

	<b>COUNTY OF SACRAMENTO</b> EMERGENCY MEDICAL SERVICES AGENCY	<b>Document #</b>	2039.13
	<b>PROGRAM DOCUMENT:</b>  <b>Physician and/or Registered Nurse at the Scene</b>	<b>Draft Date:</b>	02/01/93
		<b>Effective:</b>	05/01/17
		<b>Revised:</b>	01/24/17
		<b>Review:</b>	03/01/19

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 EMS Medical Director

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 EMS Administrator

**Purpose:**

- ~~A. To provide direction and guidelines for Sacramento County Emergency Medical Services Agency (SCEMSA) Paramedics or Emergency Medical Technicians (EMT) when a Physician and/or Registered Nurse (RN) at the scene of medical emergencies wants to assist.~~ To establish guidelines for Paramedics when a Physician and/or Registered Nurse (RN) at the scene of medical emergencies wants to assist.

**Authority:**

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

**Protocol:**

- A. This policy outlines the steps to be followed when, at the scene of injury or illness, a bystander identifies himself or herself as a Physician or a RN.

**Procedure for Physician at Scene:**

- A. When a bystander at an emergency scene identifies himself/herself as a physician, the Paramedic will give the individual a "Note to Physician on Involvement with EMT-IIs and EMT-Ps (Paramedic)." (See the example below.)

<p style="text-align: center;"><b>STATE OF CALIFORNIA</b> <b>cma</b></p> <p>California          Medical Association</p> <p><b>NOTE TO PHYSICIAN ON INVOLVEMENT WITH <del>EMT-IIs</del>          AEMTs AND EMT-Ps (PARAMEDIC)</b></p> <p>A life support team [<del>EMT-II</del> <b>AEMT</b> or EMT-P (Paramedic) operates under standard policies and procedures developed by the local EMS agency and approved by their Medical Director under the Authority of Division 2.5 of the California Health and Safety Code. The drugs they carry and procedures they can do are restricted by law and local policy.</p> <p>If you want to assist, this can only be done through one of the alternatives listed on the back of this card. These alternatives have been endorsed by CMA, State EMS Authority, CCLHO, and BMQA. Assistance rendered in the endorsed fashion, without compensation, is covered by the protection of the "Good Samaritan Code" (see Business and Professions Code, Sections 2144, 2395-2398 and Health and Safety Code, Section 1799.104).</p> <p style="text-align: center;">(over)</p>	<p><u>ENDORSED ALTERNATIVES FOR PHYSICIAN INVOLVEMENT</u></p> <p>After identifying yourself by name as a physician licensed in the State of California, and, if requested, showing proof of identity, you may choose to do one of the following:</p> <ol style="list-style-type: none"> <li>1. Offer your assistance with another pair of eyes, hands, or suggestions, but let the life support team remain under base hospital control; or,</li> <li>2. Request to talk to the base station physician and directly offer your medical advice and assistance;          or,</li> <li>3. Take total responsibility for the care given by the life support team and physically accompany the patient until the patient arrives at a hospital and responsibility is assumed by the receiving physician. In addition, you must sign for all instructions given in accordance with local policy and procedures. (Whenever possible, remain in contact with the base station physician).</li> </ol> <p><del>(REV. 7/88) 88 49638</del> (REV. 1/12) 12 49638 Provided by the          Emergency Medical Services Authority</p>
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- B. If the Physician on the scene desires option 1, the Base Hospital will retain medical control, if Base contact was established, and the Paramedic will utilize the Physician as an "assistant" in patient care activities.
- C. If the physician on the scene desires option 2 or 3, the Paramedic will:
  - 1. Ask to see the Physician's medical license, unless the Physician is known to them, noting the Physician name, license number, and date of expiration on the patient care report (PCR).
  - 2. Immediately contact the Base and speak to the Base Hospital Physician.
  - 3. The Paramedic should instruct the physician on scene in radio/phone operation and have that physician speak directly with the Base Hospital Physician.
- D. The Base Hospital Physician may:
  - 1. Request that the Physician on scene function in an observer capacity only. (Option 1)
  - 2. Retain medical control but consider suggestions offered by the Physician on the scene. (Option 2)
  - 3. Delegate medical control to the Physician on the scene. (Option 3)
    - a. The Paramedic will make Advanced Life Support (ALS) equipment and supplies available to the Physician and offer assistance but continue to practice only within the SCEMSA scope of practice.
    - b. Ensure that the Physician accompanies the patient to the receiving hospital in the ambulance.
    - c. Ensure that the Physician signs for all instructions and medical care given on the PCR.
    - d. Keep the Base Hospital advised.
    - e. Complete an ALS service provider incident report and forward a copy to SCEMSA within seventy-two (72) hours.

**Procedure for RN at the Scene:**

- A. Identification:
  - 1. Recognition by the Paramedic; -OR-
  - 2. Valid California RN license; -OR-
  - 3. Valid SCEMSA Mobile Intensive Care Nurse (MICN) certification.
- B. An RN may perform basic life support (BLS) procedures at the discretion of the Paramedic.
- C. An MICN may assist and make suggestions but may not provide Base Hospital orders on site.

**References:**

- \_\_\_\_\_ State Of California CMA Note to Physician on Involvement:
- \_\_\_\_\_ <http://emsa.ca.gov/Media/Default/Pictures/Physician%20On%20Science%20Card.jpg>

STATE OF CALIFORNIA **cma**

California  
Medical Association

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

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(over)

ENDORSED ALTERNATIVES FOR PHYSICIAN INVOLVEMENT

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