

	1214	Physician interaction
Nor-Cal EMS Policy & Procedure Manual		Treatment Guidelines
Effective Date: 05/01/2021		Next Revision: 05/21/2024
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR		SIGNATURE ON FILE

## **AUTHORITY**

Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9, Section 1797.220 and 1799.104 (a).

## **POLICY**

To define the role of a physician or other provider, who responds to the scene of a medical emergency and is not a part of an organized incident response.

### **Physician is a bystander:**

In the event that a physician wants to assist on scene he/she must state name as a physician licensed in the State of California and show proof of identity. **Once identification has been confirmed**, the physician may choose one of the alternatives listed below:

- A. Offer assistance with another pair of eyes or hands, or offer suggestions, but allow the life support team to remain under base hospital control; Or,
- B. Request to talk to the base station physician and directly offer medical advice and assistance; or,
- C. Take total responsibility for the care given by the life support team and physically accompany the patient until the patient arrives at a hospital and the receiving physician assumes responsibility. In addition, they must sign for all instructions given in accordance with local policy and procedure and whenever possible, remain in contact with the Base Hospital physician.

### **Conflict Resolution:**

In the event that any unresolved conflict arises regarding a patient care issue, the prehospital provider shall contact the Base Hospital physician immediately. The BH physician will have the final authority over medical care to be provided by prehospital responders.

### **Private Physicians:**

If the patient's private physician intervenes in person or by telephone, the prehospital providers shall inform the patient's physician SHALL make BH contact. The ONLY time orders shall be taken over the telephone from a physician who is not the BH physician is when determining the pts. DNR status.



STATE OF CALIFORNIA



California Medical Association

**NOTE TO PHYSICIAN ON INVOLVEMENT WITH AEMTs AND EMT-Ps (PARAMEDIC)**

A life support team AEMT or EMT-P (Paramedic) operates under standard policies and procedures developed by the local EMS agency and approved by their Medical Director under the Authority of Division 2.5 of the California Health and Safety Code. The drugs they carry and procedures they can do are restricted by law and local policy.

If you want to assist, this can only be done through one of the alternatives listed on the back of this card. These alternatives have been endorsed by CMA, State EMS Authority, CCLHO, and BMOA.

Assistance rendered in the endorsed fashion, without compensation, is covered by the protection of the "Good Samaritan Code" (see Business and Professions Code, Sections 2144, 2395-2398 and Health and Safety Code, Section 1799.104).

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#### **ENDORSED ALTERNATIVES FOR PHYSICIAN INVOLVMENT**

After identifying yourself by name as a physician licensed in the state of California, and if requested, showing proof of identity, you may choose to do one of the following:

1. Offer your assistance with another pair of eyes, hands, or suggestions, but let the life support team remain under the base hospital control; or,
2. Request to talk to the base station physician and directly offer your medical advice and assistance; or,
3. Take total responsibility for the care given by the life support team and physically accompany the patient until the patient arrives at a hospital and responsibility is assumed by the receiving physician. In addition, you must sign for all instructions given in accordance with local policy and procedure. (Whenever possible, remain in contact with the base station physician.)