

EMERGENCY MEDICAL SERVICES PROGRAM **County of Santa Cruz**

HEALTH SERVICES AGENCY

POST OFFICE BOX 962, 1080 EMELINE AVENUE SANTA CRUZ, CA 95061-0962 (831) 454-4120 FAX: (831) 454-4272 TDD: (831) 454-4123

> Policy No. 1050 Reviewed 01/07

Emergency Medical Services Program

Approved

Medical Director

Subject: PARAMEDIC INTERACTION WITH LICENSED HEALTH-CARE PROVIDERS

I. PURPOSE

To set guidelines to facilitate a smooth interaction between the EMT-P and the Physician, Registered Nurse, Physician Assistant, or Nurse Practitioner while providing the best possible care to emergency patients.

II. EMT-P MEDICAL SUPERVISION

The paramedic may function only under the medical direction and supervision of a paramedic Base Station Physician, or other authorized physician, per Title 22 of the California Administrative Code.

III. POLICY

A. Patient Care in a Physician's Office or Clinic

- 1. The physician in attendance, whether in an office or clinic, is responsible for that patient until transfer of authority has been done with the Base Hospital Physician. At all times EMT-P will be under the medical authority and direction of the Base Hospital Physician.
- 2. On arrival at the physician's office or clinic, the EMT-P will report directly to the physician who is in charge of the patient.
- 3. If the physician is not present, the registered nurse, physician assistant, or nurse practitioner <u>may</u> <u>assist</u> at the discretion of the paramedic. <u>Paramedics shall not take medical orders from them.</u>

B Assist or Manage Patient Care

The paramedics are to ask the physician directly if they are going to assist or manage patient care.

- 1. The physician may elect to assist the paramedic and offer suggestions, but the paramedic will remain under the direction of the Base Station Physician.
- 2. If the physician indicates that they wish to manage patient care, the physician will be advised that they will bear full medical responsibility for patient care prior to and during transport, in which case the physician must accompany the patient in the ambulance to the hospital.
- 3. The EMT-P may then accept orders and direction from that physician according to Santa Cruz County EMS field treatment protocols. The paramedic shall contact the hospital for "information only" call in.
- 4. If the physician elects not to manage the patient or declines to speak to Base Physician the EMT-P will manage the call per current field treatment protocols.
- 5. If the treatment, which the patient has already received from the physician, exceeds Santa Cruz County EMS field treatment protocols, the Base Station Physician may request the attending physician to accompany the patient to the hospital.

IV. ON SCENE OF 9-1-1- EMERGENCY (Not physician's office or clinic)

- A. If a physician on scene wants to manage patient care and will accompany patient, contact Base Station and advise of physician's desire to manage care. This physician must be recognized by the paramedic or have valid California medical license. If there is any disagreement between the physician on the scene and the Base Station Physician, the paramedic shall take orders from the Base Station Physician and place the physician on the scene in radio contact with the Base Station Physician.
- B. A registered nurse, physician assistant, or nurse practitioner <u>may assist</u> at the discretion of the paramedic within their respective scope of practice. <u>Paramedics may not take medical orders from</u> <u>them</u>. They must be recognized by the paramedic or have a valid California license prior to assisting with patient care.

V. DOCUMENTATION

- A. All orders from a physician shall be reported to the base hospital. The scene physician's name and California medical license number shall be documented on the PCR.
- B. All assistance from a registered nurse, physician assistant, or nurse practitioner shall be documented on the PCR, along with name and appropriate California license number.
- C. The paramedic shall document condition of the patient before treatment, all treatment rendered, patient response and condition after treatment from point of contact to hospital delivery.