DEPARTMENT OF HEALTH SERVICES
COUNTY OF LOS ANGELES

SUBJECT: **FIRELINE EMERGENCY MEDICAL TECHNICIAN – PARAMEDIC (FEMP)**

(PARAMEDIC)
REFERENCE NO. 804

PURPOSE: To establish procedures for Fireline paramedic response from and to agencies within or outside Los Angeles County EMS Agency jurisdiction when requested through the statewide Fire and Rescue Mutual Aid System, to respond to and provide Advance Life Support (ALS) care on large scale incidents.

AUTHORITY: California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.220
California Code of Regulations, Title 22, Division 9, Sections 100165 and 100167
California Fire Service and Rescue Emergency Mutual Aid System, Mutual Aid Plan, (3-2002).

DEFINITIONS:

Fireline Emergency Medical Technician-P (FEMP): A paramedic who meets all pre-requisites established by FIRESCOPE and is authorized by their department to provide ALS treatment on the fireline.

PRINCIPLES:

1. When authorized by the Incident Commander or designee at an incident a paramedic may utilize the scope of practice for which they are trained and accredited according to the policies and procedures established by their accrediting local EMS agency.

2. These guidelines are not intended to replace existing regional EMS policies or circumvent the established response of EMS in the local County.

3. Upon initial request by an agency for FEMP support, the sending provider agency shall notify the EMS Agency by contacting the Medical Alert Center (MAC) at (562) 347-1789 to provide the MAC operator with the following information: First and last name of the paramedic, State paramedic number, local accreditation number, name and location of the incident where they are being sent. Upon assignment completion, the provider agency shall also notify the MAC of the FEMP's return.

4. Upon arrival the FEMP is expected to check in and obtain a briefing from the Logistics Section Chief, or the Medical Unit Leader or Incident Commander.

POLICY:

I. Under the authority of State regulations, a paramedic may render ALS care during emergency operations as long as the following conditions are met:

   A. The paramedic is currently licensed by the State of California and is accredited by a County EMS Agency within California.

   B. The paramedic is currently employed and on duty with an approved ALS provider and possesses the requisite wildland fireline skills and equipment.

APPROVED: _____ _____
Director, EMS Agency Medical Director, EMS Agency

C. The paramedic does not exceed the scope of practice or medical control policies from their county of origin.

II. The Los Angeles County FEMP will function within Reference No. 806.1, Procedures Prior to Base Contact, Treatment Protocols. When communication capability is available, the Medical Alert Center (MAC) shall be contacted at (562) 347-1789 for the EMS Agency Medical Director or designee approval for all procedures. In addition to the treatments outlined in Ref. No. 806.1, the FEMP may provide the following treatment(s):

A. Additional doses of morphine sulfate may be administered to patients with a pain level of seven (7) or greater as follows: if respiratory rate >10 per minute and SBP>100mmHg, 2mg slow intravenous (IV) push. May repeat every 5 minutes to a maximum total dose of 20mg.

B. Additional dose(s) of midazolam may be administered to actively seizing patients: 2-5mg slow IV push until the seizure stops or to a maximum total dose of 10mg.

C. Diphenhydramine can be administered to those patients with an allergic reaction/anaphylaxis who have mild respiratory distress and are perfusing. It may be given as 50mg slow IV push.

D. A two liter fluid challenge of normal saline may be administered as needed for dehydration.

E Ondansetron may be administered for nausea and/or vomiting, 4mg IV or IM or ODT (Orally Disintegrating Tablet). The 4mg dose may be repeated one time after 10 minutes if initial dose not effective.

III Controlled drugs will be obtained, secured and inventoried as per Reference No. 702, Controlled Drugs Carried on ALS Units.

Note: Controlled drugs shall be inventoried by two paramedics at least daily and anytime there is a change in staff as soon as a second paramedic is available to co-sign.

A. Controlled Drug Resupply Through a County Pharmacy

1. Provider FEMPs who procure controlled drugs through Los Angeles County pharmacies shall contact the EMS Agency for a letter of authorization. After business hours the provider shall contact the MAC at (562) 347-1700 and ask for the administrator on call.

B Controlled Drug Replacement Through a Non-County Supplier

1. Providers who procure narcotics through their own Medical Director/Drug Authorizing Physician shall follow the policies and procedures of their agency.

IV. Documentation of patient care will be completed as per Reference No. 606, Documentation of Prehospital Care. A legible copy of the Patient Care Record (PCR)

will be forwarded to the LA County EMS Agency, Attention: Medical Director and to the incident's jurisdictional EMS Agency.

V. Upon arrival at the incident the FEMP shall present their credentials (paramedic license and department identification) to the Medical Unit Leader, who will forward the information (deployment date and location) to the local EMS Agency as soon as possible.

VI. County accredited paramedics shall respond with the ALS/BLS inventory as per Ref. No. 719, Fireline Paramedic ALS Pack Inventory as a minimum standard in their pack while on the fireline. The inventory shall be supplied by the FEMP Provider Agency. (Based on FEMP operation assignments the inventory may be adjusted at the discretion of the Incident Medical Unit Leader.)

CROSS REFERENCES:

Prehospital Care Manual:
Ref. No. 606, **Documentation of Prehospital Care**
Ref. No. 702, **Controlled Drugs Carried on ALS Units**
Ref. No. 806.1, **Procedures Prior to Base Contact - Treatment Protocols**
Ref. No. 719, **Fireline Paramedic ALS Pack Inventory**
Ref. No. 1006, **Paramedic Accreditation**

FIRESCOPE