

# SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Policy Reference No.: 2041

Effective Date: xxxxxxx

Supersedes: n/a

## EMT Optional Skills (Epinephrine Draw Up) – EMSAC January 2024 (New Policy)

### I. PURPOSE

- A. To establish the criteria and process for gaining approval for EMT administration of epinephrine through the draw up method into or through prefilled syringe for suspected anaphylaxis and/or severe asthma.
- B. Allow epinephrine draw up procedure as a contingency for medical supply or medication shortages.

### II. PROGRAM OVERVIEW

- A. Allow for EMT use of draw up epinephrine within the San Francisco EMS Agency jurisdictional area in the City and County of San Francisco.
- B. Establish data collection methodology for evaluation and effectiveness of the EMT epinephrine draw up skill.
- C. This skill is optional for EMS Provider Agencies to adopt

### III. REQUEST AND APPROVAL

#### A. Approval Process

1. The permitted EMS Provider shall submit a written request to the EMS Agency for use of EMT epinephrine draw up optional skill including the following material for approval.
  - i. Name(s) and qualification(s) of the EMS Provider Medical Director overseeing the EMT epinephrine draw up program.
  - ii. EMT epinephrine draw up Quality Improvement Plan that meets or exceeds requirements under EMS Agency Policy 6000 and annual EMS Provider Quality Improvement plan. The plan shall include a policy and procedure to collect, maintain and evaluate patient care records including 100% review for all EMT administrations of draw up epinephrine.
  - iii. Procedure for the submission of aggregate data and prehospital care reports (PCRs) to the EMS Agency for all EMT epinephrine draw up administrations.
  - iv. Program curriculum and training program as specified in Section IV.
  - v. Refresher curriculum, testing process and skills competency exams.

- B. Upon receipt, application materials will be reviewed for completeness. If any required documentation is missing, the EMS Provider will be notified, in writing, within fourteen (14) business days. Missing information shall be submitted with thirty (30) calendar days. Failure to submit the missing information with thirty (30) calendar days will require the EMS Provider to reapply.
- C. Upon receipt, the application materials will be reviewed for completeness. The EMS Provider will receive written notification within thirty (30) calendar days of request for EMT optional skills approval.

#### **IV. TRAINING REQUIREMENTS**

- A. EMS Providers shall submit and ensure initial and recurring training content contains the following for EMT epinephrine draw up skills. Training shall be no less than two (2) hours and contain the following topics and skills:
  - 1. Managing a patient of a suspected anaphylactic reaction and/or experiencing severe asthma symptoms
  - 2. Names
  - 3. Indications
  - 4. Contraindications
  - 5. Side/adverse effects
  - 6. Interactions
  - 7. Routes of administration
  - 8. Calculating dosages
  - 9. Mechanisms of drug actions
  - 10. Medical asepsis
  - 11. Disposal of contaminated items and sharps
  - 12. Medication administration
- B. At the completion of training the EMT shall complete a competency based written and skills examinations which shall include:
  - 1. Assessment of when to administer epinephrine.
  - 2. Managing a patient before and after administering epinephrine.
  - 3. Using universal precautions and body substance isolation procedures during medication administration.
  - 4. Demonstrating aseptic technique during medication administration.
  - 5. Demonstrating preparation and administration of epinephrine by drawing up the proper drug dose into a syringe, and
  - 6. Proper disposal of contaminated items and sharps.
- C. Recurring training curriculum and skills testing shall contain all listed items above.

**V. PROVIDER REQUIREMENTS**

- A. The EMS Provider shall maintain a list of all staff who have completed the EMT epinephrine draw up training and shall ensure list is updated with personnel changes and filed to the EMS Agency annually with EMS Provider QI plan. Failure to provide an annual list to the EMS Agency shall result in EMS Provider and personnel to cease use of the epinephrine draw up optional skill.
- B. The organization shall retain on file, at all times, copies of current and valid proof training records for all personnel performing the skill under the program.
- C. The organization must be a current San Francisco EMS Agency approved CE Provider.
- D. EMS Provider must complete annual refresher training, including hands-on skills competency testing.

**VI. MEDICAL DIRECTION**

- A. EMTs will work under existing medical control and follow EMS Agency prehospital policies and protocols, as approved by the EMS Agency Medical Director. This includes use of Policy 3020 Field to Hospital Communications to contact the Base Hospital.
- B. EMS Provider Medical Director shall review 100% of all PCRs with EMT epinephrine draw up administration.

**VII. EMT OPTIONAL SKILL ACCREDITATION**

- A. Upon completion of training and dual signature from the EMS Provider Medical Director and EMS Provider Operations Manager/Chief-level supervisor, an EMT shall be considered Accredited for the purposes of using the epinephrine draw up skill for 1 year from the date of earliest signature.
- B. Any EMT that fails competency testing or accreditation requirements are subject to California Code of Regulations, Title 22, Chapter 6, and EMS Agency Policy 2070.
- C. The initial roster shall be filed upon completion of implementation training. Subsequent rosters shall be filed by the EMS Provider every year as part of the annual EMS Provider Quality Improvement Plan submission or within 72-hours upon request by the EMS Agency.
- D. EMTs may use the epinephrine draw up optional skill as long as EMT certificate is active, and while on-duty with and employed by the EMS Provider who is approved to provide epinephrine draw up skill in San Francisco.

**VIII. AUTHORITY**

- A. California Code of Regulations, Title 22, Section 100064