TEMPLATE POLICY

PURPOSE: To establish procedures for Fireline paramedic response from and to agencies within or outside (local) EMS Agency jurisdiction when requested through the statewide Fire and Rescue Mutual Aid System, to respond to and provide Advance Life Support (ALS) care on the fireline at wildland fires.

AUTHORITY: California Health and Safety Code, Division 2.5, Sections 1797.204, 1797.220
California Code of Regulations, Title 22, Division 9, Sections 100165 and 100167
California Fire Service and Rescue Emergency Mutual Aid System, Mutual Aid Plan, (3-2002).

County accredited paramedics shall carry the ALS/BLS inventory consistent with the FIRESCOPE FEMP Position Description. Reasonable variations may occur; however, any exceptions shall have prior approval of the EMS Agency. The equipment lists are a minimalist, scaled down version of standard inventory in order to meet workable/packable weight limitations (45 lbs including wildland safety gear).

NOTE: It will not be possible to maintain standard ALS minimums on the fireline. The attached ALS inventory essentially prioritizes critical and probable fireline needs.

**Local area** Accredited Paramedics may function within their scope of practice, when serving in an authorized capacity assignment, as an agent of their authorized ALS service provider fire agency.

Fire service providers shall establish non-medical qualifications in order to serve as a Fireline Paramedic

POLICY:

I. Under the authority of State regulations, a paramedic may render ALS care during emergency operations as long as the following conditions are met:

   A. The paramedic is currently licensed by the State of California and is accredited by a County EMS Agency within California.

   B. The paramedic is currently employed with an ALS provider and possesses the requisite wildland fireline skills and equipment.

   C. The paramedic does not exceed the scope of practice or medical control policies from their county of origin.

Paramedics operating in the capacity of a fireline paramedic (FEMP) shall follow established LEMSA standing or communication failure protocols.

The FEMT-P is expected to check in and obtain a briefing from the Logistics Section Chief, or the Medical Unit Leader (MEDL) if established at the Wildfire Incident.
Documentation of patient care will be completed as per home Local EMSA Policy. Documentation of Patient Care will be submitted to incident host agencies. If requested, a legible copy of the Patient Care Record (PCR) will be forwarded to identified home LEMSA personnel.

Continuous Quality Improvement activities shall be in accordance with home LEMSA policy in concert with provider agency CQI procedures.