Memorandum

DATE: October 5, 2022

TO: All Interested Parties

FROM: Jared Bagwell, EMS Administrator

SUBJ.: 45-day Public Comment Period for Proposed SJCEMSA Policy Updates

The San Joaquin County EMS Agency (SJCEMSA) is soliciting comments for new and draft revisions to the following SJCEMSA Policies:

1. SJCEMSA Policy No. 2545, Endotracheal Intubation - Adult Performance Criteria - Revision
   • Updates ETTI usage mandate and includes video laryngoscope as optional equipment
2. SJCEMSA Policy No. 2549, Needle Cricothyrotomy - TLJV Performance Criteria - Revision
   • Removes reference to NTI
3. SJCEMSA Policy No. 2557, Adult Supraglottic Airway Device Performance Criteria – Revision
   • Removes “optional skills approved EMT” from policy
4. SJCEMSA Policy No. 2558, Pediatric Supraglottic Airway Device Performance Criteria – Revision
   • Adds clarifying language to objective section
   • Revisions to definitions section and clarification of personnel application types
6. SJCEMSA Policy No. 2702, Causes for the Denial or Revocation of an SJCEMSA Prehospital Certificate – Revision
   • Revisions to definitions section
7. SJCEMSA Policy No. 2710, EMT and AEMT Disciplinary Action – SJCEMSA Responsibilities
   • Revisions to due process and disciplinary action proceedings
8. SJCEMSA Policy No. 2715, Process for EMT and AEMT Disciplinary Action – Relevant Employer – Revision
   • Revisions in formatting and other minor edits
9. SJCEMSA Policy No. 2720, Paramedic Employer Reporting Requirements - Revision
   • Revisions to formatting or grammar
10. SJCEMSA Policy No. 2740, Investigative Review Panel – Revision
Revision of civil code procedure references and other minor edits
11. SJCEMSA Policy No. 3410, Field to Hospital Communication - Revision
   - Clarifies field to title and hospital communication standards and requirements
12. SJCEMSA Policy No. 3411, Prehospital Field to Hospital Report Formats – Revision
   - Revisions to policy title, formatting and reporting standards
13. SJCEMSA Policy No. 4101, EMS Response Vehicle Medication and Equipment – Revision
   - Adds video laryngoscope as optional equipment, adds endotracheal tube stylet, and removes IV pump requirement by July 1, 2023
14. SJCEMSA Policy No. 4200, Management of Controlled Substances – Revision
   - Revision to SJCEMSA policy number reference and other minor edits
15. SJCEMSA Policy No. 4441, EMS Aircraft Classification and Authorization – Revision
   - Revisions to definitions section
16. SJCEMSA Policy No. 4442, EMS Aircraft Medical Control – Revision
   - Revision to patient destination section
17. SJCEMSA Policy No. 4447, EMS Aircraft Landing Sites – Revision
   - Revisions to landing site standards and management
18. SJCEMSA Policy No. 4701, Trauma System Management and General Provision - Revision
   - Revisions to trauma coordination, training of prehospital personnel and public information sections
19. SJCEMSA Policy No. 4709, Trauma Center Service Areas - Revision
   - Removes references to trauma center level designations
20. SJCEMSA Policy No. 4801, STEMI Receiving Center Designation – Revision
   - Revisions to all sections
21. SJCEMSA Policy No. 4811, Primary Stroke Center Designation – Revision
   - Revisions to all sections
22. SJCEMSA Policy No. 4985, Transfer of Patient Care in the Emergency Department – Revision
   - Revisions to most sections
23. SJCEMSA Policy No. 5104, EMT Attending Patient Care During Transport – New
   - Establishes when an EMT can attend to a patient during transport to an emergency department from the prehospital setting
24. SJCEMSA Policy No. 5107, Use of Patient Restraints – Revision
   - Clarifies acceptable usage of patient restraints
25. SJCEMSA Policy No. 5108, Care of Minors in the Field – Revision
   - Revisions to all sections
26. SJCEMSA Policy No. 5210, Major Trauma Triage Criteria – Revision
   - Clarifies major trauma triage criteria for falls and MCIs
27. SJCEMSA Policy No. 5502, BLS Scope of Practice Summary – Revision
   - Re-introduces EMR scope of practice
28. SJCEMSA Policy No. 5700, ALS Treatment Protocols – Revision
   AAIR-01 Advanced Airway Management:
   - Added the approval of the use of either a stylet or endotracheal tube introducer,
- Added repositioning of the head upon visualizing a Cormack-Lehane of 3 and re-visualizing.

AAIR-03 Mechanical Ventilation for Patients with Pulses:
- Low respiratory rate alarm changed from 12 to 8 per minute,
- Removed the “15 minutes to arrival at the Emergency Department” as inclusion criteria for the use of sedation for signs of purposeful movement,
- Removed “continuously” showing signs of purposeful movement and replaced with “patient showing purposeful movement, or signs of agitation such as over breathing the ventilator or an increase in heart rate”.

AAIR-04 CPAP via Ventilator:
- Breaths per minute initial setting changed from 12 BPM to default.
- Added “If after 3 minutes condition is not improving, or patient expresses a need for more air pressure or shows signs of air hunger: increase pressure support (PS) by 5 every 3 minutes to a max of 10.”
- Removed a typo “Treatment Partial Obstruction” in the header box.

ACAR-04 Medical Cardiac Arrest Pulseless Ventricular Tachycardia / Ventricular Fibrillation:
- Rearranged order of lidocaine and epinephrine to match the flow chart. Lidocaine being given prior to Epinephrine.

ACAR-05 Return of Spontaneous Circulation:
- Changed target systolic blood pressure to 110 for dopamine,
- Changed target systolic blood pressure to 110 for push dose epinephrine,
- Change frequency of administration from every 3-5 minutes to every 2 minutes.

ARSP-03 Smoke inhalation:
- Removed typo “treatment #3,” and change to “Treatment #2”

AGEN-03 Pain management
- Added “Decreased mental status from patient baseline” to Base hospital orders

AOBG-02 Eclampsia and Pre-Eclampsia:
- Changed blood pressure from 160/110 to 140/90,
- Changed definition of eclampsia,
- Changes infusion rate of magnesium sulfate to 2 G in 250 ml over 10 minutes,
- Added base order for additional 2 G of magnesium sulfate for a still seizing patient.

29. SJCEMSA Policy No. 6102, EMS Unusual Occurrence Process – Revision
- Adds the ability for Unusual Occurrences to be submitted online

30. SJCEMSA Policy No. 6102A, Unusual Occurrence Form – Revision
- Adds the ability for Unusual Occurrences to be submitted online

31. SJCEMSA Policy No. 6381, STEMI Receiving Center Data Requirements - Revision
- Revisions to all sections

32. SJCEMSA Policy No. 6382, Primary Stroke Center Data Requirements – Revision
• Revision to all sections
  33. SJCEMSA Policy No. 6715, Trauma Audit Committee – Revision
  34. SJCEMSA Policy No. 7001, On Call EMS Duty Notification – New
• Establishes procedure for EMS Duty Officer notifications

The public and EMS stakeholders are invited to submit written comments on the proposed policy updates during the 45-day public comment period from October 5, 2022, to November 21, 2022. The draft policies and comment forms may be viewed on the SJCEMSA Draft Policies page. Comments on the proposed changes must be received on or before November 21, 2022, at 5 pm. Comments may be submitted online, by email to Don Miles at demiles@sjgov.org, by fax at (209) 468-6725, or by mail.

Any questions regarding this memorandum may be directed to Jared Bagwell, EMS Administrator at jbagwell@sjgov.org or 209-468-6818.