

1 **California Code of Regulations**
2 **Title 22. Social Security**
3 **Division 9. Prehospital Emergency Medical Services**
4 **Chapter 2. Emergency Medical Technician**

6 The Emergency Medical Services Authority has illustrated changes to the original text in
7 the following manner:

- 8 • Additions to the original text = underlined
- 9 • Deletions to the original text = ~~strikeout~~
- 10 • Additions to the text proposed in 45-day comment period = double underline
- 11 • Deletions to the text proposed in 45-day public comment period = ~~double~~
12 ~~strikeout~~
- 13 • Additions to the text proposed in the 2nd 45-day comment period = dash
14 underline
- 15 • Deletions to the text proposed in the 2nd 45-day comment period = ~~double strike~~
16 ~~italics~~

17 **ARTICLE 1. DEFINITIONS**

18
19 **§ 100056. No change.**

20 **§ 100056.1. No change.**

21 **§ 100056.2. No change.**

22 **§ 100057. Emergency Medical Technician Approving Authority.**

23 (a) “Emergency Medical Technician (EMT) approving authority” means an agency or
24 person authorized by this Chapter to approve an EMT training program, as follows:
25

26 ~~(a)~~ (1) The EMT approving authority for an EMT training program conducted by a
27 qualified statewide public safety agency shall be the director of the Emergency Medical
28 Services Authority (Authority).

29
30 ~~(b)~~ (2) ~~The EMT approving authority for any~~ Any other EMT training programs not
31 included in subsection (a) (1) shall be approved by the local EMS agency (LEMSA)
32 ~~within~~ that has jurisdiction in the area county where the training program is located.
33

34 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
35 Code. Reference: Sections 1797.94, 1797.109, 1797.170 and 1797.208, Health and
36 Safety Code.
37
38

1 **§ 100057.1. High Fidelity Simulation**

2 High Fidelity Simulation means using computerized manikins ~~mannequins~~ that are
3 operated by a technologist from another location to produce audible sounds and to alter,
4 simulate and manage physiological changes within the manikin ~~mannequins~~ to include,
5 but not be limited to, altering the heart rate, respirations, chest/lung sounds, blood
6 pressure and saturation of oxygen.

7
8 **§ 100057.2. Electronic Health Record**

9 “Electronic health record” or EHR, or electronic patient care record or ePCR means real
10 time, patient-centered records that make information available securely to authorized
11 users in a digital format capable of being shared with other providers across more than
12 one health care organization.

13
14 **§ 100058. No change.**

15
16 **§ 100059. EMT Certifying ~~Written~~ Cognitive Examination.**

17 “EMT Certifying ~~Written~~ Cognitive Examination” means the National Registry of
18 Emergency Medical Technicians EMT-~~Basic~~ ~~Written~~ Cognitive Examination to test an
19 individual applying for certification as an EMT. ~~Examination results will be valid for~~
20 application purposes two (2) years from the date of examination.

21
22 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
23 and Safety Code. Reference: Sections 1797.63, 1797.170, 1797.175, 1797.184,
24 1797.210 and 1797.216, Health and Safety Code.

25
26 **§ 100059.1. EMT Certifying ~~Skills~~ Psychomotor Examination.**

27 “Certifying ~~Skills~~ Psychomotor Examination” means the National Registry of Emergency
28 Medical Technicians EMT-~~Basic~~ ~~Skills~~ Psychomotor Examination to test an individual
29 applying for certification as an EMT. ~~Examination results will be valid for one (1) year for~~
30 the purpose of being eligible for the National Registry of Emergency Medical
31 Technicians EMT-~~Basic~~ ~~Written~~ Examination.

32
33 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
34 and Safety Code. Reference: Sections 1797.63, 1797.170, 1797.175, 1797.184,
35 1797.210 and 1797.216, Health and Safety Code.

36
37 **§ 100059.2. EMT Optional Skills Medical Director.**

38 “EMT Optional skills medical director” means a Physician and Surgeon licensed in
39 California who is certified by or prepared for certification by either the American Board
40 of Emergency Medicine or the Advisory Board for Osteopathic Specialties and is
41 appointed by the LEMSA medical director to be responsible for any of the EMT Optional
42 and basic ~~S~~skills that are listed in Sections 100063(b) and 100064 of this Chapter
43 including medical control. Waiver of the board-certified requirement may be granted by
44 the LEMSA medical director if such physicians are not available for approval.

1
2 Note: Authority cited: Sections 1797.107 and 1797.170, Health and Safety Code.
3 Reference: Sections 1797.52, 1797.90, 1797.107, 1797.170, 1797.176 and 1797.202,
4 Health and Safety Code.
5

6 **§ 100060. No change.**

7 **§ 100061. EMT Local Accreditation.**

8 “Local accreditation” or “accreditation” or “accredited to practice” as used in this
9 Chapter, means authorization by the LEMSA to practice the optional skill(s) specified in
10 Section 100064. Such authorization assures that the EMT has been oriented to the
11 LEMSA and trained in the optional skill(s) necessary to achieve the treatment standard
12 of the jurisdiction.
13

14 Note: Authority cited: Sections 1797.107 and 1797.170, Health and Safety Code.
15 Reference: Sections 1797.7, 1797.170, 1797.176, 1797.177, 1797.178, 1797.200,
16 1797.204, 1797.206, 1797.210 and 1797.214, Health and Safety Code.
17

18 **§ 100061.1. No change.**

19 **§ 100061.2. No change.**

20 ARTICLE 2. GENERAL PROVISIONS

21
22 **§ 100062. Application of Chapter to ~~Operation of Ambulances.~~**

23 (a) Except as provided herein, the attendant on an ambulance operated in emergency
24 service, or the driver if there is no attendant, shall possess a valid and current California
25 EMT certificate. This requirement shall not apply during officially declared states of
26 emergency and under conditions specified in Health and Safety Code, Section
27 1797.160.
28

29 (b) The requirements for EMT certification of ambulance attendants shall not apply,
30 unless the individual chooses to be certified, to the following:
31

32 (1) Physicians currently licensed in California.
33

34 (2) Registered nurses currently licensed in California.
35

36 (3) Physicians' assistants currently licensed in California.
37

38 (4) Paramedics currently licensed in California.
39

1 (5) Advanced Emergency Medical Technicians (Advanced EMTs) currently certified in
2 California.

3
4 (c) EMTs who are not currently certified in California may temporarily perform their
5 scope of practice in California, when approved by the medical director of the LEMSA, in
6 order to provide emergency medical services in response to a request, if all the
7 following conditions are met:

8
9 (1) The EMTs are registered by the National Registry of Emergency Medical
10 Technicians or licensed or certified in another state or under the jurisdiction of a branch
11 of the Armed Forces including the Coast Guard of the United States, National Park
12 Service, United States Department of the Interior - Bureau of Land Management, or the
13 United States Forest Service; and

14
15 (2) The EMTs restrict their scope of practice to that for which they are licensed or
16 certified.

17
18 ~~(d) A licensed paramedic employed as an EMT may perform any activity identified in the~~
19 ~~scope of practice of an EMT without requiring a separate certification.~~

20
21 (d) The local EMS agency shall develop and implement policies for the medical control
22 and medical accountability of care rendered by the EMT. This shall include, but not be
23 limited to, basic life support protocols, policies and procedures and documentation
24 which may include completing an electronic health record (EHR) which is compliant with
25 the current versions of the California Emergency Medical Services Information System
26 (CEMSIS) and the National Emergency Medical Services Information Systems
27 (NEMSIS) standards.

28
29 (e) California certified EMTs shall be recognized as an EMT on a statewide basis.

30
31 (f) If an EMT or Advanced EMT certification card is lost, destroyed, damaged, or there
32 has been a change in the name of the EMT, a duplicate certification card may be
33 requested. The request shall be in writing to the certifying entity that issued the EMT
34 certificate and include a statement identifying the reason for the request and, if due to a
35 name change, include a copy of legal documentation of the change in name. The
36 duplicate card shall bear the original certification number and date of expiration as the
37 replaced card.

38
39 (g) An individual currently certified as an EMT by the provisions of this section may
40 voluntarily deactivate their EMT certificate as long as the individual is not under
41 investigation or disciplinary action by a LEMSA medical director for violations of Health
42 and Safety Code Section 1798.200. An individual who has voluntarily deactivated, their
43 EMT certificate shall comply with the following:

44
45 (1) Discontinue all medical practice requiring an active and valid EMT certificate.

1
2 (2) Return the EMT certificate to the certifying entity.

3
4 (3) Notify the LEMSA to whom they are accredited as an EMT that their certification is
5 no longer valid.

6
7 (4) The reactivation of the EMT certificate shall be done in accordance with the
8 provisions of Section ~~100080~~ or 100081 of this Chapter.

9
10 (5) This information shall be entered into the Central Registry by the certifying entity
11 who issued the EMT certificate. ~~card.~~

12
13 Note: Authority cited: Sections 1797.107, 1797.109 ~~and~~ 1797.170, 1797.220, and
14 1797.227 Health and Safety Code. Reference: Sections 1797.160 and 1797.170, Health
15 and Safety Code.

16
17 **§ 100063. Basic Scope of Practice of Emergency Medical Technician.**

18 (a) During training, while at the scene of an emergency, during transport of the sick or
19 injured, or during interfacility transfer, a certified EMT or supervised EMT student is
20 authorized to do any of the following:

21
22 (1) Evaluate the ill and injured.

23
24 (2) Render basic life support, rescue and emergency medical care to patients.

25
26 (3) Obtain diagnostic signs to include, but not be limited to, temperature, blood
27 pressure, pulse and respiration rates, pulse oximetry, level of consciousness and pupil
28 status.

29
30 (4) Perform cardiopulmonary resuscitation (CPR), including the use of mechanical
31 adjuncts to basic cardiopulmonary resuscitation.

32
33 (5) Administer oxygen.

34
35 (6) Use the following adjunctive airway and breathing aids:

36
37 (A) Oropharyngeal airway;

38
39 (B) Nasopharyngeal airway;

40
41 (C) Suction devices;

42
43 (D) Basic oxygen delivery devices for supplemental oxygen therapy including, but not
44 limited to, humidifiers, partial rebreathers, and venturi masks; and
45

- 1 (E) Manual and mechanical ventilating devices designed for prehospital use including
2 continuous positive airway pressure.
3
- 4 (7) Use various types of stretchers and spinal motion restriction or immobilization
5 ~~(immobilization)~~ devices.
6
- 7 (8) Provide initial prehospital emergency care to patients of trauma, including, but not
8 limited to:
9
- 10 (A) Bleeding control through the application of tourniquets;
11
- 12 (B) Use of hemostatic dressings from a list approved by the Authority;
13
- 14 (C) Spinal motion restriction or immobilization ~~(immobilization)~~;
15
- 16 (D) Seated spinal motion restriction or immobilization ~~(immobilization)~~;
17
- 18 (E) Extremity splinting; and
19
- 20 (F) Traction splinting.
21
- 22 ~~(9) Administer over the counter medications when approved by the medical director of~~
23 ~~the LEMSA, including, but not limited to:~~
24
- 25 ~~(A)(G) Administer Oral glucose or sugar solutions,~~
26
- 27 ~~(B)(H) Administer Aspirin~~
28
- 29 ~~(10)(I) (H) Extricate entrapped persons.~~
30
- 31 ~~(11) (J) (I) Perform field triage.~~
32
- 33 ~~(12) (K) (J) Transport patients.~~
34
- 35 ~~(13) (L) (K) Apply Mechanical patient restraint.~~
36
- 37 ~~(14) (M) (L) Set up for ALS procedures, under the direction of an Advanced EMT or~~
38 ~~Paramedic.~~
39
- 40 ~~(15) (N) (M) Perform automated external defibrillation.~~
41
- 42 ~~(16) (O) (N) Assist patients with the administration of physician-prescribed devices~~
43 ~~including, but not limited to, patient-operated medication pumps, sublingual~~
44 ~~nitroglycerin, and self-administered emergency medications, including epinephrine~~
45 ~~devices.~~

