



OCEMS EMT SCOPE OF PRACTICE: EMT-OCEMS ACCREDITED

I. AUTHORITY:

Health and Safety Code, Sections 1797.107, 1797.109, 1797.160, 1797.170 and California Code of Regulations, Title 22, Division 9, Chapter 3.1, Article 2 § 100066.01, 100066.02, 100066.04.

II. APPLICATION:

To define the scope of practice of an Orange County Emergency Medical Service (OCEMS) Accredited Emergency Medical Technician (EMT) operating in Orange County.

III. POLICY:

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 interventions within the Orange County EMS System.

The interventions identified in this policy establish the scope of practice for an OCEMS accredited EMT. Field utilization of these skills shall be performed in accordance with applicable OCEMS Standing Orders, Procedures, Treatment Guidelines, and Policies.

ASSESSMENT

- Evaluate the ill and injured by means of a primary and secondary assessment, including but not limited to:
 - Level of consciousness / Glasgow coma scale.
 - Pain level.
 - Skin signs.
 - Pupil size, symmetry, and reactivity to light.
 - Pediatric Assessment Triangle (PAT) for patient ages < 15 years of age.
- Obtain and monitor diagnostic signs, including but not limited to:
 - Temperature.
 - Blood pressure.
 - Pulse rate.
 - Respiratory rate.
 - Breath sounds.
 - Pulse oximetry (SPO₂), if available.
- Perform finger-stick blood glucose testing.

AIRWAY AND BREATHING

- Render basic life support, rescue and emergency medical care to patients.
- Administer oxygen.
- Use the following adjunctive airway and breathing aids:
 - Oropharyngeal airway.
 - Nasopharyngeal airway.
 - Suction devices.
 - Basic oxygen delivery devices for supplemental oxygen therapy for an SPO₂ ≤ 95% unless guidance is otherwise by specific treatment guidelines.
 - Manual and mechanical ventilating devices designed for prehospital use include continuous positive airway pressure (CPAP).

CIRCULATION AND RESUSCITATION

- Perform cardiopulmonary resuscitation, including placement and use of an Automated Chest Compression Device (ACCD).
- Perform Automated External Defibrillation (AED).



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HEMORRHAGE AND TRAUMA CARE

- Use stretchers and spinal motion restriction or immobilization devices, including long boards, short boards, Kendrick Extraction Device (KED) boards, pediatric immobilization devices, and splinting devices.
- Provide initial prehospital emergency care to patients, including, but not limited to:
 - Placement of approved tourniquets for control of external extremity bleeding.
 - Use of hemostatic dressings for control of external hemorrhage.
 - Use of wound packing for hemorrhage control.
 - Extremity splinting, including traction splinting.
 - Extricate entrapped persons.
 - Field triage based on OCEMS policies and procedures, including MCI policy #900.00.
 - Transport patients based on OCEMS Policies, & Procedures, and Treatment Guidelines.

OBSTETRIC CARE

- Assist with emergency childbirth and provide immediate postpartum and newborn care in accordance with OCEMS Procedure B-060 (Imminent Childbirth in the Field).

MEDICATION ADMINISTRATION

- Administer:
 - Oral glucose or sugar solutions.
 - Naloxone (Narcan) or other approved opioid antagonist by approved routes.
 - Epinephrine by auto-injector for suspected anaphylaxis and/or severe asthma, if available.
 - Atropine and pralidoxime chloride injection (2-PAM) by means of DuoDote® or Mark-1 kit to self or equivalent under ALS direction, if available.
 - Aspirin, if available.
- Assist patient with the administration of the patient's own medications or prescribed devices to include but not limited to:
 - Patient-operated medication pumps.
 - Nitroglycerin.
 - Albuterol and/or ipratropium (Atrovent®) inhalation metered dose inhaler (MDI) or nebulizer.
 - Epinephrine auto-injector
 - Aspirin.

ALS ASSISTANCE

- Set up for ALS procedures under the direction of a Paramedic
- Assist ALS providers in placement of 12-lead ECG leads.
- Assist ALS providers during placement of advanced airway devices.

PATIENT DISPOSITION

- Withhold resuscitation of a patient meeting declared dead criteria as identified in OCEMS policy 330.50 and honor valid end-of-life documents in accordance with OCEMS policy including:
 - Physician Orders for Life-Sustaining Treatment (POLST)
 - Advanced Healthcare Directive
 - Physician-signed DNR orders
 - Other legally recognized end-of-life documents

TRANSPORT AUTHORITY

- Monitor intravenous lines delivering glucose solutions or isotonic balanced salt solutions, including Lactated Ringer's, for volume replacement. Maintain and adjust as necessary to maintain a preset flow rate, and discontinue flow when authorized
- Utilize patient restraints when necessary to protect the patient, EMS personnel, or others, in accordance with applicable policies.



