

Sierra – Sacramento Valley EMS Agency Program Policy			
Paramedic IFT Optional Skills Provider Agency Approval, Requirements & Responsibilities			
	Effective: 10/01/2026	Next Review: 07/2029	441
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PURPOSE:

- A. To establish the provider agency application and approval process for utilization of any of the following paramedic interfacility transport (IFT) optional skills:
 1. Monitoring of magnesium sulfate, nitroglycerin, heparin, &/or amiodarone infusions.
 2. Monitoring of blood transfusions.
 3. Utilization of an automatic transport ventilator (ATV).
 4. Utilization of non-invasive High Flow Nasal Cannula (HFNC).
- B. To establish the requirements and responsibilities of S-SV EMS authorized paramedic IFT optional skills providers.

AUTHORITY:

- A. HSC, Division 2.5, § 1798.200, § 1798.206, § 1798.214, § 1797.218, § 1797.220, § 1798.2, § 1798.170, § 1798.172.
- B. CCR, Title 22, Chapter 3.3.

POLICY:

- A. Only S-SV EMS permitted ALS ambulance transport providers may be authorized to utilize paramedic IFT optional skills.
- B. Only appropriately trained paramedics who are on duty with an authorized paramedic IFT optional skills provider may utilize paramedic IFT optional skills.
- C. A 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 S-SV EMS. A complete application shall include all the following:
 1. A letter of intent to utilize paramedic IFT optional skills, including a list of the optional skills that will be utilized.
 2. The proposed paramedic IFT optional skills program implementation date, and the anticipated utilization frequency/volume of paramedic IFT optional skills.
 3. The number of personnel to be trained to utilize paramedic IFT optional skills.

4. A description of the provider's paramedic IFT optional skills training program, which shall meet the following minimum requirements:
 - a. Utilization of S-SV EMS approved training program curriculum, including a final written and skills examination.
 - b. Utilization of physician or RN instructors to teach the approved curriculum.
 - i. Paramedic personnel with appropriate knowledge and education may be approved to teach the required curriculum when necessary/appropriate.
 - c. Utilization of all training equipment necessary to ensure a sound paramedic IFT optional skills training program (manikins, infusion devices, ATV, non-invasive HFNC device, etc.).
5. The CV/resume of the proposed physician, RN, or paramedic training instructor.
 - a. If the provider is proposing to utilize a paramedic as the training instructor, a separate letter indicating the necessity/reason for utilizing a paramedic instructor must also be included.
6. The provider's optional skills utilization policies and procedures, which shall at a minimum address the following:
 - a. Paramedic personnel shall obtain a copy of the transferring physician's orders and attach them to the electronic patient care report.
 - b. Patients being administered magnesium sulfate, nitroglycerin, heparin, &/or amiodarone infusions shall have vital signs monitored and documented every 15 minutes and any time there is a change in patient condition.
 - c. Patients being administered blood transfusions shall have vital signs monitored and documented every 15 minutes, and any time there is a change in patient condition or change in transfusion rate.
 - d. Patients on an ATV or non-invasive HFNC shall have vital signs monitored and documented every 15 minutes and any time there is any change in patient condition or adjustment of the ATV or non-invasive HFNC settings. Continuous pulse oximetry, waveform capnography, and cardiac monitoring shall be maintained throughout transport, and values/rhythms shall be documented every 15 minutes and any time there is a change in patient condition.
7. A description of the provider's paramedic IFT optional skills utilization QI process.
 - a. Provider agencies shall audit 100% of paramedic IFT optional skills utilization calls to assess compliance with physician orders and S-SV EMS policies.
8. A list of equipment brand name, model number and other pertinent information for the mechanical infusion pumps, non-invasive HFNC devices, and/or ATV devices that will be utilized.

- D. Written program approval/disapproval shall be made by S-SV EMS to the applicant within thirty (30) calendar days of receipt of all required application documentation.
- E. Paramedic IFT optional skills provider agencies shall notify S-SV EMS by the end of the next business day of any unusual occurrence or known/suspected patient harm associated with the use of a paramedic IFT optional skill.
- F. Paramedic IFT optional skills provider agencies shall maintain a roster of their paramedic personnel authorized to utilize paramedic IFT optional skills and provide this information to S-SV EMS upon request.