1
2 (b) In addition to the activities authorized by subdivision (a) of this Section, the medical
3 director of the LEMSA may also establish policies and procedures to allow a certified
4 EMT or a supervised EMT student who is part of the organized EMS system and in the
5 prehospital setting and/or during interfacility transport ~~as part of an organized EMS~~
6 ~~system within the jurisdiction where the EMT is employed~~ to:

7
8 (1) Monitor intravenous lines delivering glucose solutions or isotonic balanced salt
9 solutions including Ringer's lactate for volume replacement. Monitor, maintain, and
10 adjust if necessary in order to maintain, a preset rate of flow and turn off the flow of
11 intravenous fluid;

12
13 ~~(2) Monitor, maintain, and adjust if necessary in order to maintain, a preset rate of flow~~
14 ~~and turn off the flow of intravenous fluid;~~

15
16 ~~(3)~~(2) Transfer a patient, who is deemed appropriate for transfer by the transferring
17 physician, and who has nasogastric (NG) tubes, gastrostomy tubes, heparin locks, foley
18 catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding
19 arterial lines; ~~and~~

20
21 ~~(4) Monitor preexisting vascular access devices and intravenous lines delivering fluids~~
22 ~~with additional medications pre-approved by the Director of the Authority. Approval of~~
23 ~~such medications shall be obtained pursuant to the following procedures:~~

24
25 ~~(A) The medical director of the LEMSA shall submit a written request, Form #EMSA-~~
26 ~~0391, revised March 18, 2003, and obtain approval from the director of the Authority,~~
27 ~~who shall consult with a committee of LEMSA medical directors named by the~~
28 ~~Emergency Medical Services Medical Directors' Association of California, Inc.~~
29 ~~(EMDAC), for any additional medications that in his/her professional judgment should~~
30 ~~be approved for implementation of Section 100063(b)(4).~~

31
32 ~~(B) The Authority shall, within fourteen (14) working days of receiving the request, notify~~
33 ~~the medical director of the LEMSA submitting the request that the request has been~~
34 ~~received, and shall specify what information, if any, is missing.~~

35
36 ~~(C) The director of the Authority shall render the decision to approve or disapprove the~~
37 ~~additional medications within ninety (90) calendar days of receipt of the completed~~
38 ~~request.~~

39
40 (3) Administer naloxone or other opioid antagonist by intranasal and/or intramuscular
41 routes for suspected narcotic overdose;

42
43 (4) Administer epinephrine by auto-injector for suspected anaphylaxis and/or severe
44 asthma;

1 ~~(5) Perform finger stick blood glucose testing; when appropriate authorization is~~
2 ~~obtained from State and Federal agencies, including from the Centers for Medicare and~~
3 ~~Medicaid Services pursuant to the Clinical Laboratory Improvement Amendments~~
4 ~~(CLIA);~~

5
6 (6) Administer over the counter medications, when approved by the medical director,
7 including but not limited to:

8
9 (A) Aspirin.

10
11 ~~(c) The medical director of the LEMSA shall implement policies, procedures and~~
12 ~~protocols for the administration of naloxone and finger stick glucose testing. The~~
13 ~~policies, procedures and protocols shall, at a minimum, include those items listed in~~
14 ~~Section 100064 (b)(c)(d)(e)(f)(g)(h)(i).~~

15
16 (c) ~~(d)~~ The scope of practice of an EMT shall not exceed those activities authorized in
17 this Section, Section 100064, and Section 100064.1.

18
19 (d) ~~(e)~~ During a mutual aid response into another jurisdiction, an EMT may utilize the
20 scope of practice for which s/he is trained and authorized according to the policies and
21 procedures established by the LEMSA within the jurisdiction where the EMT is
22 employed as part of an organized EMS system.

23
24 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
25 Code. Reference: Sections 1797.8, 1797.170, 1797.197 and 1797.221, Health and
26 Safety Code.

27
28 **§ 100063.1. No change.**

29 **§ 100064. EMT Optional Skills.**

30 (a) In addition to the activities authorized by Section 100063 of this Chapter, a LEMSA
31 may establish policies and procedures for local accreditation of an EMT student or
32 certified EMT to perform any or all of the following optional skills specified in this
33 section. Accreditation for EMTs to practice optional skills shall be limited to those whose
34 EMT certificate is active and are employed within the jurisdiction of the LEMSA by an
35 employer who is part of the organized EMS system.

36
37 ~~(1) Accreditation for EMTs to practice optional skills shall be limited to those whose~~
38 ~~certificate is active and are employed within the jurisdiction of the LEMSA by an~~
39 ~~employer who is part of the organized EMS system.~~

40
41 ~~(b)(1)~~ Use of perilaryngeal airway adjuncts.
42

1 ~~(4)~~ (A) Training in the use of perilaryngeal airway adjuncts shall consist of not less than
2 five ~~(5)~~ hours to result in the EMT being competent in the use of the device and airway
3 control. Included in the above training hours shall be the following topics and skills:
4

5 ~~(A)~~1 Anatomy and physiology of the respiratory system.
6

7 ~~(B)~~2 Assessment of the respiratory system.
8

9 ~~(C)~~3 Review of basic airway management techniques, which includes manual and
10 mechanical.
11

12 ~~(D)~~4 The role of the perilaryngeal airway adjuncts in the sequence of airway control.
13

14 ~~(E)~~5 Indications and contraindications of the perilaryngeal airway adjuncts.
15

16 ~~(F)~~6 The role of pre-oxygenation in preparation for the perilaryngeal airway adjuncts.
17

18 ~~(G)~~7 ~~P~~U Perilaryngeal airway adjuncts insertion and assessment of placement.
19

20 ~~(H)~~8 Methods for prevention of basic skills deterioration.
21

22 ~~(I)~~9 Alternatives to the perilaryngeal airway adjuncts.
23

24 ~~(2)~~ 10 At the completion of initial training a student shall complete a competency-based
25 written and skills examination for airway management which shall include the use of
26 basic airway equipment and techniques and use of perilaryngeal airway adjuncts.
27

28 ~~(3)~~ 11 A LEMSA shall establish policies and procedures for skills competency
29 demonstration that requires the accredited EMT to demonstrate skills competency at
30 least every two (2) years, or more frequently as determined by the EMSQIP.
31

32 ~~(c) Administration of naloxone for suspected narcotic overdose.~~
33

34 ~~(1) Training in the administration of naloxone shall consist of no less than two (2) hours~~
35 ~~to result in the EMT being competent in the administration of naloxone and managing a~~
36 ~~patient of a suspected narcotic overdose. Included in the training hours listed above~~
37 ~~shall be the following topics and skills:~~
38

39 ~~(A) Common causative agents~~
40

41 ~~(B) Assessment findings~~
42

43 ~~(C) Management to include but not be limited to:~~
44

45 ~~(D) Need for appropriate personal protective equipment and scene safety awareness~~

- 1
2 ~~(E) Profile of Naloxone to include, but not be limited to:~~
3
4 ~~1. Indications~~
5
6 ~~2. Contraindications~~
7
8 ~~3. Side/adverse effects~~
9
10 ~~4. Routes of administration~~
11
12 ~~5. Dosages~~
13
14 ~~(F) Mechanisms of drug action~~
15
16 ~~(G) Calculating drug dosages~~
17
18 ~~(H) Medical asepsis~~
19
20 ~~(I) Disposal of contaminated items and sharps~~
21
22 ~~(2) At the completion of this training, the student shall complete a competency based~~
23 ~~written and skills examination for administration of naloxone which shall include:~~
24
25 ~~(A) Assessment of when to administer naloxone,~~
26
27 ~~(B) Managing a patient before and after administering naloxone,~~
28
29 ~~(C) Using universal precautions and body substance isolation procedures during~~
30 ~~medication administration,~~
31
32 ~~(D) Demonstrating aseptic technique during medication administration,~~
33
34 ~~(E) Demonstrate preparation and administration of parenteral medications by a route~~
35 ~~other than intravenous.~~
36
37 ~~(F) Proper disposal of contaminated items and sharps.~~
38
39 ~~(3) A LEMSA shall establish policies and procedures for skills competency~~
40 ~~demonstration that requires the accredited EMT to demonstrate skills competency at~~
41 ~~least every two (2) years, or more frequently as determined by EMSQIP.~~
42
43 ~~(d) (b) (2) Administration of epinephrine by prefilled syringe and/or drawing up the~~
44 ~~proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma.~~
45

1 ~~(4)~~ (A) Training in the administration of epinephrine by prefilled syringe and/or drawing
2 up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma
3 shall consist of no less than two (2) hours to result in the EMT being competent in the
4 use and administration of epinephrine by prefilled syringe and/or drawing up the proper
5 drug dose into a syringe and managing a patient of a suspected anaphylactic reaction
6 and/or experiencing severe asthma symptoms. Included in the training hours listed
7 above shall be the following topics and skills:

8
9 ~~(A)~~ Common causative agents

10
11 ~~(B)~~ Assessment findings

12
13 ~~(C)~~ Management to include but not be limited to:

14
15 ~~(1)~~ 1. Need for appropriate personal protective equipment and scene safety awareness

16
17 ~~(D)~~ Profile of epinephrine to include, but not be limited to:

18
19 ~~(A)~~ 1. Names

20
21 ~~1.~~ ~~(B)~~ 2. Indications

22
23 ~~2.~~ ~~(C)~~ 3. Contraindications

24
25 ~~(D)~~ 4. Complications

26
27 ~~3.~~ ~~(E)~~ 5. Side/adverse adverse effects

28
29 ~~(F)~~ 6. Interactions

30
31 ~~4.~~ ~~(G)~~ 7. Routes of Administration by auto-injector

32
33 ~~5.~~ ~~(H)~~ 8. Calculating Dosages

34
35 ~~6.~~ ~~(I)~~ 9. Mechanisms of drug actions

36
37 ~~(E)~~ 10. Medical asepsis

38
39 ~~(F)~~ 11. Disposal of contaminated items and sharps

40
41 12. Medication administration

42
43 ~~(2)~~ (B) At the completion of this training, the student shall complete a competency
44 based written and skills examination for the use and/or administration of epinephrine by

- 1 prefilled syringe and/or drawing up the proper drug dose into a syringe which shall
2 include:
3
- 4 ~~(A)~~ 1. Assessment of when to administer epinephrine,
5
6 ~~(B)~~ 2. Managing a patient before and after administering epinephrine,
7
8 ~~(C)~~ 3. Using universal precautions and body substance isolation procedures during
9 medication administration,
10
11 ~~(D)~~ 4. Demonstrating aseptic technique during medication administration,
12
13 ~~(E)~~ 5. Demonstrate preparation and administration of epinephrine by prefilled syringe
14 and/or drawing up the proper drug dose into a syringe.
15
16 ~~(F)~~ 6. Proper disposal of contaminated items and sharps.
17
- 18 ~~(3) A LEMSA shall establish policies and procedures for skills competency~~
19 ~~demonstration that requires the accredited EMT to demonstrate skills competency at~~
20 ~~least every two (2) years, or more frequently as determined by EMSQIP.~~
21
- 22 (3)(e) Administer the medications listed in this subsection.
23
- 24 ~~(4)(A)~~ Using prepackaged products, the following medications may be administered:
25
- 26 ~~(A)~~ 1 Atropine
27
28 ~~(B)~~ 2 Pralidoxime Chloride
29
- 30 ~~(2)(B)~~ This training shall consist of no less than two (2) hours of didactic and skills
31 laboratory training to result in competency. In addition, a basic weapons of mass
32 destruction training is recommended. Training in the profile of medications listed in
33 subsections (A) ~~(A and B)~~ shall include, but not be limited to:
34
- 35 ~~(A)~~ 1 Indications
36
37 ~~(B)~~ 2 Contraindications
38
39 ~~(C)~~ 3 Side/adverse effects
40
41 ~~(D)~~ 4 Routes of administration
42
43 ~~(E)~~ 5 Dosages
44
45 ~~(F)~~ 6 Mechanisms of drug action

1
2 ~~(G)~~7 Disposal of contaminated items and sharps

3
4 ~~(H)~~8 Medication administration.