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- Transport pediatric patients utilizing an age- and size-appropriate restraint system (e.g., Neo-mate, Pedi-mate, car seat, etc.).
- Transfer of a patient who is deemed appropriate for Basic Life Support transfer by the transferring physician, who has any of the following:
 - Nasogastric tubes
 - Gastrostomy tubes
 - Heparin locks
 - Tracheostomy tubes
 - Dialysis shunts (both subcutaneous and external)
 - Long-term established central venous lines (e.g. PICC lines)
 - Cardiac pacemaker (implanted)
 - Automated implantable cardioverter defibrillator (AICD)
 - Colostomy bag
 - Urostomy bags
 - Foley catheters
 - Enteric feeding tubes
 - Continuous flow oxygen
 - Thoracostomy (chest) tube(s) clamped or attached to closed drainage system
 - Surgical drain suction devices with present parameters
- ❖ **All arterial lines are excluded from EMT transport.**
- ❖ **Central vascular lines used for patient monitoring or infusing intravenous fluid and medications are excluded from EMT transport.**
- Transport intravenous infusions of the following solutions and medications when set at a preset rate of flow by medical staff of the sending facility:
 - Total parenteral nutrition (TPN)
 - Folic Acid
 - Thiamine
 - Multivitamins
 - Normal Saline
 - Lactated Ringer's Solution
- Transport patients with subcutaneous or intravenous implanted or external patient- operated infusion pumps that are infusing at a preset rate the following:
 - Insulin
 - Morphine
 - Total parenteral nutrition (TPN)
- Transport patients with skin patches previously placed on the patient, including:
 - Nitrobid.
 - Nitroglycerine patches and paste.
 - Fentanyl patches.
 - Clonidine patches.

The scope of practice of an EMT shall not exceed those activities authorized in this policy

During a 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 the LEMSA within the jurisdiction where the EMT is employed as part of an organized EMS system.



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Approved:

Almaas A. Shaikh, MD, MPH FACS
OCEMS Medical Director

Daniel McDonnell MS, MBA, NRP
Director of Emergency Medical Services

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ORANGE COUNTY EMERGENCY MEDICAL SERVICES (OCEMS) POLICY 315.00
ATTACHMENT I - FIELD REFERENCE GUIDE



TREATMENT PROTOCOLS FOR OCEMS ACCREDITED EMTS DURING INTERFACILITY
AND 911 FIELD RESPONSES

Treatment during Interfacility Transport	
During the transport of a patient requiring a BLS level of care, an OCEMS Accredited EMT may transport a patient with the following:	
Transport of Intravenous Infusions with the Specified Solutions and Medications when set at a Preset Rate of Flow by Medical Staff of the Sending Facility: <ul style="list-style-type: none">• Folic Acid• Thiamine• Multivitamins• Normal Saline• Total parenteral nutrition (TPN)• Lactated Ringer's Solution	Treatment on Scene An OCEMS Accredited EMT may perform or assist ALS with the following procedures: <ul style="list-style-type: none">• Evaluation of the ill and injured and render basic life support• Perform primary & secondary assessment (SO-BLS)• Perform primary & secondary assessment (SO-BLS)• Obtain vital signs to include assessment of: Blood pressure, Pulse, Temperature (when available), Respiratory rate, Breath sounds, Pulse oximetry (when available), EtCO₂ (when available), Level of consciousness, Pupil status (size, symmetry, reactivity), Pediatric assessment triangle (PAT)• Perform finger stick blood glucose testing.• Render basic life support, rescue and emergency medical care to patients• Administer oxygen• Ensure a patent airway & remove any airway obstruction• Use of adjunctive airway and breathing aids• Perform CPR including use of an automated chest compression device (ACCD).• Perform Automated External Defibrillation (AED).• Utilize approved mechanical tourniquets for uncontrolled bleeding of extremities.• Use wound packing for hemorrhage control.• Perform field MCI triage (OCEMS policy 900.00).• Use of stretchers, spinal motion restriction, immobilization devices, splinting and traction devices.• Extricate entrapped persons.• Administer oral glucose solutions• Administer Naloxone
Transport Patients with Medical Devices Arterial lines and central vascular access lines used for monitoring patient vitals or infusing fluids or Meds are EXCLUDED from BLS transport. <ul style="list-style-type: none">• Nasogastric tubes• Gastrostomy tubes• Heparin locks• Tracheostomy tubes• Dialysis shunts (both subcutaneous and external)• Long-term established central venous lines (e.g. PICC lines)• Cardiac pacemaker (implanted)• Automated implantable cardioverter defibrillator (AICD)• Colostomy or urostomy bags• Foley catheters• Enteric Feeding tubes• Continuous flow oxygen• Thoracostomy (chest) tube(s) clamped or attached to closed drainage system.• Surgical drain suction devices with present parameters.	Assist patients with prescribed meds: Assistance to patients with prescribed or home medications requires ALS response for the following: <ul style="list-style-type: none">• Nitroglycerine aerosol or tablets• Albuterol inhalation – metered dose or nebulizer• Epinephrine auto-injector
Patient Operated Medication Pumps Implanted or external pumps infusing to include but not limited to: <ul style="list-style-type: none">• Insulin• Morphine• Total parenteral nutrition (TPN)	Assist Paramedics with the following: OCEMS Accredited Paramedic must be on scene or enroute for an EMT to perform the following: <ul style="list-style-type: none">• Placement of ECG leads for 12 lead acquisition• Prepare Intravenous (IV) fluid therapy• Assist with preparation for ALS airway procedures
Patients with Medication Patches: Patches must be previously placed by facility. <ul style="list-style-type: none">• Fentanyl patches• Nitrobid, Nitroglycerine patches, Nitroglycerine paste• Clonidine (Catapres) patches	
Honor DNR Request <ul style="list-style-type: none">• Physician signed DNR or Copy• Advance Healthcare Directive• California POLST Form (Refer to OCEMS Policy 350.51)	

Withhold Resuscitative Efforts

EMTs may withhold resuscitative efforts with OCEMS Policy 350.50 (Patients meeting criteria "obviously deceased").