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| 000.00 - 099.99 | AUTHORITY / ADMINISTRATION                       |
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**Implementation Date****001.00 - 099.99 AUTHORITY / ADMINISTRATION**

|        |  |          |
|--------|--|----------|
| 010.00 | Health and Safety Code, Division 2.5                         | 01/01/03 |
| 015.00 | California Code of Regulations, Title 22, Division 9         | 12/01/08 |
| 050.00 | OCEMS Agency, County of Orange Resolution                    | 02/02/82 |
| 070.05 | Orange County EMS Organization Chart 01/20/10                |          |
| 080.00 | New/Revised OCEMS Draft Policy and Procedure: Review Process | 02/09/05 |
| 090.00 | Definitions  | 06/01/94 |

**100.00 - 199.99 ADVISORY COMMITTEES TO OCEMS*****Emergency Medical Care Committee:***

|        |  |          |
|--------|--|----------|
| 100.10 | EMCC (State Authority: Health & Safety Code) | 07/01/92 |
| 100.30 | Bylaws                                       | 08/01/01 |
| 100.40 | Membership                                   | 01/01/11 |

***Facilities Advisory Subcommittee:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 110.10 | Bylaws                          | 07/01/92 |
| 110.20 | Organizational/Membership Chart | 12/16/05 |

***Education and Training Advisory Subcommittee:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 120.10 | Bylaws                          | 02/09/09 |
| 120.20 | Organizational/Membership Chart | 12/16/05 |

***Paramedic Advisory Subcommittee:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 130.10 | Bylaws                          | 07/01/92 |
| 130.20 | Organizational/Membership Chart | 12/16/05 |

***Transportation Advisory Subcommittee:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 140.10 | Bylaws                          | 07/01/92 |
| 140.20 | Organizational/Membership Chart | 12/16/05 |

***Quality Assurance Board:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 150.10 | Bylaws                          | 05/06/08 |
| 150.20 | Organizational/Membership Chart | 04/03/12 |

***Regional Trauma Operations Committee:***

|        |                                 |          |
|--------|---------------------------------|----------|
| 160.10 | Bylaws                          | 08/06/07 |
| 160.20 | Organizational/Membership Chart | 08/06/07 |

**Implementation Date*****Disaster Advisory Group:***

|        |        |          |
|--------|--------|----------|
| 170.10 | Bylaws | 12/05/06 |
|--------|--------|----------|

**200.00 - 299.99 APPROVED SYSTEM SERVICE PROVIDERS (Roster / Certification)**

|        |  |          |
|--------|--|----------|
| 200.00 | Private Medical Transportation Providers | 08/31/12 |
| 210.00 | EMT-Paramedic Service Providers          | 02/26/08 |
| 220.00 | List of Base Hospitals                   | 10/27/10 |
| 230.00 | List of Paramedic Receiving Centers      | 08/31/12 |

***Specialty Care Receiving Centers:***

|        |  |          |
|--------|--|----------|
| 240.10 | List of Trauma Receiving Centers           | 02/28/11 |
| 240.20 | List of Stroke-Neurology Receiving Centers | 10/01/09 |
| 240.30 | List of Orange County Specialty Services   | 02/25/11 |
| 240.40 | List of Cardiovascular Receiving Centers   | 07/01/10 |

***Training Programs:***

|        |   |          |
|--------|---|----------|
| 250.10 | Orange County Approved EMT-I Training Schools         | 03/19/07 |
| 250.20 | Orange County Approved EMT-Paramedic Training Program | 10/24/08 |

**300.00 - 399.99 MEDICAL CONTROL*****Triage Guidelines:***

|        |  |          |
|--------|--|----------|
| 310.10 | Determination of Appropriate Facility                  | 08/01/92 |
| 310.15 | Physician at Scene                                     | 07/01/92 |
| 310.30 | Trauma Triage Guidelines                               | 01/03/11 |
| 310.89 | STAT Transportation Guidelines                         | 09/01/92 |
| 310.96 | Guidelines for Hospitals Requesting Bypass of Patients | 09/01/02 |
| 310.97 | Early Paramedic Warning System                         | 08/01/92 |