5
6 ~~(3)~~(C) At the completion of this training, the student shall complete a competency based
7 written and skills examination for the administration of medications listed in this
8 subsection which shall include:

9
10 ~~(A)~~1 Assessment of when to administer these medications,

11
12 ~~(B)~~2 Managing a patient before and after administering these medications,

13
14 ~~(C)~~3 Using universal precautions and body substance isolation procedures during
15 medication administration,

16
17 ~~(D)~~4 Demonstrating aseptic technique during medication administration,

18
19 ~~(E)~~5 Demonstrate the preparation and administration of medications by the
20 intramuscular route.

21
22 ~~(F)~~6 Proper disposal of contaminated items and sharps.

23
24 (4) Monitor preexisting vascular access devices and intravenous lines delivering fluids
25 with additional medications pre-approved by the Director of the Authority. Approval of
26 such medications shall be obtained pursuant to the following procedures:

27
28 ~~(b)~~ (A) The medical director of the LEMSA shall submit a written request, Form #EMSA-
29 0391, revised (12/16) 07/16, herein incorporated by reference, and obtain approval from
30 the director of the Authority, who shall consult with a committee of LEMSA medical
31 directors named by the Emergency Medical Services Medical Directors' Association of
32 California, Inc. (EMDAC), for any additional medications that in his/her professional
33 judgment should be approved for implementation of Section 100064(a)(3)100063(b)(4).

34
35 ~~(e)~~ (B) The Authority shall, within fourteen (14) working days of receiving the request,
36 notify the medical director of the LEMSA submitting the request that the request has
37 been received, and shall specify what information, if any, is missing.

38
39 ~~(d)~~ (C)The director of the Authority shall render the decision to approve or disapprove
40 the additional medications within ninety (90) calendar days of receipt of the completed
41 request.

42
43 ~~(4)(e)~~ (b) A LEMSA shall establish policies and procedures for skills competency
44 demonstration that requires the accredited EMT to demonstrate skills competency at
45 least every two (2) years, or more frequently as determined by the EMSQIP.

1
2 ~~(f)~~ (c) The medical director of the LEMSA shall develop a plan for each optional skill
3 allowed. The plan shall, at a minimum, include the following:
4

5 (1) A description of the need for the use of the optional skill.
6

7 (2) A description of the geographic area within which the optional skill will be utilized,
8 except as provided in Section 100064~~(f)~~ (j).
9

10 (3) A description of the data collection methodology which shall also include an
11 evaluation of the effectiveness of the optional skill.
12

13 (4) The policies and procedures to be instituted by the LEMSA regarding medical
14 control and use of the optional skill.
15

16 (5) The LEMSA shall develop policies for accreditation action, pursuant to Chapter 6 of
17 this Division, for individuals who fail to demonstrate competency.
18

19 ~~(g)~~ (d) A LEMSA medical director who accredits EMTs to perform any optional skill
20 shall:
21

22 (1) Establish policies and procedures for the approval of service provider(s) utilizing
23 approved optional skills.
24

25 (2) Approve and designate selected base hospital(s) as the LEMSA deems necessary
26 to provide direction and supervision of accredited EMTs in accordance with policies and
27 procedures established by the LEMSA.
28

29 (3) Establish policies and procedures to collect, maintain and evaluate patient care
30 records.
31

32 (4) Establish an EMSQIP. EMSQIP means a method of evaluation of services provided,
33 which includes defined standards, evaluation of methodology(ies) and utilization of
34 evaluation results for continued system improvement. Such methods may include, but
35 not be limited to, a written plan describing the program objectives, organization, scope
36 and mechanisms for overseeing the effectiveness of the program.
37

38 (5) Establish policies and procedures for additional training necessary to maintain
39 accreditation for each of the optional skills contained in this section, if applicable.
40

41 ~~(h)~~ (e) The LEMSA medical director may approve an optional skill medical director to be
42 responsible for accreditation and any or all of the following requirements:
43

1 (1) Approve and monitor training programs for optional skills including refresher training
2 within the jurisdiction of the LEMSA.

3
4 (2) Establish policies and procedures for continued competency in the optional skill
5 which will consist of organized field care audits, periodic training sessions and/or
6 structured clinical experience.

7
8 ~~(f)~~ (f) The optional skill medical director may delegate the specific field care audits,
9 training, and demonstration of competency, if approved by the LEMSA medical director,
10 to a Physician, Registered Nurse, Physician Assistant, Paramedic, or Advanced EMT,
11 licensed or certified in California or a physician licensed in another state immediately
12 adjacent to the LEMSA jurisdiction.

13
14 ~~(g)~~ (g) An EMT accredited in an optional skill may assist in demonstration of
15 competency and training of that skill.

16
17 ~~(h)~~ (h) In order to be accredited to utilize an optional skill, an EMT shall demonstrate
18 competency through passage, by pre-established standards, developed and/or
19 approved by the LEMSA, of a competency-based written and skills examination which
20 tests the ability to assess and manage the specified condition.

21
22 ~~(i)~~ (i) During a mutual aid response into another jurisdiction, an EMT may utilize the
23 scope of practice for which s/he is trained, certified and accredited according to the
24 policies and procedures established by his/her certifying or accrediting LEMSA.

25
26 Note: Authority cited: Sections 1797.107 and 1797.170, Health and Safety Code.
27 Reference: Sections 1797.8, 1797.52, 1797.58, 1797.90, 1797.170, 1797.173,
28 1797.175, 1797.176, 1797.202, 1797.208, 1797.212, 1798, 1798.2, 1798.100, 1798.102
29 and 1798.104, Health and Safety Code.

30
31 **§ 100064.1. EMT Trial Studies.**

32 An EMT may perform any prehospital emergency medical care treatment procedure(s)
33 or administer any medication(s) on a trial basis when approved by the medical director
34 of the LEMSA and the director of the Authority. The medical director of the LEMSA shall
35 review the medical literature on the procedure or medication and determine in his/her
36 professional judgment whether a trial study is needed.

37
38 (a) The medical director of the LEMSA shall review a trial study plan which, at a
39 minimum, shall include the following:

40
41 (1) A description of the procedure(s) or medication(s) proposed, the medical conditions
42 for which they can be utilized, and the patient population that will benefit.

43
44 (2) A compendium of relevant studies and material from the medical literature.

- 1
2 (3) A description of the proposed study design, including the scope of study and method
3 of evaluating the effectiveness of the procedure(s) or medication(s), and expected
4 outcome.
5
- 6 (4) Recommended policies and procedures to be instituted by the LEMSA regarding the
7 use and medical control of the procedure(s) or medication(s) used in the study.
8
- 9 (5) A description of the training and competency testing required to implement the
10 study. Training on subject matter shall be consistent with the related topic(s) and skill(s)
11 specified in Section 100159, Chapter 4 (Paramedic regulations), Division 9, Title 22,
12 California Code of Regulations.
13
- 14 (b) The medical director of the LEMSA shall appoint a local medical advisory committee
15 to assist with the evaluation and approval of trial studies. The membership of the
16 committee shall be determined by the medical director of the LEMSA, but shall include
17 individuals with knowledge and experience in research and the effect of the proposed
18 study on the EMS system.
19
- 20 (c) The medical director of the LEMSA shall submit the proposed study and a copy of
21 the proposed trial study plan at least forty-five (45) calendar days prior to the proposed
22 initiation of the study to the director of the Authority for approval in accordance with the
23 provisions of Section 1797.221 of the Health and Safety Code. The Authority shall
24 inform the Commission on EMS of studies being initiated.
25
- 26 (d) The Authority shall notify the medical director of the LEMSA submitting its request
27 for approval of a trial study within fourteen (14) working days of receiving the request
28 that the request has been received.
29
- 30 (e) The Director of the Authority shall render the decision to approve or disapprove the
31 trial study within forty-five (45) calendar days of receipt of all materials specified in
32 subsections (a) and (b) of this section.
33
- 34 (f) Within eighteen (18) months of the initiation of the procedure(s) or medication(s), the
35 medical director of the LEMSA shall submit to the Commission on EMS a written report
36 which includes at a minimum the progress of the study, number of patients studied,
37 beneficial effects, adverse reactions or complications, appropriate statistical evaluation,
38 and general conclusion.
39
- 40 (g) The Commission on EMS shall review the above report within two (2) meetings and
41 advise the Authority to do one of the following:
42
- 43 (1) Recommend termination of the study if there are adverse effects or if no benefit from
44 the study is shown.
45

1 (2) Recommend continuation of the study for a maximum of eighteen (18) additional
2 months if potential but inconclusive benefit is shown.

3
4 (3) Recommend the procedure or medication be added to the EMT scope of practice.

5
6 (h) If option (g)(2) is selected, the Commission on EMS may advise continuation of the
7 study as structured or alteration of the study to increase the validity of the results.

8
9 (i) At the end of the additional eighteen (18) month period, a final report shall be
10 submitted to the Commission on EMS with the same format as described in (f) above.

11
12 (j) The Commission on EMS shall review the final report and advise the Authority to do
13 one of the following:

14
15 (1) Recommend termination or further extension of the study.

16
17 (2) Accept the study recommendations.

18
19 (3) Recommend the procedure or medication be added to the EMT scope of practice.

20
21 (k) The Authority may require a trial study(ies) to cease after thirty-six (36) months.

22
23 Note: Authority cited: Section 1797.107 and 1797.170, Health and Safety Code.
24 Reference: Sections 1797.170 and 1797.221, Health and Safety Code.

25
26 **ARTICLE 3. PROGRAM REQUIREMENTS FOR EMT TRAINING PROGRAMS**

27
28 **§ 100065. No change.**

29 **§ 100066. No change.**

30 **§ 100067. No change.**

31 **§ 100068. No change.**

32 **§ 100069. EMT Training Program Notification.**

33 ~~(a) In accordance with Section 100057 the EMT Approving Authority shall notify the~~
34 ~~training program submitting its request for training program approval within seven (7)~~
35 ~~working days of receiving the request that:~~

36 ~~(1) The request has been received,~~

37 ~~(2) The request contains or does not contain the information requested in Section~~
38 ~~100066 of this Chapter and,~~

39 ~~(3) What information, if any, is missing from the request.~~

40 ~~(b) (a)~~ Program approval or disapproval shall be made in writing by the EMT approving
41 authority to the requesting training program within a reasonable period of time after

1 receipt of all required documentation. This time period shall not exceed three (3)
2 months.

3 ~~(e)~~ (b) The EMT approving authority shall establish the effective date of program
4 approval in writing upon the satisfactory documentation of compliance with all program
5 requirements.

6 ~~(d)~~ (c) The EMT training Pprogram approval effective date shall be the day the approval
7 is issued. The approval shall be valid for four (4) years following the effective date of
8 program approval- ending on the last day of the month in which it was issued and may
9 be renewed every four (4) years subject to the procedure for program approval specified
10 in this Chapter. section.

11 ~~(e)~~ (d) ~~Approved EMT training programs shall also receive approval as a continuing~~
12 ~~education CE provider effective the same date as the EMT training program approval.~~
13 ~~The CE program expiration date shall be the same expiration date as the EMT training~~
14 ~~program. The CE provider shall comply with all of the requirements contained in~~
15 ~~Chapter 11 of this Division.~~

16 ~~(f)~~ (d) The LEMSA shall notify the Authority concurrently with the training program of
17 approval, renewal of approval, or disapproval of the training program, and include the
18 effective date. This notification is in addition to the name and address of training
19 program, name of the program director, phone number of the contact person, frequency
20 and cost for both basic and refresher courses, student eligibility, and program approval/
21 expiration date of program approval.

22 NOTE: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
23 Code. Reference: Sections 1797.109, 1797.170, 1797.173 and 1797.208, Health and
24 Safety Code.

