



CONTRA COSTA HEALTH

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MEMORANDUM

23-MEMO-008

TO: EMS Service Providers
FROM: Senai Kidane, MD, EMS Medical Director
DATE: November 17, 2023
SUBJECT: **Public Comment Period Open: CCCEMSA Policy 2010, Emergency Medical Technician (EMT) Local Authorized Skills**

The Contra Costa County Emergency Medical Services Agency (“CCCEMSA”) has opened a public comment period and requests your feedback for the following:

1. CCCEMSA Policy 2010, Emergency Medical Technician (EMT) Local Authorized Skills

All feedback must be submitted using the online public comment form link or QR code located below no later than December 1, at 5:00 p.m. This memo and attached documentation will be published to the CCCEMSA website at the website link below, and on the Contra Costa County EMS mobile application, “XCCEMS”. Publishing to the website may take twenty-four (24) hours.

Website Link: <https://cchealth.org/ems/public-comment.php>

Online Public Comment Form Link: <https://forms.office.com/g/1jTKZs40q2>



Public Comment Form QR Code:

Attachments

1. Policy 2010, Emergency Medical Technician (EMT) Local Optional Skills

Emergency Medical Technician (EMT) Local Authorized Skills

I. PURPOSE

This policy establishes the local authorized skills for California certified Emergency Medical Technicians (“EMT”) and EMT students in addition to the EMT Basic Scope of practice.

II. REQUIREMENTS

A. To perform the local option skills:

1. An EMT must be employed by an authorized EMS service provider in Contra Costa County.
2. An EMT student must be supervised by an EMT or paramedic that is:
 - a. Identified as a preceptor by the EMT student’s CCC authorized training program and an EMT who is;
 - b. Employed by an authorized EMS service provider in Contra Costa County.

III. EMT AUTHORIZED SKILLS

A. The following skills may be performed in the prehospital setting or during interfacility transport in accordance with Contra Costa County Treatment Guidelines:

1. Monitor intravenous lines delivering glucose solutions or isotonic balanced salt solutions, including Ringer's lactate for volume replacement. Monitor, maintain, and adjust, if necessary, to maintain a preset rate of flow and turn off the flow of intravenous fluid.
2. Transfer a patient, who is deemed appropriate for transfer by the transferring physician, and who has nasogastric (NG) tubes, gastrostomy tubes, heparin locks, foley catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding arterial lines.
3. Administer naloxone or other opioid antagonists by intranasal route or intramuscular autoinjector for suspected narcotic overdose.
4. Administer epinephrine by auto-injector for suspected anaphylaxis.
5. Perform finger stick blood glucose test.
6. Administer aspirin (ASA).