***Prehospital Care:***

|        |   |          |
|--------|---|----------|
| 320.00 | ALS Unit Medications                      | 10/22/99 |
| 325.00 | ALS Unit Inventory                        | 03/16/09 |
| 330.05 | ALS Treatment in a Major Medical Disaster | 09/01/92 |
| 330.15 | ALS Treatment in Communications Failure   | 03/17/08 |
| 330.20 | Transport of Minors                       | 11/01/98 |

**Implementation Date**

|        |  |          |
|--------|--|----------|
| 330.25 | Infant Safe Surrender  | 07/13/05 |
| 330.30 | Suspected Child Abuse Reporting Guidelines   | 01/01/99 |
| 330.35 | Suspected Dependent Adult / Elder Abuse Reporting Guidelines   | 01/08/07 |
| 330.40 | First Responder Defibrillation Standing Order  | 09/08/05 |
| 330.45 | Field Research: Prehospital Emergency Care   | 03/20/90 |
| 330.46 | Field Research Petition  | 03/20/90 |
| 330.47 | Undefined Scope of Practice: EMT-P   | 06/01/94 |
| 330.50 | Withholding Prehospital CPR for the Obviously Dead   | 03/16/09 |
| 330.51 | Do-Not-Resuscitate (DNR) Guidelines and Health Care Directives   | 03/16/09 |
| 330.52 | Identification of Anatomical Donor Patients  | 09/01/93 |
| 330.53 | Emergency Information Sheet for Patients with Severe or Chronic Illness  | 12/01/00 |
| 330.55 | Code 5150  | 08/01/92 |
| 330.57 | Application of Restraints by EMS Personnel   | 05/22/06 |
| 330.60 | Transfer of Patient Care: EMT-P to Air Ambulance Flight Nurse  | 03/01/99 |
| 330.65 | Patient Refusal of Prehospital Care and/or Transport Against Medical Advice (AMA)                                    | 03/01/94 |
| 330.66 | Attachment to Policy 330.65 Refusal of Emergency Medical Services Against Medical Advice [AKA: Patient Release Form] | 06/01/08 |
| 330.70 | Paramedic Assessment Unit Service  | 03/01/00 |
| 330.96 | PRC Communicable Disease Exposure Guidelines for Prehospital Care Personnel  | 03/16/09 |
| 380.00 | Review of OCEMS Policy by a Base Hospital Physician  | 08/01/92 |

***Data Collection / Quality Improvement:***

|        |  |          |
|--------|--|----------|
| 385.00 | Continuous Quality Improvement Plan                  | 07/01/01 |
| 385.05 | Base Hospital Incident Review Process                | 08/18/05 |
| 390.00 | Confidentiality of Medical Information and QA Data   | 08/01/92 |
| 390.10 | Base Hospital Report Form                            | 09/01/07 |
| 390.15 | Prehospital Care Report                              | 03/01/08 |
| 390.16 | Attachment to Policy 390.15: Prehospital Care Report | 11/01/03 |
| 390.20 | BLS Ambulance Field Report                           | 08/01/92 |
| 390.30 | Air Ambulance Service Report Form                    | 10/30/00 |

**Implementation Date**

|        |   |          |
|--------|---|----------|
| 390.40 | Trauma Patient Registry: Form Completion and Filing Procedure     | 10/01/02 |
| 390.45 | PRC Trauma Patient Registry: Form Completion and Filing Procedure | 10/01/02 |
| 391.10 | Paramedic Transport/Hospital Discharge Data Report                | 07/01/92 |
| 392.00 | Incident/Complaint Review Process                                 | 07/01/92 |

**400.00 - 499.99 PERSONNEL CERTIFICATION / LICENSING**

|        |   |          |
|--------|---|----------|
| 400.00 | Mobile Intensive Care Nurse (MICN) Authorization                                | 09/02/10 |
| 410.00 | Emergency Medical Technician - I Certification                                  | 01/01/11 |
| 415.00 | Internal EMT-I/Ambulance Attendant Dept. of Justice (DOJ) Clearance             | 01/17/95 |
| 425.05 | First Responder / Community Provider Accreditation for Advanced Procedures      | 11/08/05 |
| 430.10 | Accreditation to Practice: EMT-Paramedic  | 03/17/08 |
| 430.10 | Accreditation Application – Attachment  | 03/01/09 |
| 430.15 | Accreditation to Practice EMT-Paramedic Application                             | 03/01/09 |
| 450.00 | EMT-P/MICN Informal Performance Review/Counseling                               | 01/18/95 |
| 460.00 | Prehospital Personnel: License, Accreditation, and Certification Review Process | 08/03/06 |
| 470.00 | Fees: Certification, Licensing, and Designation                                 | 09/01/12 |

**500.00 - 599.99 TRAINING PROGRAMS**

|        |  |          |
|--------|--|----------|
| 500.00 | Mobile Intensive Care Nurse (MICN)                       | 02/27/08 |
| 510.00 | Emergency Medical Technician-I Training                  | 11/10/10 |
| 510.05 | OCEMS Monitoring of Approved Training Programs           | 07/01/92 |
| 515.00 | Emergency Medical Dispatcher Training Program            | 09/01/92 |
| 520.00 | Paramedic Training Program Criteria                      | 01/01/95 |
| 525.00 | Paramedic Training: Selection of Candidates              | 08/01/94 |
| 525.50 | Internal Precepting of EMT-P Field Internship Candidates | 08/01/94 |
| 530.00 | Prehospital Continuing Education (CE) Provider Approval  | 05/16/05 |
|        | Attachment 1 & 2   | 11/01/11 |
| 535.00 | Public Safety Personnel First Aid Training Program       | 09/01/92 |

**Implementation Date****600.00 - 699.99 MEDICAL FACILITIES**

|        |   |          |
|--------|---|----------|
| 600.00 | Paramedic Receiving Center Criteria                                   | 10/01/02 |
| 600.05 | Paramedic Receiving Center Criteria Checklist                         | 10/01/02 |
| 600.10 | Paramedic Receiving Center - Resource Listing                         | 09/12/12 |
| 610.00 | Base Hospital Criteria  | 09/26/05 |
| 610.05 | Base Hospital Criteria Checklist                                      | 02/12/05 |
| 610.10 | Base Hospital Agreement for Provision of BH Services                  | 12/05/94 |
| 615.00 | Impact Evaluation of Reduction/Closure of Hospital Emergency Services | 12/01/99 |

***Specialty Care Centers:***

|        |  |          |
|--------|--|----------|
| 620.00 | Paramedic Trauma Receiving Center Criteria   | 11/25/08 |
| 620.05 | Paramedic Trauma Receiving Center Criteria Checklist                                 | 12/01/00 |
| 620.07 | Trauma System Design   | 08/06/07 |
| 620.11 | Trauma System Marketing & Advertising by Trauma Centers & Prehospital Care Providers | 09/01/92 |
| 620.13 | Trauma System Public Information and Education                                       | 09/01/92 |
| 620.14 | Integration of Pediatric Care in the Trauma System                                   | 09/01/92 |

***Approval / Designation Process:***

|        |  |          |
|--------|--|----------|
| 630.00 | Cardiovascular Receiving Center Criteria   | 10/01/04 |
| 635.00 | Paramedic Receiving Center / Base Hospital: Survey / Resurvey  | 07/01/92 |
| 635.10 | Paramedic Trauma Receiving Center: Survey / Resurvey   | 08/06/07 |
| 640.00 | Base Hospital / Facility Program:<br>Approval / Designation Process and Appeal Procedures  | 01/01/94 |
| 645.00 | Base Hospitals / Facilities / Training Programs / EMT-P Service Providers:<br>Review Process for Suspension/Revocation of Approval / Designation | 08/19/91 |
| 650.00 | Stroke-Neurology Receiving Center  | 03/16/09 |
| 655.00 | Agreement to Provide Services as a PRC   | 08/01/00 |
| 660.00 | Agreement to Provide Services as a PTRC  | 08/01/00 |
| 670.10 | Interhospital Emergency Patient Transfer Guidelines  | 03/13/06 |
| 670.10 | Interfacility Transport Supplemental Report – Attachment   | 07/01/09 |

