ORDER

Practice FAQs

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QUESTION

Our hospital is in the process of reviewing the code pink policy and procedure. I know that the *Respiratory Therapy Act (RTA)* states that RTs require an intubation order from a physician or midwife. Assuming that the RT is competent to intubate a neonate, are there any exceptions to this rule (e.g., unexpected meconium delivery)?

ANSWER

Yes, there is an exception to this rule. RTs have the legislative authority to intubate, but that authority is usually conditional on receiving a valid order from a health care professional specified in the *RTA* (such as physicians and midwives). There is an exception in the *Regulated Health Professions Act (RHPA)* that permits “*rendering first aid or temporary assistance in an emergency*”. This is usually applied to situations where someone is required to perform a controlled act when they do not have the legislative authority to do so (e.g., an RT defibrillating a patient during a code). However, this provision could also apply to emergency situations where an RT is required to intubate, or perform another controlled act, without an order. These are generally situations when something unexpected happens and the patient is in urgent need of an intervention, and the RT is the most competent person to provide it at that time.

It's important to note, however, that the “emergency exception” is not intended to replace orders and proper legislative authority. It can be argued that the need to intubate neonates urgently in a hospital is not a true emergency – in that it should be anticipated and planned for in advance. On a continuing basis, this is why a medical directive is a better alternative; because it ensures an order is in place whenever it could be needed. One of the advantages of a medical directive is providing clarity on the parameters the intubation would take place within. This is a much safer scenario for both the patient and the practitioner.