



ADVANCED LICENSED HEALTH CARE PROFESSIONAL ON SCENE

I. AUTHORITY:

Endorsed by California Emergency Medical Services Authority, California Conference of Local Health Officers, California Medical Association, Medical Board of Quality Assurance, and Orange County Emergency Medical Services (OCEMS). HSC, Division 2.5, Chapter 5, 1798.6(a).

II. APPLICATION:

This policy identifies the process for patient care coordination between advanced licensed or certified health care professionals, advanced emergency medical technicians, and paramedics at the scene of injury/illness. Authority for patient health care management shall be by those individuals who are the most medically qualified specific to the provision of rendering emergency medical care.

III. CRITERIA:

While the following reproduced document uses language that specifically applies to physicians' involvement with AEMTs and Paramedics, it shall be the policy of OCEMS that the same directives will apply to any advanced licensed health care professional. Such individuals shall include but not be limited to physicians, nurse practitioners, nurse anesthetists, physician assistants, and certified nurse midwives.

IV. ROLE OF 911 PROVIDER AGENCY MEDICAL DIRECTORS

Paramedics are expected to follow OCEMS protocols requiring base hospital contact whether a physician is on scene or not. Provider agency medical directors may provide educational context to EMTs and paramedics on-scene and off, before, during, and after patient encounters, including classes, training, ride-alongs, debriefings, QA and CQI. If it is helpful for the base hospital to receive patient descriptions from the physician on scene, they may, and then the base hospital will issue orders for the paramedics to follow.

V. EXCEPTION: BUSINESS AND PROFESSIONAL CODE § 18708

With the enactment of this law, an exception exists to the current options for advanced licensed medical professionals (physicians, others) to provide on-scene care when paramedics are present on-site supporting a California State Athletic Commission sanctioned event. This law permits ringside physicians to direct on-site ambulances and their crews to transport professional or amateur boxers, wrestlers, or martial arts fighters licensed under B&P Code Division 8, Chapter 2, to a trauma center without delay.

OCEMS acknowledges the right of ringside physicians to direct paramedics to transport to a trauma center, whether or not they accompany the patient in the ambulance. On-site ambulances shall follow such instructions. The term "without delay" is interpreted by OCEMS to mean no delay should occur in accepting the instructions to transport the patient to a trauma center. Evaluation of the patient's acute medical condition by the paramedics and providing immediate emergent life-saving care per paramedic judgment on-scene, including obtaining vital signs and airway placement, shall not be interpreted as a delay.



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STATE OF CALIFORNIA



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

A life support team AEMT 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 listed on the back of this card. These alternatives have been endorsed by CMA, State EMS Authority, CCLHO, and BMQA.

Assistance rendered in the 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).

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ENDORSED ALTERNATIVES FOR PHYSICIAN INVOLVMENT

After identifying yourself by name as a physician licensed in the state of California, and if requested, showing proof of identity, you may choose to do one of the following:

1. Offer your assistance with another pair of eyes, hands, or suggestions, but let the life support team remain under the base hospital control; or,
2. Request to talk to the base station physician and directly offer your medical advice and assistance; or,
3. 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.)

(REV. 1/12) 12 49638 Provided by the Emergency Medical Services Authority

OSP 12 126336

Approved:

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