

Tuolumne County
Emergency Medical Services Agency

Title: Emergency Medical Technician Scope of Practice

Medical Director Signature: on file

EMS Coordinator Signature: on file

EMS Policy No. 233.00

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I) Purpose

The purpose of this policy is to define the Emergency Medical Technician scope of practice approved by the TCEMSA Medical Director for use within the Tuolumne County EMS System

II) Authority

Division 2.5, California Health and Safety Code, Section 1797.172; 1797.185; 1797.206, 1797.214; 1797.218; 1797.220 and 1797.221. Title 22, California Code of Regulation Section 100063.

III) Definitions

- A) "TCEMSA" means the Tuolumne County Emergency Medical Services Agency.
- B) "Emergency Medical Technician" or "EMT" means a person who has successfully completed a basic EMT course which meets the requirements of Title 22; California Code of Regulations, Chapter 2, has passed all required tests, and who has been certified by the TCEMSA Medical Director as an EMT.
- C) "Local accreditation" or "accreditation" or "accredited to practice" means authorization by the TCEMSA to practice the optional skill(s) approved by TCEMSA. Such authorization assures that the EMT has been oriented to TCEMSA and trained in the optional skill(s) necessary to achieve the treatment standard of the jurisdiction.
- D) "Optional Scope of Practice Provider Agency" means any agency that has entered into an agreement with TCEMSA to provide EMT optional scope of practice mediations and/or procedures.

IV) Policy

- A) As part of the State approved basic scope of practice and in accordance with the TCEMSA Treatment Protocols and other medical control policies, a supervised EMT student or a certified EMT, is authorized during training, while at the scene of an emergency, during transport of the sick or injured or during an interfacility transfer to perform any of the following:
 - 1) Evaluate the ill and injured.
 - 2) Render basic life support, rescue, and emergency medical care to patients.
 - 3) Obtain diagnostic signs to include, but not be limited to, temperature, blood pressure, pulse, respiration rate, pulse oximetry, level of consciousness, and pupil status
 - 4) Perform cardiopulmonary resuscitation (CPR), including the use of mechanical adjuncts to basic cardiopulmonary resuscitation.
 - 5) Administer oxygen
 - 6) Use the following adjunctive airway and breathing aids:
 - (a) Oropharyngeal airway;
 - (b) Nasopharyngeal airway;
 - (c) Suction device;

- (d) Basic oxygen delivery devices for supplemental oxygen therapy including, but not limited to, humidifiers, partial rebreather, and venturi masks; and
 - (e) Manual and mechanical ventilating devices designed for prehospital use including continuous positive airway pressure.
- 7) Use various types of stretchers and spinal motion restriction or immobilization devices.
- 8) Provide initial prehospital emergency care of trauma, including, but not limited to:
 - (a) Bleeding control through the application of tourniquets;
 - (b) Use of hemostatic dressings from a list approved by EMSA
 - (c) Spinal motion restriction or immobilization;
 - (d) Seated spinal motion restriction or immobilization
 - (e) Extremity splinting; and
 - (f) Traction splinting.
- 9) Administer Oral glucose or sugar solutions.
- 10) Extricate entrapped persons.
- 11) Perform field triage.
- 12) Transport patients.
- 13) Apply mechanical patient restraint.
- 14) Set up for Advanced Life Support procedures, under the direction of an Advanced EMT or Paramedic.
- 15) Perform automated external defibrillation.
- 16) 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 devices.
- 17) In addition to the activities authorized by subdivision (a) of this Section, the medical director of the LEMSAs may also establish policies and procedures to allow a certified EMT or a supervised EMT student who is part of the EMS system and in the prehospital setting and/or during interfacility transport to:
 - (a) Monitor intravenous lines delivering glucose solutions or isotonic balanced salt solutions, including Ringer's 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;
 - (b) Transfer patient, who is deemed appropriate for transfer by the transferring physician, and who has nasogastric (NG) tubes, gastrotomy tubes, heparin locks, foley catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding arterial lines;
 - (c) Administer naloxone or other opioid antagonist by intranasal and/or severe asthma
 - (d) Perform finger stick blood glucose testing; and
 - (e) Administer over the counter medication with approved by the medical director including but not limited to:
 - (i) Aspirin
- B) During mutual aid response into another jurisdiction, an EMT may utilize the scope of practice for which s/he is trained and authorized according to the policies and procedures established by TCEMSA within the jurisdiction where the EMT is employed as part of an organized EMS system
- C) EMT Optional Skills

- 1) Upon completion of approved training courses, completing the local accreditation process, and while on duty with an approved optional scope of practice provider agency, an EMT Optional may:
 - (a) Administer epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma