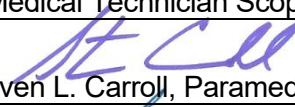



COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Emergency Medical Technician Scope of Practice		Policy Number 300	
APPROVED: EMS Administrator: Steven L. Carroll, Paramedic		Date: July 1, 2026	
APPROVED: Medical Director: Daniel Shepherd, MD		Date: July 1, 2026	
Origination Date: August 1998	Date Revised: December 11, 2025	Effective Date: July 1, 2026	
Date Last Reviewed: December 11, 2025			

- I. PURPOSE: To define the scope of practice of an Emergency Medical Technician (EMT) practicing in Ventura County.
- II. AUTHORITY: Health and Safety Code, Section 1797.107, 1797.109, 1797.160, 1797.170, and California Code of Regulations, Title 22, Division 9, Section 100066.02, and 100065.10.
- III. POLICY:
 - A. During training, while at the scene of an emergency and during transport of the sick or injured, or during interfacility transfer, a supervised EMT trainee or certified EMT is authorized to do any of the following:
 1. Evaluate the ill and injured
 2. Render basic life support, rescue and emergency medical care to patients.
 3. Obtain diagnostic signs to include, but not be limited to the assessment of temperature, blood pressure, pulse and respiration rates, pulse oximetry, level of consciousness, and pupil status.
 4. Perform cardiopulmonary resuscitation, including the use of mechanical adjuncts to basic cardiopulmonary resuscitation.
 5. Administer oxygen
 6. Use the following adjunctive airway and breathing aids:
 - a. Oropharyngeal airway
 - b. Nasopharyngeal airway
 - c. Suction devices
 - d. Basic oxygen delivery devices for supplemental oxygen therapy, including but not limited to, humidifiers, partial rebreathers, and venturi masks; and
 - e. Manual and mechanical ventilating devices designed for prehospital use, including continuous positive airway pressure (CPAP) and bilevel positive airway pressure (BiPAP).
 7. Use various types of stretchers and spinal immobilization devices.

8. Provide initial prehospital emergency care of trauma, including, but not limited to:
 - a. Bleeding control through the application of tourniquets;
 - b. Use of hemostatic dressings from a list approved by the California EMS Authority
 - c. Spinal motion restriction or immobilization;
 - d. Seated spinal motion restriction or immobilization;
 - e. Extremity splinting; and
 - f. Traction splinting.
 9. Administer oral glucose or sugar solutions.
 10. Extricate entrapped persons.
 11. Perform field triage.
 12. Transport patients.
 13. Apply mechanical patient restraint
 14. Set up for ALS procedures, under the direction of a Paramedic.
 15. Perform automated external defibrillation
 16. Assist patients with the administration of physician-prescribed devices including, but not limited to, patient-operated medication pumps, sublingual nitroglycerin, and self-administered emergency medications, including epinephrine devices.
- B. In addition to the activities outlined in the EMT Basic Scope of Practice, the VCEMS Medical Director may also establish policies and procedures to allow a certified EMT or a supervised EMT student who is part of the organized EMS System and in the prehospital setting and/or during interfacility transport to:
1. Monitor intravenous lines delivering glucose solutions or isotonic balanced salt solutions including Ringer's lactate for volume replacement. Monitor, maintain, and adjust, if necessary, in order to maintain, a preset rate of flow and turn off the flow of intravenous fluid;
 2. Transfer a patient, who is deemed appropriate for transfer by the transferring physician, and who has nasogastric (NG) tubes, gastrostomy tubes, heparin locks, Foley catheters, tracheostomy tubes and/or indwelling vascular access lines, excluding arterial lines;
 3. Administer naloxone by intranasal and/or intramuscular routes for suspected narcotic overdose;
 4. Administer epinephrine by auto-injector for suspected anaphylaxis and/or severe asthma;
 5. Perform finger stick blood glucose testing, and;
 6. Administer over the counter medications, when approved by the VCEMS medical director, including but not limited to:

- a. Aspirin
- C. During a mutual aid response into another jurisdiction, an EMT may utilize the scope of practice for which s/he is trained and authorized according to the policies and procedures established by VCEMS within the jurisdiction where the EMT is employed as part of the organized EMS system.