



I. AUTHORITY:

California Code of Regulations Title 22, Division 9, Chapter 8. California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.200, & 1798. County of Orange Ambulance Ordinance.

II. APPLICATION:

This policy defines the role integration of air ambulance as OCEMS approved ALS service providers and establishes policy for Air Ambulance EMS aircraft operations, equipment, and personnel responding to incidents within Orange County.

III. DEFINITIONS:

"Air ambulance" means any rotor aircraft specially constructed, modified or equipped, and used for the primary purposes of responding to interfacility transports originating within Orange County, prehospital emergency calls and transporting critically ill or injured patients whose medical flight crew has at a minimum two (2) attendants certified or licensed in advanced life support, one of which is a Registered Nurse (RN).

"Air ambulance service" means an air transportation service which utilizes air ambulances.

"Air ambulance service provider" " means the individual or group that owns and/or operates an air ambulance.

"Coordinating Agency" means the OCEMS approved communication/dispatch center which maintains aircraft availability, notifies appropriate agencies/providers of air ambulance requests, and collects data as required.

"Emergency medical services aircraft" or "EMS aircraft" means any aircraft utilized for the purpose of prehospital emergency patient response and transport. EMS aircraft includes air ambulances and all categories of rescue aircraft.

"EMS Aircraft Provider" means air ambulance and air rescue service ALS service providers and includes any company, lessee, agency (excluding agencies of the federal government), provider, owner, operator who provides or makes available prehospital air transport or medical personnel either directly or indirectly or any hospital where an EMS aircraft is based, housed, or stationed permanently or temporarily.

"ETA - Estimated time of arrival" means the response time in minutes which is updated by direct communications between the air ambulance or air rescue pilot and the incident commander once direct communication is established.

"Incident commander" means the overall scene manager.

"Medical flight crew" means those individuals, excluding the pilot, specifically assigned to care for the patient during aircraft transport and who are at least EMT certified.

"Requestor" means a prehospital care system participant or public safety dispatch agency or coordinating agency authorized to initiate a request for an air ambulance.

"Stand-by" means an air ambulance or air rescue is dedicated to the incident and will be prepared for immediate lift-off upon notification of activation.





IV. CRITERIA:

Any EMS Aircraft Provider seeking authorization to provide EMS in Orange County will comply with all applicable Orange County Ordinances and OCEMS Polices, applicable sections of the California Code of Regulations Title 22 and pertinent F.A.A. Regulations. Nothing in this policy supersedes or negates compliance with federal regulations.

- A. Operations- Designated Orange County Air Ambulance EMS Aircraft shall:
 - 1. Be classified and authorized by the OCEMS in order to provide prehospital patient transport within the jurisdiction of the local EMS agency.
 - 2. Follow activation procedures per Policy #730.20 "Prehospital Air Ambulance and Air Rescue Service Activation Procedure".
 - 3. Establish at least one base of operations within Orange County. All such locations shall comply with applicable zoning, building and occupational health and safety regulations.
 - a. Each base of operations shall be adequate to house the aircraft crew for the aircraft based at that location. Cooking facilities, rest rooms, showers, beds sufficient for all personnel on duty are required of all bases.
 - 4. Ensure one permitted air ambulance aircraft is available to provide EMS Aircraft operations to incidents 7 days a week, 24 hours a day and maintain at a minimum one similarly configured back up aircraft, which is available within a maximum of twenty four hours to maintain service continuity 7 days per week, 24 hours per day.
 - 5. Obtain and maintain accreditation with an Orange County EMS recognized accreditation organization.
 - 6. Meet all county ambulance ordinance licensure requirements.
 - 7. EMS Aircraft provider shall notify OCEMS verbally and in writing any time the EMS Aircraft provider is not in compliance with any applicable federal and/or state laws, and/or OCEMS policies, indicating the reason(s), dates(s), and time(s) for non-compliance and corrective actions that are being taken.
 - 8. Pass an annual OCEMS inspection for all EMS aircraft operating in Orange County.
 - 9. Pay the established fees. (Reference OCEMS Policy #470).
- B. Personnel: The medical flight crew of an EMS aircraft shall:
 - Have training in aeromedical transportation as specified and approved by the authorizing EMS agency including but not limited to:

Effective Date: April 1, 2025

- (a) General patient care in-flight.
- (b) Changes in barometric pressure, and pressure related maladies.
- (c) Changes in partial pressure of oxygen.
- (d) Other environmental factors affecting patient care.
- (e) Aircraft operational systems.
- (f) Aircraft emergencies and safety.



#730.10 Page 3 of 5

AMBULANCE RULES AND REGULATIONS AIR AMBULANCE SERVICE PROVIDER CRITERIA

- (g) Care of patients who require special consideration in the airborne environment.
- (h) EMS system and communications procedures.
- (i) The prehospital care system (s) within which they operate including local medical and procedural protocols.
- (j) Use of onboard medical equipment.
- 2. Participate in continuing education requirements as required by their licensure, certification and employment.
- 3. Adhere to minimum staffing for Air Ambulances:
 - a. Staffing for each air ambulance will be no less than:
 - One Paramedic who is licensed in California and accredited to work in Orange County and who possesses current CPR, ACLS, PHTLS and PALS or PEPP certification. The Paramedic must have a minimum of three years of full-time experience as a Paramedic in the prehospital setting within the last five years before working as a flight Paramedic in Orange County; and
 - One Registered Nurse (RN) who is currently licensed in California and who possesses current CPR, ACLS, BTLS or PHTLS and PALS Certifications. The RN must have a minimum of five years of experience in an emergency department or critical care unit in the past five years before working as a flight nurse in Orange County.

b. Alternative Staffing:

- A physician licensed in the state of California with recent Emergency Department experience may substitute for the Paramedic.
- A Registered Nurse (RN) currently licensed in the state of California who possesses current CPR, ACLS, BTLS or PHTLS and PALS certification and has a minimum of five years experience in an emergency department or critical care unit in the past five years may substitute for the Paramedic.

