

EMS Personnel**Date: 07/01/2023****EMT Basic Scope of Practice****Policy #2110****I. Purpose:**

A. To identify the scope of practice of an Emergency Medical Technician (EMT) in Imperial County.

II. Authority:

A. California Health and Safety Code – Division 2.5: Emergency Medical Services 1797.170, 1797.175, 1797.210

B. California Code of Regulations, Title 22 – Division 9, Sections 100063, 100064

III. Definitions:

A. Emergency Medical Technician – a person who has successfully completed an EMT course that meets the requirements established by CCR Title 22, Division 9, has passed all required tests, and has been certified by a California EMT certifying entity.

IV. Policy:

A. During training, while at the scene of an emergency, during transport of the 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 emergency medical care to patients
3. Obtain diagnostic signs to include, but not be limited to:
 - a. Temperature
 - b. Blood pressure
 - c. Pulse rate
 - d. Respiration rates
 - e. Pulse oximetry
 - f. Level of consciousness
 - g. 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

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- c. Suction devices
 - d. Basic oxygen delivery devices for supplemental oxygen therapy
 - e. Manual and mechanical ventilating devices designed for prehospital use including continuous positive airway pressure
 7. Use various types of stretchers and spinal 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 the Imperial County EMS Agency
 - c. Spinal immobilization
 - d. Seated spinal immobilization
 - e. Extremity splinting
 - f. Traction splinting
 9. Administer oral glucose or sugar solutions
 10. Extricate entrapped persons
 11. Perform field triage
 12. Transport patients
 13. Mechanical patient restraint
 14. Set up for ALS procedures, under the direction of an Advanced EMT or Paramedic
 15. Perform automated external defibrillation
 16. Assist patient with the administration of physician-prescribed devices including patient-operated medication pumps, sublingual nitroglycerin, and self-administered emergency medications, including epinephrine devices.
- B. Perform skills in accordance with Imperial County EMS Agency EMT Optional Skill Accreditation Policy.
1. Application and use of continuous positive pressure ventilation
 2. Epinephrine auto-injector
 3. Point of care glucose check
 4. Naloxone administration intranasal
 5. King airway application and monitoring

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- C. During interfacility transfers, a certified EMT may monitor peripheral IV lines including, heplocks, saline locks, Hichmans, and Port-a-Catheters, provided the following conditions are met:
 - 1. A written order signed by the transferring physician is provided to the EMT stating the patient is stable for transportation by a BLS ambulance. The order must include the rate of infusion for the IV fluids and the type of solution infusing
 - 2. No medications can be added to the IV fluids
- D. The following IV solutions may be monitored by the EMT during interfacility transfers:
 - 1. D5/Water
 - 2. Normal Saline (NaCL)
 - 3. Lactated Ringers
- E. Patients with vascular access lines through shunts or fistulas are not to be transported by EMTs
- F. During interfacility transfers, a certified EMT may monitor patients with the following invasive tubes and other medical adjuncts:
 - 1. Nasogastric Tubes (NGT) Abdominal tubes (gastrostomy tubes, ureterostomy tubes, wound drains, etc.)
 - 2. Foley catheters
 - 3. Tracheostomy Tubes
- G. Can provide medications or procedures covered in local optional scope of practices.

APPROVED:

SIGNATURE ON FILE – DATE

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