

I. Paramedic to EMT

A. Philosophy: This policy is intended to provide a guideline for the transfer of patient care in the field setting from a paramedic to an EMT-I.

1. On occasion, the stepping down of patient care from a paramedic to an EMT is necessary to maximize patient care with on-scene resource limitations and/or the need to rapidly transport more seriously ill or injured victims with unusual on-scene limitations or circumstances, i.e. long extrications or transport unit limitations, etc.
2. California Code of Regulations (CCR) Title 22, recognizes the potential for this problem and allows for the step down of patient care under local policy. This policy by local authority establishes how and when a paramedic may transfer patient care to an EMT-I in the pre-hospital care setting.

B. Procedure:

1. In every situation that appears to require that the paramedic transfer the patient care on-scene to an EMT-I, the following criteria must be considered:
 - a) All situations cannot be accounted for in this policy.
 - b) The goal and direction of this policy is to match the need of the patient (s) with the highest level of care available with the resources committed to the incident.
 - c) If there is any question by the paramedic regarding the patient's condition and/or the propriety of leaving the patient to the care of an EMT, consult with the Base Station and do as directed.

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