4. Medical Director

- All Air Ambulance Service Providers will have a current California licensed physician Medical Director who, by training and experience, is qualified in Emergency Medicine or the equivalent
- b. The Medical Director will be responsible for the Supervision of the quality of the EMS aircraft patient care and approval of medical policies and procedures and protocols for the Air Ambulance Service Provider.

5. Scope of Practice

- The Paramedic will operate under policies, procedures and protocols as established by OCEMS in accordance with State Regulations and Guidelines.
 - i. Flight paramedics employed by an OCEMS-approved Air Ambulance provider may operate under the Air Ambulance's flight paramedic scope of practice developed by the company's medical director. However, these protocols must be submitted to the OCEMS Medical Director for review and approval prior to implementation.
- b. Standardized procedures for the Registered Nurses will be developed by the Medical Director of the Air Ambulance Service Provider, in accordance with the Nurse Practice Act. The procedures must be submitted to the OCEMS Medical Director for review and mutual agreement prior to implementation.





- In situations where the medical flight crew is less medically qualified than the ground personnel from whom they receive patients, the more highly qualified ground personnel must accompany the patient during transport.
- 7. EMS aircraft that do not have a medical flight crew shall not transport patients.
- C. Equipment /Supplies/Aircraft Specifications, Space and Equipment: All Air Ambulance EMS aircraft shall be configured so that:
 - 1. There is sufficient space in the patient compartment at a minimum have space to accommodate one (1) patient and two (2) medical flight crew.
 - 2. There is sufficient space for medical personnel to have adequate access to the patient in order to carry out necessary procedures including CPR on the ground and in the air.
 - There is sufficient space for medical equipment and supplies required by State regulations or authorizing EMS agency policy.
 - a. Each EMS aircraft shall have adequate safety belts and tie-downs for all personnel, patient(s), stretcher(s) and equipment to prevent inadvertent movement.
 - b. Each EMS aircraft shall have on-board equipment and supplies commensurate with the scope of practice of the medical flight crew as specified by the classifying EMS agency. This requirement may be fulfilled through the utilization of appropriate kits (cases/packs) which can be carried on a given flight to meet the needs of a specific type of patient and/or additional medical personnel not usually staffing the aircraft.
 - 4. EMS Aircraft Providers will operate on Aircraft capable of hot loading patients.
 - EMS Aircraft Providers will implement the use of Night Vision Goggle (NVG) or Night Vision Imaging systems for night operations.
 - 6. Air Ambulance EMS Aircraft Providers will operate a Instrument Flight Rule (IFR) certified aircraft with IFR qualified crews as defined by F.A.A. Regulations.

D. Communications

- In accordance with authorizing EMS agency policies, all EMS aircraft shall have the capability of communicating with:
 - a. Designated dispatch center(s).
 - b. EMS ground units at the scene of an emergency.
 - c. Designated base hospitals.
 - d. Receiving hospitals.
 - e. Other appropriate facilities or agencies.
- All EMS aircraft shall utilize appropriate radio frequencies for dispatch, routing and coordination
 of flights. This excludes use of Med 1-8 and HEAR (155.340 MHz and 155.280 MHz) for these
 purposes.

Effective Date: April 1, 2025

- 3. Radio equipment may be inspected to assure compliance with the requirements of the authorizing EMS agency.
- 4. Provide for direct radio communication capabilities as designated by Orange County Communications (OCC) including but not limited to:

OCEMS Policy #730.10





- biomedical frequencies,
- fire coordination frequencies,
- Hospital Emergency Administrative Radio (HEAR) frequency.
- 5. Provide the current status on air ambulance whenever requested by a public safety dispatch agency or coordinating agency.

E. Data Collection:

EMS Aircraft Providers will:

- Comply with OCEMS requirements for uniform electronic record keeping, data collection and electronic submission of all Orange County EMS data system elements to OCEMS and OC-MEDS.
- 2. Adhere to minimum Orange County Medical Data System (OC-MEDS) Standards as defined in OCEMS Policy 300.10 "OC-MEDS Documentation Standards"
- 3. EMS Aircraft Providers will comply with OCEMS requirements for uniformed electronic record keeping, data collection and electronic submission of all Orange County EMS data system elements to OCEMS and OC-MEDS.
- F. Participate in special studies as defined by the OCEMS.
- G. Provide current business-related information to Orange County public safety dispatch agency or the coordinating agency (e.g., address, telephone number; location, type and number of aircraft available).

Approved:

Carl H. Schultz, MD

OCEMS Medical Director

Tammi McConnell, MSN, RN

Effective Date: April 1, 2025

OCEMS Administrator

Original Date: 03/01/1985

Reviewed Date(s): 4/1/2014; 4/1/2015; 4/1/2017; 9/23/2020; 10/3/2022; 04/13/2024 Revised Date(s): 4/1/2014; 4/1/2015; 4/1/2017; 9/23/2020; 10/27/2022; 11/13/2024

Effective Date: 4/1/2023; 4/1/2025