25
26 **§ 100070. Teaching Staff.**

27 (a) Each EMT training program shall provide for the functions of administrative direction,
28 medical quality coordination, and actual program instruction. Nothing in this section
29 precludes the same individual from being responsible for more than one of the following
30 functions if so qualified by the provisions of this section:

31
32 ~~(a)~~ (b) Each EMT training program shall have an approved program director who shall
33 be qualified by education and experience with at least forty (40) hours of documented
34 teaching methodology instruction in areas related to in methods, materials, and
35 evaluation of instruction ~~which shall be documented by at least forty (40) hours in~~
36 ~~teaching methodology. The courses include but are not limited to the following~~
37 ~~examples:~~

38
39 ~~(1) State Fire Marshall Instructor 1A and 1B,~~

40
41 ~~(2) National Fire Academy's Instructional Methodology,~~
42

1 ~~(3) Training programs that meet the United States Department of~~
2 ~~Transportation/National Highway Traffic Safety Administration 2002 Guidelines for~~
3 ~~Educating EMS Instructors such as the National Association of EMS Educators Course.~~

4
5 ~~(b)~~ (c) Duties of the program director, in coordination with the program clinical
6 coordinator, shall include but not be limited to:

7
8 (1) Administering the training program.

9
10 (2) Approving course content.

11
12 (3) Approving all written examinations and the final skills examination.

13
14 (4) Coordinating all clinical and field activities related to the course.

15
16 (5) Approving the principal instructor(s) and teaching assistants.

17
18 (6) Signing all course completion records.

19
20 (7) Assuring that all aspects of the EMT training program are in compliance with this
21 Chapter and other related laws.

22
23 ~~(c)~~ (d) Each training program shall have an approved program clinical coordinator who
24 shall be either a Physician, Registered Nurse, Physician Assistant, or a Paramedic
25 currently licensed in California, and who shall have two (2) years of academic or clinical
26 experience in emergency medicine or prehospital care in the last five (5) years. Duties
27 of the program clinical coordinator shall include, but not be limited to:

28
29 (1) Responsibility for the overall quality of medical content of the program;

30
31 (2) Approval of the qualifications of the principal instructor(s) and teaching assistant(s).

32
33 ~~(d)~~ (e) Each training program shall have a principal instructor(s), who may also be the
34 program clinical coordinator or program director, who shall be qualified by education
35 and experience with at least forty (40) hours of documented teaching methodology
36 instruction in areas related to in methods, materials, and evaluation of instruction and
37 shall meet the following qualifications:

38 ~~which shall be documented by at least forty hours in teaching methodology. The~~
39 ~~courses include but are not limited to the following examples:~~

40
41 ~~(1) State Fire Marshal Instructor 1A and 1B,~~

42
43 ~~(2) National Fire Academy's Instructional Methodology,~~

1 ~~(3) Training programs that meet the United States Department of~~
2 ~~Transportation/National Highway Traffic Safety Administration 2002 Guidelines for~~
3 ~~Educating EMS Instructor such as the National Association of EMS Educators Course~~
4 ~~and who shall:~~

5
6 ~~(A)~~ (1) Be a Physician, Registered Nurse, Physician Assistant, or Paramedic currently
7 licensed in California; or,

8
9 ~~(B)~~ (2) Be an Advanced EMT or EMT who is currently certified in California.

10
11 ~~(C)~~ (3) Have at least two (2) years of academic or clinical experience in the practice of
12 emergency medicine or prehospital care in the last five (5) years.

13
14 ~~(D)~~ (4) Be approved by the program director in coordination with the program clinical
15 coordinator as qualified to teach the topics to which s/he is assigned. All principal
16 instructors from approved EMT Training Programs shall meet the minimum
17 qualifications as specified in subsection (d) of this Section.

18
19 ~~(e)~~ (f) Each training program may have teaching assistant(s) who shall be qualified by
20 training and experience to assist with teaching of the course and shall be approved by
21 the program director in coordination with the program clinical coordinator as qualified to
22 assist in teaching the topics to which the assistant is to be assigned. A teaching
23 assistant shall be supervised by a principal instructor, the program director and/or the
24 program clinical coordinator.

25
26 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
27 Code. Reference: Sections 1797.109, 1797.170 and 1797.208, Health and Safety Code.

28
29 **§ 100071. No change.**

30 **§ 100072. Withdrawal of EMT Training Program Approval.**

31 ~~(a) Noncompliance with any criterion required for program approval, use of any~~
32 ~~unqualified teaching personnel, or noncompliance with any other applicable Failure to~~
33 ~~comply with the provisions of this Chapter may result in denial, probation, suspension or~~
34 ~~revocation of program approval by the EMT training program approving authority.~~
35 ~~Notification of noncompliance and action to place on probation, suspend, or revoke shall~~
36 ~~be done as follows:~~

37
38 (b) The requirements for training program noncompliance notification and actions are
39 as follows:

40
41 (1) An EMT training program approving authority shall provide written notification of
42 noncompliance ~~notify the approved EMT training program course director in writing, by~~
43 ~~registered mail, of the provisions of this Chapter with which to the EMT training program~~

1 provider found in violation. The notification shall be in writing and sent by certified mail
2 to the EMT training program course director. ~~is not in compliance.~~

3
4 (2) Within fifteen (15) working days ~~of~~ from receipt of the noncompliance notification ~~of~~
5 ~~noncompliance~~, the approved EMT training program shall submit in writing, by certified
6 ~~registered~~ mail, to the EMT training program approving authority one of the following:

7
8 (A) Evidence of compliance with the provisions of this Chapter, or

9
10 (B) A plan ~~for meeting compliance with~~ to comply with the provisions of this Chapter
11 within sixty (60) calendar days from the day of receipt of the notification of
12 noncompliance.

13
14 (3) Within fifteen (15) working days ~~of~~ from receipt of the ~~response from the approved~~
15 ~~EMT training program's response~~, or within thirty (30) calendar days from the mailing
16 date of the noncompliance notification if no response is received from the approved
17 EMT training program, the EMT training program approving authority shall issue a
18 decision letter by certified mail to notify the Authority and the approved EMT training
19 ~~program, in writing, by registered mail, of the~~ The letter shall identify the EMT training
20 program approving authority's decision to: accept the evidence of compliance, accept
21 ~~the plan for meeting compliance, place on probation, suspend or revoke the EMT~~
22 ~~training program approval.~~

23
24 (A) Accept the evidence of compliance provided, or

25
26 (B) Accept the plan for meeting compliance, and/or

27
28 (C) Place the training program on probation, or

29
30 (D) Suspend or revoke the training program approval.

31
32 (4) The decision letter shall also include, but not be limited to, the following:

33
34 (A) Date of the program training approval authority decision;

35
36 (B) Specific provisions found noncompliant by the training approval authority, if
37 applicable;

38
39 (C) The probation or suspension effective and ending date, if applicable;

40
41 (D) The terms and conditions of the probation or suspension, if applicable;

42
43 (E) The revocation effective date, if applicable.

44
45 (5) If the training program found noncompliant of this Chapter does not comply with

1 subsection (2) of this Section, the paramedic EMT training program approving authority
2 may uphold the noncompliance finding and initiate probation, suspension, or revocation
3 action of the training program approval, as described in subsection (3) of this Section.
4 ~~(4) (6) The EMT training program approving authority shall establish the probation,~~
5 ~~suspension, or revocation effective dates no sooner than sixty (60) days after the date~~
6 ~~of the decision letter, as described in subsection (3) of this Section. If the EMT training~~
7 ~~program approving authority decides to suspend, revoke, or place an EMT training~~
8 ~~program on probation the notification specified in subsection (a)(3) of this section shall~~
9 ~~include the beginning and ending dates of the probation or suspension and the terms~~
10 ~~and conditions for lifting of the probation or suspension or the effective date of the~~
11 ~~revocation, which may not be less than sixty (60) calendar days from the date of the~~
12 ~~EMT training program approving authority's letter of decision to the Authority and the~~
13 ~~EMT training program.~~

14
15 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
16 Code. Reference: Sections 1797.109, 1797.170 and 1797.208, Health and Safety Code;
17 and Section 11505, Government Code.
18

19 **§ 100073. Components of an Approved Program.**

20 (a) An approved EMT training program shall consist of all of the following:

21
22 (1) The EMT course, including clinical experience;

23
24 (2) Periodic and a final written and skills competency examinations to include all skills
25 covered by course content listed in section 100075;

26
27 (3) A challenge examination; and

28
29 (4) A refresher course required for renewal or reinstatement. ~~recertification.~~

30
31 (b) The ~~LEMSA~~ approving authority may approve a training program that offers only
32 refresher course(s).
33

34 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
35 and Safety Code. Reference: Sections 1797.109, 1797.170 and 1797.208, Health and
36 Safety Code.
37

38 **§ 100074. EMT Training Program Required Course Hours.**

39 (a) The EMT course shall consist of not less than one hundred seventy (170) ~~Seventy-~~
40 ~~four (174) (160)~~ hours. These training hours shall be divided into:

41
42 (1) A minimum of one hundred forty-six (146) ~~fifty (150) thirty-six (136)~~ hours of didactic
43 instruction and skills laboratory; and

1
2 (2) A minimum of twenty-four (24) hours of supervised clinical experience. The clinical
3 experience shall include a minimum of ten (10) documented patient contacts wherein a
4 patient assessment and other EMT skills are performed and evaluated.
5

6 ~~(A) High fidelity simulation, when available, may replace up to six (6) hours of~~
7 ~~supervised clinical experience and may replace up to three (3) documented patient~~
8 ~~contacts. as described above may be satisfied through the use of high fidelity simulation~~
9 ~~patient contacts as defined in Section 100057.1.~~

10
11 (3) Existing EMT training programs approved prior to the effective date of this chapter
12 shall have a maximum of twelve (12) months from the date that this provision becomes
13 effective to meet the minimum hourly requirements specified in this Section.
14

15 (b) The minimum hours shall not include the examinations for EMT certification as
16 specified in Sections 100059 and 100059.1 of this Chapter.
17

18 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
19 Code. Reference: Sections 1797.170 and 1797.208, Health and Safety Code.
20

21 **§ 100075. Required Course Content.**

22 (a) The content of an EMT course shall meet the objectives contained in the U.S.
23 Department of Transportation (DOT) National EMS Education Standards (DOT HS 811
24 077A, January 2009), incorporated herein by reference, to result in the EMT being
25 competent in the EMT basic scope of practice specified in Section 100063 of this
26 Chapter. The U.S. DOT National EMS Education Standards (DOT HS 811 077A,
27 January 2009) can be accessed through the U.S. DOT National Highway Traffic Safety
28 Administration at the following website address: <http://ems.gov/pdf/811077a.pdf>
29

30 (b) Training in the use of hemostatic dressings shall ~~consist of not less than one (1)~~
31 ~~hour to~~ result in the EMT being competent in the use of the dressing. Included in the
32 training shall be the following topics and skills:
33

34 (1) Review of basic methods of bleeding control to include but not be limited to direct
35 pressure, pressure bandages, tourniquets, and EMSA approved hemostatic dressings;
36

37 (2) Review treatment of open chest wall injuries;
38

39 (3) Types of hemostatic dressings; and
40

41 (4) Importance of maintaining normal body temperature.
42

1 ~~(5)(c) At the completion of initial training, a student shall complete a competency based~~
2 ~~written and skills examination for controlling bleeding and the use of hemostatic~~
3 ~~dressings.~~

4
5 (c) Training in the administration of naloxone or other opioid antagonist shall result in
6 the EMT being competent in the administration of naloxone and managing a patient of a
7 suspected narcotic overdose and shall include the following topics and skills:

8
9 (1) Common causative agents

10
11 (2) Assessment findings

12
13 (3) Management to include but not be limited to:

14
15 (A) Need for appropriate personal protective equipment and scene safety awareness

16
17 (4) Profile of Naloxone to include, but not be limited to:

18
19 (A) Indications

20
21 (B) Contraindications

22
23 (C) Side/adverse effects

24
25 (D) Routes of administration

26
27 (E) Dosages

28
29 (F) Mechanisms of drug action

30
31 (G) Calculating drug dosages

32
33 (H) Medical asepsis

34
35 (I) Disposal of contaminated items and sharps

36
37 (J) Medication administration

38
39 ~~(5) At the completion of this training, the student shall complete a competency based~~
40 ~~written and skills examination for administration of naloxone which shall include:~~

41
42 ~~(A) Assessment of when to administer naloxone,~~

43
44 ~~(B) Managing a patient before and after administering naloxone,~~

45

1 ~~(C) Using universal precautions and body substance isolation procedures during~~
2 ~~medication administration.~~

