

# EL DORADO COUNTY EMS AGENCY

## FIELD POLICIES

912

Effective: July 1, 2008  
Last Revised: August 2024  
Scope: BLS/ALS

(on file)  
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EMS Agency Medical Director

### PHYSICIAN AT SCENE

#### PURPOSE:

This policy outlines the steps to follow when a bystander at the scene of an injury or illness identifies themselves as a physician (MD or DO) and wishes to be involved in pre-hospital

#### PROCEDURE:

- 1) Thank the physician for their offer of assistance and always remain courteous.
- 2) Present the document: **"NOTE TO PHYSICIAN ON INVOLVEMENT WITH EMT-ILs AND EMT-PS"**. (Present this as a physical card or as a pdf - see ANNEX below).
- 3) If the physician on the scene elects **Alternative #1** from the ANNEX, the base station will retain medical control and the paramedic may:
  - a) Utilize the on-scene physician as an "assistant" in patient care activities.
- 4) If the on-scene physician elects **Alternative #2** from the ANNEX, the paramedic should:
  - a) Immediately contact the base station and facilitate the conversation between the on-scene physician and base station physician. This should ideally be a conference call, allowing the paramedic to directly confirm any agreements/plans made between the on-scene physician and base.
- 5) If the on-scene physician elects **Alternative #3** from the ANNEX, the paramedic shall:
  - a) Continue to prioritize patient care according to standard and local optional scope.
  - b) Emphasize that if the on-scene physician wishes to assume medical control, they must accompany the patient to the hospital and provide written documentation to both the hospital and transporting EMS agency upon transfer of care to hospital staff.
  - c) Facilitate contact between the on-scene physician and base, per the ANNEX
- 6) If the on-scene physician **does not elect one of the endorsed alternatives** for physician involvement or is proving detrimental to scene activities and/or patient care, the paramedic may:
  - a) Respectfully ask that the physician cease interaction with the patient and scene,
  - b) Continue patient care, in line with local protocols, procedures and policies,
  - c) Request any necessary law enforcement assistance for removal of an interfering bystander.

7) In all cases of physician involvement on scene, regardless of the alternative outcome, the paramedic shall:

a) Complete an ePCR pursuant to the requirements of the Documentation Policy, and further document:

i. The name of the on-scene physician (including photo of credentials if possible),

ii. All observed procedures performed by the on-scene physician,

iii. All activities performed by EMS personnel,

iv. Obtain on-scene physician signature.

b) Generate a CQI Event Report within 24 hours or before the end of the working shift - whichever is sooner, detailing any context not sufficiently captured on the ePCR.

## ANNEX



cma

California Medical  
Association

### NOTE TO PHYSICIAN ON INVOLVEMENT WITH EMT-IIs AND EMT-Ps (PARAMEDIC)

A life support team [EMT-II or EMT-P (Paramedic)] operates under standard policies and procedures developed by the local EMS agency and approved by their Medical Director under the authority of Division 2.5 of the California Health and Safety Code. The drugs they carry and procedures they can do are restricted by law and local policy.

If you want to assist, this can **only** be done through one of the alternatives described below. These alternatives have been endorsed by the CMA, State EMS Authority, CCLHO, BMQA, and the El Dorado County Local EMS Agency

**Assistance rendered in this endorsed fashion, without compensation, is covered by the protection of the 'Good Samaritan Code' (see Business and Professions Code, sections 2144, 2395-2398 and Health and Safety Code, Section 1799.104).**

### ENDORSED ALTERNATIVES FOR PHYSICIAN INVOLVEMENT

1. Offer your assistance as another pair of eyes, hands, or suggestions, but let the life support team remain under base hospital control; or,
2. Request to talk to the base station physician and directly offer your medical advice and assistance; or,
3. (For those with emergency medical experience) Take total responsibility for the care given by the life support team and physically accompany the patient until the patient arrives at a hospital and responsibility is assumed by the receiving physician. In addition, you must sign for all instructions given in accordance with local policy and procedure. (Whenever possible, remain in contact with the base station physician.)

Based on REV. 7/88 88 49638 as provided by the California Emergency Medical Services Authority