


Sierra – Sacramento Valley EMS Agency Program Policy			
Paramedic IFT Optional Skills: Prehospital Provider Agency Application and Approval Process			
	Effective: 12/01/2016	Next Review: 10/2019	441
	Approval: Troy M. Falck, MD – Medical Director		SIGNATURE ON FILE
	Approval: Victoria Pinette – Executive Director		SIGNATURE ON FILE

PURPOSE:

To establish the application and approval process for prehospital provider agencies requesting to utilize any of the following paramedic interfacility transport (IFT) optional skills:

- A. Monitoring of magnesium sulfate, nitroglycerin, heparin, and/or amiodarone infusions.
- B. Monitoring of blood transfusions.
- C. Utilization of Automatic Transport Ventilators (ATV's).

AUTHORITY:

- A. California Health and Safety Code, Division 2.5, § 1798.200, 1798.206, 1798.214, 1797.218, 1797.220, 1798.2, 1798.170, and 1798.172.
- B. California Code of Regulations, Title 22, Chapter 4, Article 1, § 100145.

POLICY:

- A. Only S-SV EMS approved ALS ambulance provider agencies may be authorized to utilize paramedic IFT optional skills.
- B. A prehospital provider agency requesting approval to utilize any of the paramedic IFT optional skills shall submit a 'Paramedic IFT Optional Skills Prehospital Provider Application' (441-A) to the S-SV EMS Agency. A complete application shall include the following:
 - 1. A letter of intent to provide paramedic IFT optional skills, including a list of the optional skills requesting approval for.
 - 2. Anticipated paramedic IFT optional skills utilization call volume.
 - 3. Identification of equipment brand name, model number and all pertinent information for the mechanical infusion pumps or ATVs that will be utilized.

4. A description of the provider's QI processes related to paramedic IFT optional skills utilization.
 5. CV/resume of the proposed physician, RN or paramedic training instructor(s).
 - If the provider is proposing to utilize a paramedic as the training instructor, a separate letter indicating this request as well as the justification of the need to utilize a paramedic instructor for this purpose must also be included.
 6. Description of the provider's plan for paramedic IFT optional skills training.
 7. Provider's policies and procedures relevant to paramedic IFT optional skills.
 8. Number of proposed personnel to be trained and authorized to provide paramedic IFT optional skills.
 9. Proposed target date for beginning service.
- C. S-SV EMS program approval or disapproval shall be made, in writing, to the applicant within a reasonable period of time after receipt of all required documentation. This period shall not exceed thirty (30) calendar days.
- D. Prior to implementation of an approved paramedic IFT optional skills program, the provider shall submit to S-SV EMS a list of all personnel authorized to provide paramedic IFT optional skills, including the following:
1. Paramedic state license number and expiration date.
 2. Proof of successful completion of paramedic IFT optional skills training.

CROSS REFERENCES:

- A. Paramedic IFT Optional Skills: Transferring Hospital Requirements (341).
- B. Paramedic IFT Optional Skills: Prehospital Provider Agency Requirements and Responsibilities (442).
- C. Paramedic Monitoring of Magnesium Sulfate, Nitroglycerin, Heparin, and/or Amiodarone Infusions During IFTs (841).
- D. Paramedic Monitoring of Blood Transfusions During IFTs (842).
- E. Paramedic Utilization of Automatic Transport Ventilators (ATVs) During IFTs (843).