3
4 ~~(D) Demonstrating aseptic technique during medication administration.~~

5
6 ~~(E) Demonstrate preparation and administration of parenteral medications by intranasal~~
7 ~~and intramuscular routes.~~

8
9 ~~(F) Proper disposal of contaminated items and sharps.~~

10
11 ~~(d) Training in the administration of epinephrine for suspected anaphylaxis and/or~~
12 ~~severe asthma shall result in the EMT being competent in the use and administration of~~
13 ~~epinephrine by auto injector and managing a patient of a suspected anaphylactic~~
14 ~~reaction and/or experiencing severe asthma symptoms. Included in the training shall be~~
15 ~~the following topics and skills:~~

16
17 ~~(1) Common causative agents~~

18
19 ~~(2) Assessment findings~~

20
21 ~~(3) Management to include but not be limited to:~~

22
23 ~~(A) Need for appropriate personal protective equipment and scene safety awareness~~

24
25 ~~(4) Profile of epinephrine to include, but not be limited to:~~

26
27 ~~(A) Indications~~

28
29 ~~(B) Contraindications~~

30
31 ~~(C) Side/adverse effects~~

32
33 ~~(D) Mechanisms of drug action~~

34
35 ~~(5) Administration by auto injector~~

36
37 ~~(6) Medical asepsis~~

38
39 ~~(7) Disposal of contaminated items and sharps~~

40
41 ~~(8) At the completion of this training, the student shall complete a competency based~~
42 ~~written and skills examination for the use and administration of epinephrine by auto-~~
43 ~~injector which shall include:~~

44
45 ~~(A) Assessment of when to administer epinephrine.~~

1
2 ~~(B) Managing a patient before and after administering epinephrine.~~

3
4 ~~(C) Using universal precautions and body substance isolation procedures during~~
5 ~~medication administration.~~

6
7 ~~(D) Demonstrating aseptic technique during medication administration~~

8
9 ~~(E) Demonstrate preparation and administration of epinephrine by auto-injector~~

10
11 ~~(F) Proper disposal of contaminated items and sharps~~

12
13 (d) Training in the administration of epinephrine for suspected anaphylaxis and/or
14 severe asthma shall result in the EMT being competent in the use and administration of
15 epinephrine by auto-injector and managing a patient of a suspected anaphylactic
16 reaction and/or experiencing severe asthma symptoms. Included in the training shall be
17 the following topics and skills:

18
19 (1) Common causative agents

20
21 (2) Assessment findings

22
23 (3) Management to include but not be limited to:

24
25 (A) Need for appropriate personal protective equipment and scene safety awareness

26
27 (4) Profile of epinephrine to include, but not be limited to:

28
29 (A) Indications

30
31 (B) Contraindications

32
33 (C) Side/adverse effects

34
35 (D) Mechanisms of drug action

36
37 (5) Administration by auto-injector

38
39 (6) Medical asepsis

40
41 (7) Disposal of contaminated items and sharps

42
43 (e) Training in the use of finger stick blood glucose testing shall result in the EMT being
44 competent in the use of a glucometer and managing a patient with a diabetic
45 emergency. Included in the training shall be the following topics and skills:

- 1
- 2 (1) Blood glucose determination
- 3
- 4 (A) Assess blood glucose level
- 5
- 6 (B) Indications
- 7
- 8 1 Decreased level of consciousness in the suspected diabetic
- 9
- 10 2 Decreased level of consciousness of unknown origin
- 11
- 12 (C) Procedure for use of finger stick blood glucometer
- 13
- 14 1 ~~Cleaning the site~~ Medical asepsis
- 15
- 16 2 Refer to manufacturer's instructions for device being used
- 17
- 18 (D) Disposal of sharps
- 19
- 20 (E) Limitations
- 21
- 22 1 Lack of calibration
- 23
- 24 (F) Interpretation of results
- 25
- 26 (G) Patient assessment
- 27
- 28 (H) Managing a patient before and after finger stick glucose testing
- 29
- 30 ~~(2) At the completion of this training, the student shall complete a competency based~~
- 31 ~~written and skills examination for finger stick blood glucose testing which shall include:~~
- 32
- 33 ~~(A) Assessment of when to test blood glucose using a finger stick glucometer,~~
- 34
- 35 ~~(B) Managing a patient before and after blood glucose testing,~~
- 36
- 37 ~~(C) Using universal precautions and body substance isolation procedures during blood~~
- 38 ~~glucose testing,~~
- 39
- 40 ~~(D) Demonstrating aseptic technique,~~
- 41
- 42 ~~(E) Proper disposal of contaminated items and sharps.~~
- 43
- 44 (f) (e) In addition to the above, the content of the training course shall include a
- 45 minimum of four (4) ~~eight (8)~~ hours of tactical casualty care (TCC) principles applied to

1 violent circumstances with at least the following topics and skills and shall be
2 competency based:

3
4 (1) History and Background of Tactical Casualty Care

5
6 (A) Demonstrate knowledge of tactical casualty care ~~History of Tactical Combat~~
7 ~~Casualty Care (TCCC)~~

8
9 1. History of active shooter and domestic terrorism incidents

10
11 ~~(B) History of Tactical Emergency Casualty Care (TECC)~~

12
13 ~~(C) 2. Define roles~~ ~~Roles~~ and responsibilities of first responders including Law
14 Enforcement, Fire and EMS.

15
16 ~~(D) Integration with EMS and~~ 3. Review of local ~~Local~~ active shooter policies

17
18 ~~(E) California Law and Regulations regarding Tactical EMS and Tactical Medicine~~

19
20 ~~(F) 4. Scope of practice and authorized skills and procedures by level of training,~~
21 certification, and licensure zone

22
23 (2) Terminology and definitions

24
25 (A) Demonstrate knowledge of terminology

26
27 1. Hot zone/warm zone/cold zone

28
29 2. Casualty collection point

30
31 3. Rescue task force

32
33 4. Cover/concealment

34
35 (3) Coordination Command and Control

36
37 (A) Demonstrate knowledge of Incident Command and how agencies are integrated into
38 tactical operations.

39
40 1. Demonstrate knowledge of team command, control and communication

41
42 ~~(A) a. Incident Command System (ICS) /National Incident Management System (NIMS)~~

43
44 ~~(B) b. Mutual Aid considerations~~

45

- 1 ~~(C)~~ c. Unified Command
2
3 ~~(D)~~ d. Communications, including radio interoperability
4
5 ~~(E)~~ e. Command post
6
7 i. Staging areas
8
9 ii. Ingress/egress
10
11 iii. Managing priorities
12
13 (4) Tactical and Rescue Operations
14
15 (A) Demonstrate knowledge of tactical and rescue operations
16
17 1. Tactical Operations – Law Enforcement
18
19 a. The priority is to mitigate the threat
20
21 b. Contact Team
22
23 c. Rescue Team
24
25 ~~(5)~~ 2. Rescue Operations – Law Enforcement/EMS/Fire
26
27 a. The priority is to provide life-saving interventions to injured parties
28
29 ~~(A) Integrated police/fire/EMS movement and coordination~~
30
31 ~~(B)~~ b. Formation of Rescue Task Force (RTF)
32
33 ~~(C) Force protection~~
34
35 ~~(D)~~ c. Casualty collection points
36
37 ~~(F) Other local methods for tactical operation and EMS integration (i.e. rescue corridor, shrink Hot Zone)~~
38
39
40 (5) Basic Tactical Casualty Care and Evacuation
41
42 (A) Demonstrate appropriate casualty care at your scope of practice and certification
43
44 1. Demonstrate knowledge of the components of the Individual First Aid Kit (IFAK)
45 and/or medical kit.

- 1
- 2 a. Understand the priorities of Tactical Casualty Care as applied by zone.
- 3
- 4 ~~(C) B. Demonstrate competency through practical testing of the following medical~~
- 5 ~~treatment skills:~~
- 6
- 7 ~~(A) 1. Bleeding control~~
- 8
- 9 ~~1. a. Apply Tourniquet~~
- 10
- 11 ~~a. i. Self-Application~~
- 12
- 13 ~~b. ii. Application on others~~
- 14
- 15 ~~2. b. Apply Direct Pressure~~
- 16
- 17 ~~3. Apply Pressure with Emergency Bandage~~
- 18
- 19 ~~4. c. Apply Pressure Dressing~~
- 20
- 21 ~~5. d. Apply Hemostatic Dressing with Wound Packing, utilizing California EMSA-~~
- 22 ~~approved products~~
- 23
- 24 ~~(B) 2. Airway and Respiratory management~~
- 25
- 26 ~~1. a. Perform Chin Lift/Jaw Thrust Maneuver~~
- 27
- 28 ~~2. b. Recovery position Place casualty in the Recovery Position~~
- 29
- 30 ~~3. c. Position of comfort Place casualty in the Sitting Up/Lean Forward Airway Position~~
- 31
- 32 ~~4. Insert Nasopharyngeal Airway, d. Airway adjuncts, if approved by the Local EMS~~
- 33 ~~agency~~
- 34
- 35 ~~5. 3. Chest/torso wounds~~
- 36
- 37 ~~a. Apply Vented and Non-Vented Chest Seals, vented preferred~~
- 38
- 39 ~~(C) Recognition and Treatment of Shock~~
- 40
- 41 ~~(D) Prevention of Hypothermia~~
- 42
- 43 ~~(E) Penetrating Eye Injuries~~
- 44
- 45 ~~1. Cover Eye with Rigid Shield~~

- 1
- 2 ~~(F) C. Demonstrate competency in patient movement and evacuation. Evacuation and~~
- 3 ~~Patient Movement~~
- 4
- 5 1. Drags and lifts.
- 6
- 7 ~~a. Demonstrate Modified Fireman's Hawes Carry (1 person)~~
- 8
- 9 ~~b. Demonstrate Shoulder Bolt drag Seal Team 3 Carry (2 Person)~~
- 10
- 11 ~~c. Demonstrate Rapid Shoulder to Shoulder drag (2 person)~~
- 12
- 13 2. Lifts and Carries
- 14
- 15 ~~a. Demonstrate Fore Aft Carry (2 Person)~~
- 16
- 17 ~~b. Demonstrate Side by Side Carry (2 person)~~
- 18
- 19 ~~c. Demonstrate Side by Side Carry (3 person)~~
- 20
- 21 3. Patient Movement
- 22
- 23 ~~a. Use Soft Litter~~
- 24
- 25 ~~b. Use local movement devices~~
- 26
- 27 D. Demonstrate knowledge of local multi-casualty/mass casualty incident protocols.
- 28
- 29 ~~(G) 1. Triage procedures (START or SALT).~~
- 30
- 31 2. CCP – Triage, Treatment and Transport.
- 32
- 33 ~~(7) Medical Planning and (6.) Threat Assessment.~~
- 34
- 35 (A) Demonstrate knowledge in threat assessment.
- 36
- 37 1. Understand and demonstrate knowledge of situational awareness
- 38
- 39 a. Pre-assessment of community risks and threats.
- 40
- 41 b. Pre-incident planning and coordination
- 42
- 43 c. Medical resources available.
- 44
- 45 ~~(7) Practical Skills Assessment~~

1
2 ~~(8) (A) At the completion of this training, the student shall demonstrate knowledge and~~
3 ~~skills through documented cognitive and/or skills evaluation, complete a competency~~
4 ~~based practical skills/scenario examination that shall include:~~

5
6 ~~1. Demonstrate the following skills:~~

7
8 ~~(A) a. Medical skills~~

9
10 ~~1. i. Bleeding control including tourniquet, wound packing and pressure dressing.~~

11
12 ~~2. ii. Basic Airway management including maneuvers, recovery position, and adjuncts.~~

13
14 ~~iii. chest injuries including chest seals (vented preferred).~~

15
16 ~~3. Respiratory Care, including open chest wounds~~

17
18 ~~(B) b. Patient movement and extrication and evacuation~~

19
20 ~~(C) Self and Buddy Care scenarios in hot and warm zones~~

21
22 ~~(D) c. Coordinated law enforcement/fire/EMS response with formation of Rescue Task~~
23 ~~Force, following ICS and unified command principles~~

24
25 ~~(f) Training programs in operation prior to the effective date of these regulations shall~~
26 ~~submit evidence of compliance with this Chapter to the appropriate approving authority~~
27 ~~as specified in Section 100057 of this Chapter within twelve (12) months after the~~
28 ~~effective date of these regulations.~~

29
30 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
31 Code. Reference: Sections 1797.170 and 1797.173, Health and Safety Code.