**Implementation Date****700.00 - 799.99 MEDICAL TRANSPORTATION CERTIFICATION / LICENSING**

|        |  |          |
|--------|--|----------|
| 700.00 | EMT-P Service Provider Criteria  | 08/24/95 |
| 700.05 | EMT-P Service Provider Checklist   | 08/24/95 |
| 705.00 | ALS Unit Approval/Reactivation   | 09/01/93 |
| 705.05 | ALS Unit Approval/Reactivation Checklist                                 | 03/01/95 |
| 706.00 | Temporary ALS Unit Activation  | 12/01/01 |
| 707.00 | Assessment Unit Service Authorization / Reactivation                     | 05/01/94 |
| 710.00 | First Responder / Community Based EMS Provider                           | 10/01/99 |
| 714.00 | Maximum Emergency Ground Ambulance Rates – July 1, 2012                  | 07/31/12 |
| 715.00 | Ambulance Ordinance No. 3517   | 04/30/85 |
| 720.00 | Ambulance Rules and Regulations (Cover Page)                             | 10/01/05 |
|        | Section 100: Codified Ordinance 3517                                     | 01/01/86 |
|        | Section 200: Complaint Processing  | 11/14/97 |
|        | Section 300: Ground Ambulance Design/Documentation Equipment             | 01/01/13 |
|        | Section 302: Ground Ambulance Communication Equipment/Dispatch Standards | 12/01/97 |
|        | Section 304: Required Ground Ambulance Service Policies and Procedures   | 12/01/97 |
|        | Section 306: Ground Ambulance Service Inspection                         | 08/01/94 |
|        | Section 308: Ground Ambulance Vehicle Inspection                         | 11/01/97 |
|        | Section 310: Required Ground Ambulance Self Inspection                   | 08/01/94 |
|        | Section 312: Ground Emergency Ambulance Service Rates                    | 12/13/11 |
|        | Section 314: Ground Ambulance Service Rates Adjustment                   | 07/31/12 |
|        | Section 400: Ground Ambulance Service License                            | 09/01/93 |
|        | Section 402: Ground Ambulance License                                    | 10/01/93 |
|        | Section 404: Ground Ambulance Medical Transportation Attendant License   | 01/04/11 |
|        | Section 500: Ground Ambulance: Basic Life Support Medical Record         | 09/01/96 |
|        | Section 502: Ground Ambulance: Dispatch Records                          | 12/01/93 |
|        | Section 504: Ground Ambulance: Personnel Files                           | 05/01/99 |
|        | Section 506: Ground Ambulance: Ambulance Files                           | 11/01/97 |
|        | Section 508: Ground Ambulance: Licensing Fees                            | 05/01/05 |
|        | Section 600: Prehospital Air Ambulance and Air Rescue Service            | 08/01/98 |

**Implementation Date**

|   |          |
|---|----------|
| Section 602: Prehospital Air Ambulance and Air Rescue Service Activation Procedure: Pilot | 10/01/96 |
| Section 704: Air Ambulance: Attendant License   | 09/01/96 |
| Section 806: Air Ambulance: Licensing Fees  | 01/01/03 |
| Appendix i: Definitions   | 12/01/97 |
| Appendix ii: Ambulance Contract Cities  | 04/29/08 |
| 725.00 Public Safety Ground Ambulance Inspection  | 01/01/95 |
| 750.05 Air Ambulance and Air Rescue Services Data Reporting                               | 03/01/95 |

**800.00 - 899.99 COMMUNICATIONS**

|   |          |
|---|----------|
| 850.00 ALS Communications Assignment  | 09/01/92 |
| 853.0 Hospital Emergency Administrative Radio (H.E.A.R.) Network Validation | 09/01/92 |

**900.00 - 999.99 DISASTER RESPONSE**

|   |          |
|---|----------|
| 900.00 Mass Casualty Incident Response Plan | 10/09/08 |
|---|----------|