

**San Joaquin County  
Emergency Medical Services Agency**



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## BLS Treatment Protocols - Introduction

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**AUTHORITY:** Health and Safety Code, Division 2.5, Sections 1797.60, 1797.80, 1797.197, 1797.197a, 1797.204, 1797.220, 1798; California Code of Regulations, Title 22, Chapter 2, Sections 100062, 100063, 100064

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### INTRODUCTION

- I. The Basic Life Support (BLS) Treatment Protocols apply to all levels of certification and licensure and all prehospital care personnel in San Joaquin County. The protocols contain language, instructions and treatments designed for holders of an Emergency Medical Technician (EMT) certificate. All prehospital personnel are required to operate within their respective scope of practice and must ensure that a specific procedure, such as AED, administration of naloxone, traction splinting or assisting patients with taking their own medications is within their respective scope of practice and level of training before proceeding.
- II. The BLS Treatment Protocols are not intended as a substitute for sound medical judgment. Unusual patient presentations make it impossible to develop a protocol for every possible patient situation. When treating patients more than one treatment protocol may apply.
- III. All prehospital personnel are held to the following patient care standards:
  - A. San Joaquin County EMS Agency Policies and Procedures.
  - B. American Heart Association CPR, AED, and BLS airway obstruction and ventilation techniques.
  - C. State of California EMT Course Curriculum.
  - D. Simple Triage and Rapid Treatment (START).
  - E. OSHA and CAL-OSHA standards for infection control.
- IV. Pediatric Considerations:
  - A. The San Joaquin County EMS Agency has not developed separate pediatric BLS treatment protocols except Neonatal Resuscitation. BLS treatment for pediatric and adult patients is the same under most conditions. However, several special considerations need to be addressed regarding pediatric patients:
    1. The defined age of a pediatric patient is twelve (12) years of age and under; infants are defined as being less than 1 year of age; and neonates are defined as less than 1 month in age.
    2. The Primary Survey and Secondary Survey is the same for all patients. However, the younger the patient the more EMS personnel will need to

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rely on family, care givers, teachers, bystanders, etc. for obtaining a patient's history.

- B. Establish level of consciousness using AVPU: Alert, Verbal, Pain, Unresponsive.
- C. Always carefully and thoroughly check a pediatric patient's airway. A majority of pediatric emergencies involve respiratory distress or airway difficulty.
- D. Always check the scene for evidence of poisons or chemicals in pediatric patients with an altered level of consciousness and obtain a thorough history from parents including the child's possible access to medications (including vitamins) and other chemicals.

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