32
33 **§ 100076. No change.**

34 **§ 100077. No change.**

35 **§ 100078. No change.**

36
37 **ARTICLE 4. EMT CERTIFICATION**

38
39 **§ 100079. EMT Initial Certification Requirements.**

40 (a) An individual who meets one of the following criteria shall be eligible for initial
41 certification upon fulfilling the requirements of subdivision (b) of this Section:

1
2 (1) Pass the ~~written cognitive examination and skills- psychomotor examination~~
3 specified in Sections 100059 and 100059.1 of this Chapter ~~within the last two (2) years~~
4 ~~from the date of application of applying for EMT certification~~ and have either: (A) A a
5 valid EMT course completion record or other documented proof of successful
6 completion of any initial EMT course approved pursuant to Section 100066 of this
7 Chapter ~~dated~~ issued within ~~the last two (2) years~~ of the date of application, or

8
9 (2B) Pass the ~~written cognitive examination and skills- psychomotor examination~~
10 specified in Sections 100059 and 100059.1 of this Chapter ~~within the last two (2) years~~
11 ~~from the date of application of applying for EMT certification~~ and have ~~D~~documentation
12 of successful completion of an approved out-of-state initial EMT training course, within
13 the last two (2) years, that meets the requirements of this Chapter, or

14
15 (3C) Pass the ~~written cognitive examination and skills- psychomotor examination~~
16 specified in Sections 100059 and 100059.1 of this Chapter ~~within the last two (2) years~~
17 ~~from the date of application of applying for EMT certification~~ and have Aa current and
18 valid out-of-state EMT certificate, or

19
20 (42) Possess a current and valid National Registry EMT-~~Basic~~, Advanced EMT or
21 Paramedic registration certificate, or

22
23 (53) Possess a current and valid out-of-state ~~or National Registry~~ Advanced EMT-
24 Intermediate or Paramedic certificate, or

25
26 (64) Possess a current and valid California ~~Advanced EMT or EMT-II certification~~
27 certificate or a current and valid California Paramedic license.

28
29 (b) In addition to meeting one of the criteria listed in subdivision (a), to be eligible for
30 initial certification, an individual shall:

31
32 (1) Be eighteen (18) years of age or older;

33
34 (2) Complete the criminal history background check requirement as specified in Article
35 4, Chapter 10 of this Division. The certifying entity shall receive the State and Federal
36 criminal background check results before issuing an initial certification.

37
38 (3) Complete an application form that contains this statement: "I hereby certify **under**
39 **penalty of perjury** that all information on this application is true and correct to the best
40 of my knowledge and belief, and I understand that any falsification or omission of
41 material facts may cause forfeiture on my part of all rights to EMT certification in the
42 state of California. I understand all information on this application is subject to
43 verification, and I hereby give my express permission for this certifying entity to contact
44 any person or agency for information related to my role and function as an EMT in
45 California.";

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(4) Disclose any prior and/or current certification, ~~or~~ licensure, or accreditation actions:
~~action:~~

(A) Against an EMT or Advanced EMT, ~~or~~ EMT-II certificate, or any denial of certification by a LEMSA, including any active investigations;

(B) Against a Paramedic license, or any denial of licensure by the Authority, including any active investigations;

(C) Against any EMS-related certification or license of another state or other issuing entity, including denials and any active investigations; or

(D) Against any health-related license.

(5) Disclose any pending or current criminal investigations.

(6) Disclose any pending criminal charges.

(7) Disclose any prior convictions.

(8) Disclose each and every certifying entity or LEMSA to which the applicant has applied for certification in the previous 12 months.

~~(5)~~ ~~(8)~~ (9) Pay the established fee.

~~(6) Provide documentation of successful completion by an approved EMT training program in the use and administration of naloxone or other opioid antagonist that meets the standards and requirements of section 100075 subsection (c) and within twenty-four (24) months after the effective date of these regulations.~~

~~(7) Provide documentation of successful completion by an approved EMT training program in the use and administration of epinephrine by auto injector that meets the standards and requirements of section 100075 subsection (a) (d) within twenty four (24) months after the effective date of these regulations.~~

~~(8) Provide documentation of successful completion by an approved EMT training program in the use of a glucometer that meets the standards and requirements of section 100075 subsection (d) (e) within twenty four (24) months after the effective date of these regulations.~~

~~(9) Provide documentation of successful completion by an approved EMT training program in tactical casualty care principles that meets the standards and requirements of section 100075 subsection (c) (f) within twenty four (24) months after the effective date of these regulations.~~

1
2 (c) The EMT certifying entity shall issue a wallet-sized certificate card, pursuant to
3 Section 100344, subdivisions (c) and (d), of Chapter 10 of this Division, within forty-five
4 (45) days to eligible individuals who apply for an EMT certificate and successfully
5 complete the requirements of this Chapter.

6
7 (d) The effective date of initial certification shall be the day the certificate is issued.

8
9 (e) The expiration date for an initial EMT certificate shall be as follows:

10 (1) For an individual who meets the criteria for certification required by this section shall
11 be issued a certificate and listed in subdivisions (a)(1)(A) or (a)(2)(1)(B) of this Section,
12 the expiration date shall be the last day of the month two (2) years from the effective
13 date of the initial certification.

14
15 ~~(2) For an individual who meets the criteria listed in subdivisions (a)(1)(C), (a)(2), (a)(3),~~
16 ~~or (a)(4), (a)(5) or (a)(6) of this Section, the expiration date shall be the lesser of the~~
17 ~~following: earliest date of the following to occur:~~

18
19 ~~(A) The last day of the month two (2) years from the effective date of the initial EMT~~
20 ~~certification; or~~

21
22 ~~(B) The last day of the month in which expiration date of the certificate or license used~~
23 ~~to establish eligibility under subdivision (a)(3), (a)(4), (a)(5) or (a)(6) of this Section~~
24 ~~expires.~~

25
26 (f) The EMT shall be responsible for notifying the certifying entity of her/his proper and
27 current mailing address and shall notify the certifying entity in writing within thirty (30)
28 calendar days of any and all changes of the mailing address, giving both the old and the
29 new address, and EMT registry number.

30
31 (g) An EMT shall only be certified by one (1) certifying entity during a certification
32 period.

33
34 ~~(h) California certified EMTs shall be recognized as an EMT on a statewide basis.~~

35
36 ~~(i) If an EMT or Advanced EMT certification card is lost, destroyed, damaged, or there~~
37 ~~has been a change in the name of the EMT, a duplicate certification card may be~~
38 ~~requested. The request shall be in writing to the certifying entity that issued the EMT~~
39 ~~certificate and include a statement identifying the reason for the request and, if due to a~~
40 ~~name change, a copy of legal documentation of the change in name. The duplicate card~~
41 ~~shall bear the original certification number and date of expiration as the replaced card.~~

42
43 ~~(j) An individual currently certified as an EMT by the provisions of this section may~~
44 ~~voluntarily deactivate their EMT certificate as long as the individual is not under~~

1 ~~investigation or disciplinary action by a LEMSA medical director for violations of Health~~
2 ~~and Safety Code Section 1798.200. An individual who has voluntarily deactivated, their~~
3 ~~EMT certificate shall comply with the following:~~

4
5 ~~(1) Discontinue all medical practice requiring an active and valid EMT certificate.~~

6
7 ~~(2) Return the EMT certificate to the certifying entity.~~

8
9 ~~(3) Notify the LEMSA to whom they are accredited as an EMT that their certification is~~
10 ~~no longer valid.~~

11
12 ~~(4) The reactivation of the EMT certificate shall be done in accordance with the~~
13 ~~provisions of Section 100080 of this Chapter.~~

14
15 ~~(5) This information shall be entered into the Central Registry by the certifying entity~~
16 ~~who issued the EMT card.~~

17
18 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
19 and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.63, 1797.109, 1797.118,
20 1797.175, 1797.177, 1797.185, 1797.210 and 1797.216, Health and Safety Code.

21 ARTICLE 5. MAINTAINING EMT CERTIFICATION AND RECERTIFICATION

22
23 **§ 100080. EMT Recertification. Certification Renewal**

24 (a) In order to renew certification ~~recertify~~, an EMT shall:

25
26 (1) Possess a current EMT Certification issued in California.

27
28 (2) Obtain at least twenty four (24) hours of continuing education hours (CEH) from an
29 approved CE provider in accordance with the provisions contained in Chapter 11 of this
30 Division, or successfully complete a twenty four (24) hour refresher course from an
31 approved EMT training program. An individual who is currently licensed in California as
32 a Paramedic or certified as an Advanced EMT or EMT-II, or who has been certified
33 within six (6) months of the date of application, may be given credit for CEH earned as a
34 Paramedic, Advanced EMT or EMT-II to satisfy the CE requirement for EMT
35 recertification as specified in this Chapter.

36
37 (2) Meet one of the following continuing education requirements:

38
39 ~~(2)~~ (A) Successfully complete a twenty-four (24) hour refresher course from an
40 approved EMT training program within the 24 months prior to applying for renewal, or
41

1 ~~(3) Meet continuing education requirements from an approved CE provider in~~
2 ~~accordance with the provisions contained in Chapter 11 of this Division through~~
3 ~~completion of one of the following:~~

4
5 ~~(A) (B) Obtain at least twenty-four (24) hours of continuing education (CE) within the 24~~
6 ~~months prior to applying for renewal, from an approved CE provider in accordance with~~
7 ~~the provisions contained in Chapter 11 of this Division. Beginning twenty four (24)~~
8 ~~months after the effective date of these regulations, six (6) hours of the required~~
9 ~~continuing education shall be taken in person and shall be skills based and instructor~~
10 ~~led, or~~

11
12 1. CE's may be used to renew multiple licensure/certification types as long as they are
13 earned within the licensure/certification cycle being renewed and were not used in a
14 previous cycle.

15
16 2. Skills maintenance and competency shall be met through the EMS service providers
17 Quality Improvement Program (QIP) pursuant to Chapter 12 of this Division.

18
19 ~~(B) An individual who is currently licensed in California as a Paramedic or certified as an~~
20 ~~Advanced EMT or who has been certified within six (6) months of the date of~~
21 ~~application, may be given credit for CEH earned as a Paramedic or Advanced EMT to~~
22 ~~satisfy the CE requirement for EMT renewal as specified in this Chapter. Beginning~~
23 ~~twenty four (24) months after the effective date of these regulations, six (6) hours of the~~
24 ~~required continuing education shall be taken in person and shall be skills based and~~
25 ~~instructor led.~~

26
27 ~~(3) (4) Complete an application form and other processes as specified in Section~~
28 ~~100079, subdivisions (b)(3)-(b)(9), (5), of this Chapter.~~

29
30 ~~(4) (5) Complete the criminal history background check requirements as specified in~~
31 ~~Article 4, Chapter 10 of this Division when changing certifying entities. The certifying~~
32 ~~entity shall receive the State and Federal criminal background check results before~~
33 ~~issuing a certification.~~

34
35 (5) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form
36 EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be
37 verified by direct observation of an actual or simulated patient contact. Skills
38 competency shall be verified by an individual who is currently certified or licensed as an
39 EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and
40 who shall be designated by an EMS approved training program (EMT training program,
41 AEMT training program, Paramedic training program or CE provider), or an EMS
42 service provider. EMS service providers include, but are not limited to, public safety
43 agencies, private ambulance providers and other EMS providers. Verification of skills
44 competency shall be valid for a maximum of two (2) years for the purpose of applying
45 for recertification.

