

Classifications	As of (insert here the date of the coming into force of this Decree)	As of 2003 05 30	As of 2004 05 30	As of 2005 05 30	As of 2006 05 30	
(g) production worker B and painter		\$11.75	\$11.75	\$11.99	\$12.22	\$12.47;
(h) labourer: - less than 4 000 hours		\$8.57	\$8.74	\$8.92	\$9.09	\$9.28;
- more than 4 000 hours		\$9.64	\$9.83	\$10.03	\$10.23	\$10.43.”.

**2.** Section 11.01 is amended by substituting the following for paragraphs *a* and *b* :

“(a) his spouse, his child or the child of his spouse : five working days ;

(b) his father, mother, sister or brother : three working days. He is also entitled to another day on that occasion, but without pay ;”.

**3.** Section 13.04 is amended by substituting, in the second paragraph, the following for paragraphs *a* and *b* :

“(a) a maximum amount of \$100 yearly, for the years 2003 to 2006 inclusively, for prescription glasses to employees wearing such glasses to work ; such prescription glasses must have a safety frame ;

(b) a maximum amount of \$100 yearly, for the years 2003 to 2006 inclusively, for safety shoes to any employee having one year of continuous service ; this amount is paid during the first week of September.”.

**4.** The following is substituted for sections 14.01 and 14.02 :

“**14.01.** The employer shall contribute to the social security plan, for each hour worked by his employees, the sum of \$0.55 as of (insert here the date of the coming into force of this Decree), \$0.61 as of (insert here the date of the first anniversary following the date of the coming into force of this Decree), \$0.67 as of (insert here the date of the second anniversary following the date of the coming into force of this Decree) and \$0.76 as of 30 May 2006.

**14.02.** The employer shall deduct from the pay of each of his employees, for each hour worked, the sum of \$0.55 as of (insert here the date of the coming into force of this Decree), \$0.61 as of (insert here the date of the first anniversary following the date of the coming into force of this Decree), \$0.67 as of (insert here the date of the second anniversary following the date of the coming into force of this Decree) and \$0.76 as of 30 May 2006.”.

**5.** The following is substituted for section 14.06 :

“**14.06.** The employer pays into the employee’s pension fund, for each hour worked, the sum of \$0.70 as of (insert here the date of the coming into force of this Decree), \$0.75 as of (insert here the date of the first anniversary following the date of the coming into force of this Decree), \$0.80 as of (insert here the date of the second anniversary following the date of the coming into force of this Decree) and \$0.85 as of 30 May 2006, in accordance with section 14.03.”.

**6.** The following is substituted for section 17.01 :

“**17.01.** The Decree remains in force until 30 May 2006. It is then automatically renewed from year to year thereafter, unless one of the contracting parties opposes its renewal in a written notice sent to the Minister of Labour and to the other contracting parties during the month of February of year 2006 or during the month of February of any subsequent year.”.

**7.** This Decree comes into force on the day of its publication in the *Gazette officielle du Québec*.

5406

## Draft Regulation

Professional Code  
(R.S.Q., c. C-26)

### Physicians

#### — Medical activities that may be performed within the scope of prehospital emergency services

Notice is hereby given, in accordance with the Regulations Act (R.S.Q., c. R-18.1), that the Bureau of the Collège des médecins du Québec, at its meeting held on October 18, 2002, adopted the Regulation respecting medical activities that may be performed within the scope of prehospital emergency services.

The Regulation has been transmitted to the Office des professions du Québec, which will examine it pursuant to section 95 of the Professional Code. It will then be submitted, with the recommendation of the Office, to the Government which may, under the same section, approve it with or without amendment, after the expiry of 45 days following this publication.

According to the Collège des médecins du Québec:

1° the object of this regulation is to determine, among the professional activities that may be performed by physicians, those that may be performed by a first respondent, an ambulance technician and an advanced care ambulance technician within the scope of prehospital emergency services;

2° this regulation determines the terms and conditions, in particular of training, according to which such activities may be performed;

3° as for citizens and the public protection, the regulation anticipates that procedures, methods or limits that must be observed when medical activity provided for this regulation may be performed, must be submitted to the Collège des médecins du Québec for approval; with regard to advanced care ambulance technicians, the regulation will help ensure adequate medical supervision.

Further information may be obtained by contacting, M<sup>e</sup> Édith Lorquet, Assistant to the Executive, Collège des médecins du Québec, 2170, boulevard René-Lévesque Ouest, Montréal (Québec) H3H 2T8; telephone number: (514) 933-4441, extension 362, facsimile number: (514) 933-3112, e-mail: elorquet@cmq.org

Any person having comments to make on the following text is asked to send them, before the expiry of the 45-day period, to the Chairman of the Office des professions du Québec, 800, place D'Youville, 10<sup>e</sup> étage, Québec (Québec) G1R 5Z3. Comments will be forwarded by the Office to the Minister responsible for the administration of legislation respecting the professions; they may also be sent to the professional order that has adopted the Regulation, namely the Collège des médecins du Québec, as well as to interested persons, ministries and organizations.

