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|  | COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY | Document # | 2220.16 |
| | PROGRAM DOCUMENT: EMT Scope of Practice | Initial Date: | 06/01/17 |
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Signature on File

EMS Medical Director

Signature on File

EMS Administrator

Purpose:

- A. ~~This program document outlines~~ To establish the scope of practice of Emergency Medical Technician (EMT) personnel practicing in Sacramento County. Any activity conducted outside this established scope of practice places the individual's certificate at risk for certification review in accordance with California Code of Regulations, Title 22, Division 9, Chapter 2.

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Policy:

- A. During training, while at the scene of an emergency, and during transport of sick or injured, or during interfacility transfer, a certified EMT or supervised EMT student is authorized to do any of the following:
 1. Evaluate the ill and injured.
 2. Render basic life support, rescue and medical care to patients.
 3. Obtain diagnostic signs including, temperature, blood pressure, pulse and respiration rates, pulse oximetry, level of consciousness, and pupil status.
 4. Perform cardiopulmonary resuscitation (CPR), including the use of mechanical adjuncts to basic CPR and automated external defibrillators (AED).
 5. Administer oxygen.
 6. Use the following adjunctive airway breathing aids:
 - a. Oropharyngeal or nasopharyngeal airway
 - b. Suction devices
 - c. Basic oxygen delivery devices for supplemental oxygen therapy including, but not limited to, humidifiers, partial non-rebreathers, and venturi masks; and
 - d. manual and mechanical ventilating devices designed for prehospital use including continuous positive airway pressure (CPAP)
 7. Use various types of stretchers and spinal motion restriction (SMR).
 8. Provide initial prehospital emergency care to patients including, but not limited to:
 - a. Bleeding control through the application of tourniquets
 - b. Use of hemostatic dressings from a list approved by SCEMSA
 - c. Extremity splinting
 - d. Traction splinting
 - e. Administer oral glucose or sugar solutions
 - f. Extricate entrapped persons
 - g. Perform field triage
 - h. Transport patients

- i. Apply mechanical patient restraint
 - j. Set up for ALS procedures, under the direction of a Paramedic
 - k. Perform automated external defibrillation
 - l. Take temperatures
 - m. Assist patients with the administration of physician-prescribed devices including, but not limited to, patient-operated medication pumps, sublingual nitroglycerin, and self-administered emergency medications, including epinephrine auto-injectors.
- B. In addition to the activities authorized above, the medical director of the LEMSA may also establish policies and procedures to allow a certified EMT or a supervised EMT student who is part of the organized EMS system and in the prehospital setting and/or during interfacility transport to:
- 1. Monitor peripheral lines delivering intravenous glucose solution without medication or isotonic balanced salt solutions without medication, including Ringers Lactate for volume replacement. Monitor, maintain and adjust if necessary in order to maintain, a preset rate of flow and turn off the flow of intravenous fluid.
 - 2. Transfer a patient, who is deemed appropriate for transfer by the transferring physician, and who has a nasogastric tube, gastrostomy tube, heparin locks, patient-operated medication pumps, Foley catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding arterial lines.
 - 3. Administer naloxone or other opioid antagonist by intranasal routes for suspected narcotic overdose.
 - 4. Administer epinephrine by auto-injector for suspected anaphylaxis and/or severe asthma.
 - 5. Perform finger stick blood glucose testing.
 - 6. Administer over the counter medications, when approved by the medical director, including, but not limited to:
 - a. Aspirin
- C. Optional Skills:
- 1. Use of perilaryngeal airway adjuncts.

NOTE: Providers need to assure personnel have been fully trained to the scope of practice as listed under Policy A, B and C; including an understanding and operation of physician-prescribed devices, and patient-operated medication pumps.