1
2 ~~(6) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form~~
3 ~~EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be~~
4 ~~verified by direct observation of an actual or simulated patient contact. Skills~~
5 ~~competency shall be verified by an individual who is currently certified or licensed as an~~
6 ~~EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and~~
7 ~~who shall be designated by an EMS-approved training program (EMT training program,~~
8 ~~AEMT training program, Paramedic training program or CE provider), or an EMS~~
9 ~~service provider. EMS service providers include, but are not limited to, public safety~~
10 ~~agencies, private ambulance providers and other EMS providers. Verification of skills~~
11 ~~competency shall be valid for a maximum of two (2) years for the purpose of applying~~
12 ~~for recertification. This subsection will remain in effect for 24 months after this chapter~~
13 ~~takes effect and as of that date is repealed.~~

14
15 (6) Starting 24 months after the effective date of these regulations, any EMT renewing
16 for the first time, following implementation, shall submit documentation of successful
17 completion by an approved EMT training program or approved CE provider in the
18 following training:

19
20 ~~(7) Provide documentation of successful completion by an approved EMT training~~
21 ~~program in (A) the use and administration of naloxone or other opioid antagonist that~~
22 ~~meets the standards and requirements of section 100075 subsection (c) and within~~
23 ~~twenty four (24) months after the effective date of these regulations.~~

24
25 ~~(8) Provide documentation of successful completion by an approved EMT training~~
26 ~~program in (B) the use and administration of epinephrine by auto-injector that meets the~~
27 ~~standards and requirements of section 100075 subsection (d) within twenty four (24)~~
28 ~~months after the effective date of these regulations.~~

29
30 ~~(9) Provide documentation of successful completion by an approved EMT training~~
31 ~~program in (C) the use of a glucometer that meets the standards and requirements of~~
32 ~~section 100075 subsection (e) within twenty four (24) months after the effective date of~~
33 ~~these regulations.~~

34
35 (D) If individual possesses a current California issued paramedic license or California
36 Advanced EMT certificate then the individual need not provide proof of (a)(56)(A)(B)(C)
37 of this Section.

38
39 ~~(10) Provide documentation of successful completion by an approved EMT training~~
40 ~~program in tactical casualty care principles that meets the standards and requirements~~
41 ~~of section 100075 subsection (f) within twenty four (24) months after the effective date~~
42 ~~of these regulations~~

43
44 (b) The EMT certifying entity shall issue a wallet-sized certificate card, pursuant to
45 Section 100344, subdivisions (c) and (d), of Chapter 10 of this Division, within forty-five

1 (45) days to eligible individuals who apply for EMT renewal ~~recertification~~ and
2 successfully complete the requirements of this Chapter.

3
4 (c) If the EMT renewal ~~recertification~~ requirements are met within six (6) months prior to
5 the current certification expiration date, the EMT Certifying entity shall make the
6 effective date of renewal ~~recertification~~ the date immediately following the expiration
7 date of the current certificate. The certification will expire the last day of the month two
8 (2) years from the day prior to the effective date.

9
10 (d) If the EMT renewal ~~recertification~~ requirements are met greater than six (6) months
11 prior to the expiration date, the EMT Certifying entity shall make the effective date of
12 renewal ~~recertification~~ the day the certificate is issued. ~~date the individual satisfactorily~~
13 ~~completes all certification requirements and has applied for recertification.~~ The
14 certification expiration date will be the last day of the month two (2) years from the
15 effective date.

16
17 (e) A California certified EMT who is a member of the Armed Forces of the United
18 States and whose certification expires while deployed on active duty, or whose
19 certification expires less than six (6) months from the date they return from active duty
20 deployment, with the Armed Forces of the United States shall have six (6) months from
21 the date they return from active duty deployment to complete the requirements of
22 Section 100080, subdivisions (a)(2)-(a)(5). In order to qualify for this exception, the
23 individual shall: ~~submit proof of their membership in the Armed Forces of the United~~
24 ~~States and documentation of their deployment starting and ending dates. Continuing~~
25 ~~education credit may be given for documented training that meets the requirements of~~
26 ~~Chapter 11 of this Division while the individual was deployed on active duty. The~~
27 ~~documentation shall include verification from the individual's Commanding Officer~~
28 ~~attesting to the training attended.~~

29
30 (1) Submit proof of their membership in the Armed Forces of the United States and
31

32 (2) Submit documentation of their deployment starting and ending dates.
33

34 (3) Continuing education credit may be given for documented training that meets the
35 requirements of Chapter 11 of this Division while the individual was deployed on active
36 duty.
37

38 (4) The continuing education documentation shall include verification from the
39 individual's Commanding Officer attesting to the training attended.
40

41 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
42 and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.109, 1797.118,
43 1797.170, 1797.184, 1797.210 and 1797.216, Health and Safety Code; and United
44 States Code, Title 10, Subtitle A, Chapter 1, Section 101.
45

1 **§ 100081. ~~Recertification~~ Reinstatement of an Expired California EMT Certificate.**

2 (a) The following requirements apply to individuals who wish to be eligible for
3 reinstatement ~~recertification~~ after their California EMT certificates have expired:

4
5 (1) For a lapse of less than six (6) months, the individual shall meet one of the following
6 continuing education requirements: complete the requirements of Section 100080,
7 subdivisions (a)(2)-(a)(5).

8
9 (A) Successfully complete a twenty-four (24) hour refresher course from an approved
10 EMT training program within the 24 months prior to applying for reinstatement, or

11
12 ~~(B) Meet continuing education requirements from an approved CE provider in~~
13 ~~accordance with the provisions contained in Chapter 11 of this Division through~~
14 ~~completion of one of the following:~~

15
16 ~~4. (B) Obtain at least twenty-four (24) hours of continuing education (CE), within the 24~~
17 ~~months prior to applying for reinstatement, from an approved CE provider in accordance~~
18 ~~with the provisions contained in Chapter 11 of this Division. Beginning twenty four (24)~~
19 ~~months after the effective date of these regulations, six (6) hours of the required~~
20 ~~continuing education shall be taken in person and shall be skills based, and instructor~~
21 ~~led, or~~

22
23 1. CEs may be used to renew multiple licensure/certification types.

24
25 ~~2. Skills maintenance and competency shall be met through the EMS service providers~~
26 ~~Quality Improvement Program (QIP) pursuant to Chapter 12 of this Division.~~

27
28
29 ~~2. An individual who is currently licensed in California as a Paramedic or certified as an~~
30 ~~Advanced EMT or who has been certified within six (6) months of the date of~~
31 ~~application, may be given credit for CEH earned as a Paramedic or Advanced EMT to~~
32 ~~satisfy the CE requirement for EMT recertification as specified in this Chapter.~~
33 ~~Beginning twenty four (24) months after the effective date of these regulations, six (6)~~
34 ~~hours of the required continuing education shall be in person and shall be skills based~~
35 ~~and instructor led.~~

36
37 (C) Complete an application form and other processes as specified in Section 100079,
38 subdivisions (b)(3)-(b)(9), of this Chapter.

39
40 (D) Complete the criminal history background check requirements as specified in Article
41 4, Chapter 10 of this Division when the background check results are not on file with the
42 certifying entity that is processing the reinstatement. The certifying entity shall receive
43 the State and Federal criminal background check results before issuing a certification.

1 (E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form
2 EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be
3 verified by direct observation of an actual or simulated patient contact. Skills
4 competency shall be verified by an individual who is currently certified or licensed as an
5 EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and
6 who shall be designated by an EMS approved training program (EMT training program,
7 AEMT training program, Paramedic training program or CE provider), or an EMS
8 service provider. EMS service providers include, but are not limited to, public safety
9 agencies, private ambulance providers and other EMS providers. Verification of skills
10 competency shall be valid for a maximum of two (2) years for the purpose of applying
11 for recertification.

12
13 ~~(E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form~~
14 ~~EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be~~
15 ~~verified by direct observation of an actual or simulated patient contact. Skills~~
16 ~~competency shall be verified by an individual who is currently certified or licensed as an~~
17 ~~EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and~~
18 ~~who shall be designated by an EMS approved training program (EMT training program,~~
19 ~~AEMT training program, Paramedic training program or CE provider), or an EMS~~
20 ~~service provider. EMS service providers include, but are not limited to, public safety~~
21 ~~agencies, private ambulance providers and other EMS providers. Verification of skills~~
22 ~~competency shall be valid for a maximum of two (2) years for the purpose of applying~~
23 ~~for recertification. This subsection will remain in effect for 24 months after this chapter~~
24 ~~takes effect and as of that date is repealed.~~

25
26 (F) Starting 24 months after the effective date of these regulations, any EMT renewing
27 for the first time, following implementation, shall submit documentation of successful
28 completion by an approved EMT training program or approved CE provider in the
29 following training:

30
31 ~~(E) Provide documentation of successful completion by an approved EMT training~~
32 ~~program in 1. the use and administration of naloxone or other opioid antagonist that~~
33 ~~meets the standards and requirements of section 100075 subsection (c) and within~~
34 ~~twenty four (24) months after the effective date of these regulations.~~

35
36 ~~(F) Provide documentation of successful completion by an approved EMT training~~
37 ~~program in 2. the use and administration of epinephrine by auto-injector that meets the~~
38 ~~standards and requirements of section 100075 subsection (d) within twenty four (24)~~
39 ~~months after the effective date of these regulations.~~

40
41 ~~(G) Provide documentation of successful completion by an approved EMT training~~
42 ~~program in 3. the use of a glucometer that meets the standards and requirements of~~
43 ~~section 100075 subsection (e) within twenty four (24) months after the effective date of~~
44 ~~these regulations.~~

45

1 (G) If an individual possesses a current California issued paramedic license or
2 California Advanced EMT certificate then the individual need not provide proof of
3 (a)(1)(~~E~~ F)(1.)(2.)(3.) of this Section.
4

5 ~~(I) Provide documentation of successful completion by an approved EMT training~~
6 ~~program in tactical casualty care principles that meets the standards and requirements~~
7 ~~of section 100075 subsection (f) within twenty four (24) months after the effective date~~
8 ~~of these regulations~~
9

10 (2) For a lapse of six (6) months or more, but less than twelve (12) months, the
11 individual shall meet one of the following continuing education requirements:
12

13 (A) Complete the requirements of Section 100080, subdivisions (a)(2) (a)(5), and
14 Successfully complete a twenty-four (24) hour refresher course from an approved EMT
15 training program, and twelve (12) hours of continuing education, within the 24 months
16 prior to applying for reinstatement, or
17

18 ~~(B) Meet continuing education requirements from an approved CE provider in~~
19 ~~accordance with the provisions contained in Chapter 11 of this Division through~~
20 ~~completion of one of the following:~~
21

22 ~~1. (B) Obtain at least twenty four (24) thirty-six (36) hours of continuing education (CE),~~
23 ~~within the 24 months prior to applying for reinstatement, from an approved CE provider~~
24 ~~in accordance with the provisions contained in Chapter 11 of this Division. Beginning~~
25 ~~twenty four (24) months after the effective date of these regulations, six (6) hours of the~~
26 ~~required continuing education shall be taken in person and shall be skills based, and~~
27 ~~instructor led, or~~
28

29 1. CEs may be used to renew multiple licensure/certification types.
30

31 ~~2. Skills maintenance and competency shall be met through the EMS service providers~~
32 ~~Quality Improvement Program (QIP) pursuant to Chapter 12 of this Division.~~
33

34 ~~2. An individual who is currently licensed in California as a Paramedic or certified as an~~
35 ~~Advanced EMT or who has been certified within six (6) months of the date of~~
36 ~~application, may be given credit for CE hours earned as a Paramedic or Advanced EMT~~
37 ~~to satisfy the CE requirement for EMT recertification as specified in this Chapter.~~
38 ~~Beginning twenty four (24) months after the effective date of these regulations, six (6)~~
39 ~~hours of the required continuing education shall be taken in person and shall be skills~~
40 ~~based and instructor led.~~
41

42 ~~(B) (C) Complete an additional twelve (12) hours of continuing education.~~
43

44 (C) Complete an application form and other processes as specified in Section 100079,
45 subdivisions (b)(3)-(b)(9), of this Chapter.

