Comment from Anonymous

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There is already a struggle getting anyone to take paramedic—or any sort of EMS education class. There is certainly no need to make the outlandish idea of a practitioner level a reality. If associate degree prerequisite for paramedic level reduces those available, how is this stupendously terrible idea of a paramedic practitioner supposed to work? This is a separate issue with no place in such an agenda that is taking time and effort from what matters: getting enough professionals trained to current standards, delivering care; getting funding to continue providing such care and to pay such providers; and ensuring that patients are treated safely and fairly to the highest standards currently—or in the future—in effect. Do not consider such as Annie ideas that will receive major pushback from physician groups, nurse practitioner and PA groups, and others. Focus on where it matters, not on senseless proposals that do not yet have answers to many surrounding questions. Currently such proposals only have some maybe scope increase ideas and that a masters would be required. It seems like the "para gods" want less physician involvement. What if, instead, nurse practitioners could provide online medical command under a facility's license with training and review by a physician? Or serve in medical director roles for BLS services?