JEAN-K. SAMSON,  
*Chairman of the Office  
des professions du Québec*

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## **Regulation respecting medical activities that may be performed within the scope of prehospital emergency services**

Professional Code  
(R.S.Q., c. C-26, s. 94h)

### **DIVISION 1 GENERAL PROVISIONS**

**1.** The object of this Regulation is to determine, among the professional activities performed by physicians, those that, under the terms and conditions so determined, may be performed by a first respondent, an ambulance technician, and an advanced care ambulance technician within the scope of prehospital emergency services.

**2.** In this Regulation, the following terms mean:

1° “first respondent”: any person who holds a first respondent’s certificate issued by a regional board of health and social services within the meaning of the Act respecting health services and social services (R.S.Q., c. S-4.2) or by the Corporation d’Urgences-Santé;

2° “ambulance technician”:

(a) any person who holds a certificate of college studies in ambulance technology as well as a duly certified identification card issued by a regional board or by the Corporation d’Urgences Santé;

(b) any person who holds a valid, duly certified identification card issued by a regional board or by the Corporation d’Urgences Santé in the three years preceding the date of coming into force of this Regulation;

3° “advanced care ambulance technician”:

(a) any ambulance technician who holds a diploma of college studies from a three-year program in a health care sector, notably in nursing or inhalation therapy, and who has successfully completed the specific training in advanced care accredited by the Corporation d’Urgences Santé and approved by the Collège des médecins du Québec;

(b) any ambulance technician who, on April 1, 2002, had successfully completed the specific training in advanced care accredited by the Corporation d’Urgences Santé and approved by the Collège des médecins du Québec;

4° “collective medical prescription”: a prescription given to a person by a physician, outside a centres operated by an institution in compliance with the Act respecting health services and social services or the Act respecting health services and social services for Cree Native persons (R.S.Q., c. S-5), which concerns notably medications, treatments, examinations or care to be given to the categories of patients determined in that prescription, the circumstances under which they may be given, the possible contraindications, in accordance with the protocol to which it refers;

5° “protocol”: a description of procedures, methods or limits that must be observed.

**3.** Before any medical activity provided for in this Regulation may be performed in a place other than a centres operated by an institution, the physician having written the collective medical prescription or the physician acting as national medical director of prehospital emergency services must transmit to the Collège des médecins du Québec, for approval, a draft protocol applicable to this activity.

**4.** The medical activities contemplated in this Regulation are performed following a collective medical prescription.

#### **DIVISION II** MEDICAL ACTIVITIES THAT MAY BE PERFORMED BY A FIRST RESPONDENT

**5.** The first respondent may:

1° use the semi-automatic defibrillator during cardiopulmonary resuscitation;

2° administer adrenalin during a severe, anaphylactic-type allergic reaction;

However, in performing the activity contemplated in subsection 2°, the first respondent must use a self-injection device.

#### **DIVISION III** MEDICAL ACTIVITIES THAT MAY BE PERFORMED BY AN AMBULANCE TECHNICIAN

**6.** In addition to the activities contemplated in section 5, the ambulance technician may:

1° install a Combitube in adult persons presenting with cardiac arrest or an altered state of consciousness with a respiratory rate lower than 8/min.;

2° administer the required medication or medications sublingually, orally, subcutaneously or intramuscularly to persons presenting with a health problem necessitating emergency intervention.

#### **DIVISION IV** MEDICAL ACTIVITIES THAT MAY BE PERFORMED BY AN ADVANCED CARE AMBULANCE TECHNICIAN

**7.** In addition to the activities contemplated in sections 5 and 6, the advanced care ambulance technician, in the presence of a physician at the patient’s side, may:

1° proceed with endotracheal intubation in adult persons presenting with cardiac arrest or an altered state of consciousness with a respiratory rate lower than 8/min.;

2° administer intravenously the required medication or medications to adult persons presenting with severe arrhythmia;

3° administer glucose intravenously to persons who are known diabetics presenting with an altered state of consciousness due to hypoglycemia;

4° proceed with direct laryngoscopy on persons over one year old presenting with an upper airway obstruction caused by a foreign body.

**8.** After expiry of six months from the date on which this Regulation comes into force, and after submission to the Corporation d’Urgences Santé of a notice from the Collège des médecins du Québec attesting that, on the basis of data collected concerning the application of section 7, the presence of a physician at the patient’s side is no longer required for the protection of the public, the advanced care ambulance technician will be allowed to continue performing the activities contemplated in this section, provided he has access to medical assistance.

**9.** This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

5401