1
2 (D) Complete the criminal history background check requirements as specified in Article
3 4, Chapter 10 of this Division when the background check results are not on file with the
4 certifying entity that is processing the reinstatement. The certifying entity shall receive
5 the State and Federal criminal background check results before issuing a certification.
6

7 (E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form
8 EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be
9 verified by direct observation of an actual or simulated patient contact. Skills
10 competency shall be verified by an individual who is currently certified or licensed as an
11 EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and
12 who shall be designated by an EMS approved training program (EMT training program,
13 AEMT training program, Paramedic training program or CE provider), or an EMS
14 service provider. EMS service providers include, but are not limited to, public safety
15 agencies, private ambulance providers and other EMS providers. Verification of skills
16 competency shall be valid for a maximum of two (2) years for the purpose of applying
17 for recertification.
18

19 ~~(E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form~~
20 ~~EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be~~
21 ~~verified by direct observation of an actual or simulated patient contact. Skills~~
22 ~~competency shall be verified by an individual who is currently certified or licensed as an~~
23 ~~EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and~~
24 ~~who shall be designated by an EMS approved training program (EMT training program,~~
25 ~~AEMT training program, Paramedic training program or CE provider), or an EMS~~
26 ~~service provider. EMS service providers include, but are not limited to, public safety~~
27 ~~agencies, private ambulance providers and other EMS providers. Verification of skills~~
28 ~~competency shall be valid for a maximum of two (2) years for the purpose of applying~~
29 ~~for recertification. This subsection will remain in effect for 24 months after this chapter~~
30 ~~takes effect and as of that date is repealed.~~
31

32 (F) Starting 24 months after the effective date of these regulations, any EMT renewing
33 for the first time, following implementation, shall submit documentation of successful
34 completion by an approved EMT training program or approved CE provider in the
35 following training:
36

37 ~~(E) Provide documentation of successful completion by an approved EMT training~~
38 ~~program in 1. the use and administration of naloxone or other opioid antagonist that~~
39 ~~meets the standards and requirements of section 100075 subsection (c) and within~~
40 ~~twenty four (24) months after the effective date of these regulations.~~
41

42 ~~(E) Provide documentation of successful completion by an approved EMT training~~
43 ~~program in 2. the use and administration of epinephrine by auto-injector that meets the~~
44 ~~standards and requirements of section 100075 subsection (d) within twenty four (24)~~
45 ~~months after the effective date of these regulations.~~

1
2 ~~(G) Provide documentation of successful completion by an approved EMT training~~
3 ~~program in 3. the use of a glucometer that meets the standards and requirements of~~
4 ~~section 100075 subsection (e) within twenty four (24) months after the effective date of~~
5 ~~these regulations.~~

6
7 (G) If an individual possesses a current California issued paramedic license or
8 California Advanced EMT certificate then the individual need not provide proof of
9 (a)(2)(~~E~~F)(1.)(2.)(3.) of this Section.

10
11 ~~(I) Provide documentation of successful completion by an approved EMT training~~
12 ~~program in tactical casualty care principles that meets the standards and requirements~~
13 ~~of section 100075 subsection (f) within twenty four (24) months after the effective date~~
14 ~~of these regulations~~

15
16 (3) For a lapse of twelve (12) months or more, but less than twenty-four (24) months,
17 the individual shall meet one of the following continuing education requirements:

18
19 (A) Complete the requirements of Section 100080, subdivisions (a)(2)-(a)(5), and
20 Successfully complete a twenty-four (24) hour refresher course from an approved EMT
21 training program, and twenty-four (24) hours of continuing education, within the 24
22 months prior to applying for reinstatement or

23
24 ~~(B) Meet continuing education requirements from an approved CE provider in~~
25 ~~accordance with the provisions contained in Chapter 11 of this Division through~~
26 ~~completion of one of the following:~~

27
28 ~~1. (B) Obtain at least twenty four (24) forty-eight (48) hours of continuing education~~
29 ~~(CE), within the 24 months prior to applying for reinstatement, from an approved CE~~
30 ~~provider in accordance with the provisions contained in Chapter 11 of this Division.~~
31 ~~Beginning twenty four (24) months after the effective date of these regulations, six (6)~~
32 ~~hours of the required continuing education shall be taken in person and shall be skills~~
33 ~~based and instructor led, or~~

34
35 1. CEs may be used to renew multiple licensure/certification types.

36
37 ~~2. Skills maintenance and competency shall be met through the EMS service providers~~
38 ~~Quality Improvement Program (QIP) pursuant to Chapter 12 of this Division.~~

39
40 ~~2. An individual who is currently licensed in California as a Paramedic or certified as an~~
41 ~~Advanced EMT or who has been certified within six (6) months of the date of~~
42 ~~application, may be given credit for CE hours earned as a Paramedic or Advanced EMT~~
43 ~~to satisfy the CE requirement for EMT recertification as specified in this Chapter.~~
44 ~~Beginning twenty four (24) months after the effective date of these regulations, six (6)~~

1 ~~hours of the required continuing education shall be taken in person and shall be skills~~
2 ~~based and instructor led.~~

3
4 (C) Complete an application form and other processes as specified in Section 100079,
5 subdivisions (b)(3)-(b)(5), of this Chapter.

6
7 (D) Complete the criminal history background check requirements as specified in Article
8 4, Chapter 10 of this Division. The certifying entity shall receive the State and Federal
9 criminal background check results before issuing a certification.

10
11 (E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form
12 EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be
13 verified by direct observation of an actual or simulated patient contact. Skills
14 competency shall be verified by an individual who is currently certified or licensed as an
15 EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and
16 who shall be designated by an EMS approved training program (EMT training program,
17 AEMT training program, Paramedic training program or CE provider), or an EMS
18 service provider. EMS service providers include, but are not limited to, public safety
19 agencies, private ambulance providers and other EMS providers. Verification of skills
20 competency shall be valid for a maximum of two (2) years for the purpose of applying
21 for recertification.

22
23 ~~(E) Submit a completed skills competency verification form, EMSA-SCV (08/10). Form~~
24 ~~EMSA-SCV (08/10) is herein incorporated by reference. Skills competency shall be~~
25 ~~verified by direct observation of an actual or simulated patient contact. Skills~~
26 ~~competency shall be verified by an individual who is currently certified or licensed as an~~
27 ~~EMT, AEMT, Paramedic, Registered Nurse, Physician's Assistant, or Physician and~~
28 ~~who shall be designated by an EMS approved training program (EMT training program,~~
29 ~~AEMT training program, Paramedic training program or CE provider), or an EMS~~
30 ~~service provider. EMS service providers include, but are not limited to, public safety~~
31 ~~agencies, private ambulance providers and other EMS providers. Verification of skills~~
32 ~~competency shall be valid for a maximum of two (2) years for the purpose of applying~~
33 ~~for recertification. This subsection will remain in effect for 24 months after this chapter~~
34 ~~takes effect and as of that date is repealed.~~

35
36 (F) Starting 24 months after the effective date of these regulations, any EMT renewing
37 for the first time, following implementation, shall submit documentation of successful
38 completion by an approved EMT training program or approved CE provider in the
39 following training:

40
41 ~~(E) Provide documentation of successful completion by an approved EMT training~~
42 ~~program in 1. the use and administration of naloxone or other opioid antagonist that~~
43 ~~meets the standards and requirements of section 100075 subsection (c) and within~~
44 ~~twenty four (24) months after the effective date of these regulations.~~

1 ~~(F) Provide documentation of successful completion by an approved EMT training~~
2 ~~program in 2. the use and administration of epinephrine by auto-injector that meets the~~
3 ~~standards and requirements of section 100075 subsection (d) within twenty four (24)~~
4 ~~months after the effective date of these regulations.~~

5
6 ~~(G) Provide documentation of successful completion by an approved EMT training~~
7 ~~program in 3. the use of a glucometer that meets the standards and requirements of~~
8 ~~section 100075 subsection (e) within twenty four (24) months after the effective date of~~
9 ~~these regulations.~~

10
11 ~~(G) If an individual possesses a current California issued paramedic license or~~
12 ~~California Advanced EMT certificate then the individual need not provide proof of~~
13 ~~(a)(3)(~~E~~F)(1.)(2.)(3.) of this Section.~~

14
15 ~~(I) Provide documentation of successful completion by an approved EMT training~~
16 ~~program in tactical casualty care principles that meets the standards and requirements~~
17 ~~of section 100075 subsection (f) within twenty four (24) months after the effective date~~
18 ~~of these regulations.~~

19
20 ~~(B)(J) Complete an additional twenty four (24) hours of continuing education, and~~

21
22 ~~(C)(~~k~~) (H) Pass the cognitive and psychomotor written and skills certification exams as~~
23 ~~specified in Sections 100059 and 100059.1 of this Chapter within two (2) years from the~~
24 ~~date of application of applying for EMT reinstatement certification unless the individual~~
25 ~~possesses a current and valid EMT, AEMT or paramedic National Registry Certificate or~~
26 ~~a current and valid AEMT certificate or paramedic license.~~

27
28 ~~(4) For a lapse of greater than twenty four (24) months the individual shall meet the~~
29 ~~requirements of Section 100079, subdivisions (b)(1) (5) and one of the following: (a)~~
30 ~~and (b). (a)(1) or (a)(2) or (a)(3) or (a)(5) or (a)(6).~~

31
32 ~~(b) For individuals who meet the requirements of Section 100081, subdivision (a)(1),~~
33 ~~(a)(2), or (a)(3), the EMT certifying entity shall make the effective date of reinstatement~~
34 ~~recertification the day the certificate is issued. The certification expiration date will be~~
35 ~~the last day of the month two (2) years from the effective date. earliest date of the~~
36 ~~following to occur:~~

37
38 ~~(1) the last day of the month two (2) years from the effective date. For individuals who~~
39 ~~meet the requirements of Section 100081, subdivision (a)(4), the EMT certifying entity~~
40 ~~shall make the certification effective and expiration dates consistent with Section~~
41 ~~100079, subdivisions (d) and (e). or~~

42
43 ~~(2) the expiration date of the current National Registry Certificate.~~

44

1 (c) The EMT certifying entity shall issue a wallet-sized certificate card, pursuant to
2 Section 100344, subdivisions (c) and (d), of Chapter 10 of this Division, within forty-five
3 (45) days to eligible individuals who apply for EMT reinstatement ~~recertification~~ and
4 successfully complete the requirements of this Chapter.

5
6 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
7 and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.109, 1797.118,
8 1797.170, 1797.175, 1797.184, 1797.210 and 1797.216, Health and Safety Code; and
9 United States Code, Title 10, Subtitle A, Chapter 1, Section 101.

10 ARTICLE 6. RECORD KEEPING AND FEES

11
12 **§ 100082. Record Keeping.**

13 (a) Each EMT approving authority shall maintain a list of approved training programs
14 within its jurisdiction and provide the Authority with a copy. The Authority shall be
15 notified of any changes in the list of approved training programs as such occur.

16
17 (b) Each EMT approving authority shall maintain a list of current EMT program directors,
18 clinical coordinators and principal instructors within its jurisdiction.

19
20 (c) The Authority shall maintain a record of approved EMT training programs.

21
22 (d) A LEMSA may develop policies and procedures which require basic life support
23 services to make available the records of calls maintained in accordance with Section
24 1100.7, Title 13 of the California Code of Regulations.

25
26 ~~(e) The local EMS agency shall develop and implement policies for the medical control
27 and medical accountability that shall include, but not be limited to, the EMT completing
28 an electronic patient care record (ePCR) compliant with the current versions of the
29 California Emergency Medical Services Information System (CEMSIS) and the National
30 Emergency Medical Services Information Systems (NEMSIS) standards~~

31 Note: Authority cited: Sections 1797.107, 1797.109, 1797.170 and 1797.175, Health
32 and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.109, 1797.170,
33 1797.173, 1797.200, 1797.202, 1797.204, 1797.208, 1797.211 and 1797.220, Health
34 and Safety Code.

35
36 **§ 100083. Fees.**

37 A LEMSA may establish a schedule of fees for EMT training program review approval,
38 EMT certification, EMT renewal and EMT reinstatement ~~recertification~~ in an amount
39 sufficient to cover the reasonable cost of complying with the provisions of this Chapter.

40

1 Note: Authority cited: Sections 1797.107, 1797.109 and 1797.170, Health and Safety
2 Code. Reference: Sections 1797.61, 1797.62, 1797.118, 1797.170, 1797.212, 1797.213
3 and 1798.217, Health and Safety Code.

4

5 **§ 100084. No change.**

6 **§ 100085. No change.**

7 **§ 100086. No change.**