

Third 15-Day Public Comment Period
August 19, 2019 through September 3, 2019

The Emergency Medical Services Authority has illustrated changes to the original text in the following manner:

- Additions to the original text from 45-day comment period are shown underlined.
- Deletions to the original text from 45-day comment period are shown in Strikeout
 - Omitted text is indicated by (* * * *)

The Emergency Medical Services Authority has illustrated changes to the modified text from the 15-day comment period in the following manner:

- Additions to the modified text are shown in double underline.
- Deletions to the modified text are shown in ~~double strikeout~~.

The Emergency Medical Services Authority has illustrated changes to the modified text from the second 15-day comment period in the following manner:

- Additions to the modified text are shown in **bolded double underline**.
- Deletions to the modified text are shown in ~~**bolded double strikeout**~~.

The Emergency Medical Services Authority has illustrated changes to the modified text from the third 15-day comment period in the following manner:

- Additions to the modified text are shown in ***bolded italics double underline***.
- Deletions to the modified text are shown in ~~***bolded italics double strikeout***~~.

**California Code of Regulations
Title 22. Social Security
Division 9. Prehospital Emergency Medical Services
Chapter 4. Paramedic**

1 **ARTICLE 1. DEFINITIONS**

2
3 **§ 100137. Paramedic Training Program Approving Authority.**

4 (a) "Paramedic training program approving authority" means an agency or person
5 authorized by this Chapter to approve a Paramedic training program and/or a Critical
6 Care Paramedic (CCP) training program, as follows:

7
8 ~~(a) (1) The approving authority for a A paramedic Paramedic training program and/or a~~
9 ~~Critical Care Paramedic (CCP) training program conducted by a qualified-qualified~~
10 statewide public safety agency shall be approved by the director of the Authority.

11
12 ~~(b) (2) The approving authority for any Any other paramedic Paramedic training program~~
13 and/or a ~~Critical Care Paramedic (CCP) training program not included in subsection (1)~~

1 ~~(a)~~ shall be approved by the local EMS agency (LEMSA) ~~which~~ that has jurisdiction in
2 the ~~area in which~~ county where the training program is located. ~~headquartered~~.

3
4 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
5 Reference: Sections 1797.172, 1797.200 and 1797.208, Health and Safety Code.
6

7 **§ 100140. Licensure Psychomotor Skills Examination.**

8 “Psychomotor Skills examination” or practical examination” means the National Registry
9 of Emergency Medical Technicians (NREMT) ~~EMT-Paramedic Practical~~ Psychomotor
10 Skills Examination to test the skills of an individual applying for licensure as a
11 paramedic. ~~Examination results shall be valid for application purposes for two (2) years~~
12 ~~from the date of examination.~~

13
14 Note: Authority cited: Sections 1797.107, 1797.172, 1797.175, 1797.185 and 1797.194,
15 Health and Safety Code. Reference: Sections 1797.172, 1797.175, 1797.185 and
16 1797.194, Health and Safety Code.
17

18 **§ 100141. Licensure Cognitive Written Examination.**

19 “Licensure Cognitive Written Examination” means the NREMT ~~EMT-Paramedic Written~~
20 Cognitive Written Examination to test an individual applying for licensure as a
21 paramedic. ~~Examination results shall be valid for application purposes for two (2) years~~
22 ~~from date of examination.~~

23
24 Note: Authority cited: Sections 1797.107, 1797.172, 1797.175, 1797.185 and 1797.194,
25 Health and Safety Code. Reference: Sections 1797.63, 1797.172, 1797.175, 1797.185,
26 1797.194 and 1797.210, Health and Safety Code.
27

28 **§ 100141.1. High Fidelity Simulation**

29 High Fidelity Simulation means using computerized manikins, monitors, and similar
30 devices or augmented virtual reality environments that are operated by a technologist
31 from another location to produce audible sounds and to alter and manage physiological
32 changes within the manikin to include, but not be limited to, altering the heart rate,
33 respirations, chest sounds, and saturation of oxygen.

34
35 Note: Authority cited: Sections 1797.107, 1797.172, 1797.175, 1797.185 and 1797.194,
36 Health and Safety Code. Reference: Sections 1797.63, 1797.172, 1797.175, 1797.185,
37 1797.194 and 1797.210, Health and Safety Code.
38

39 **§ 100143.1 Electronic Health Record**

40 “Electronic health record” or EHR, or electronic patient care record or ePCR means real
41 time, patient-centered records that make information available securely to authorized
42 users in a digital format capable of being shared with other providers across more than
43 one health care organization.

44
45 Note: Authority cited: Sections 1797.107, 1797.122 and 1797.227 Health and Safety
46 Code. Reference: Sections 1797.107, 1797.122 and 1797.227, Health and Safety Code.

1
2 **§ 100144. Critical Care Paramedic.**

3 A “Critical Care Paramedic” (CCP) or ~~Flight Paramedic (FP)~~ is an individual who is
4 educated and trained in critical care transport, whose scope of practice is in accordance
5 to the standards prescribed by this Chapter, has completed a training program as
6 specified in Section 100155(c), holds a current certification as a CCP by the
7 International Board of Specialty Certification (IBSC), Board for Critical Care Transport
8 Paramedic Certification (BCCTPC), who has a valid license issued pursuant to this
9 Chapter, and is accredited by a LEMSA in which their paramedic service provider is
10 based.

11
12 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.194, Health and Safety
13 Code. Reference: Sections 1797.84, 1797.172, 1797.185 and 1797.194, Health and
14 Safety Code.

15
16 **§ 100144.1. Flight Paramedic.**

17 A “Flight Paramedic” (FP) is an individual who is educated and trained in critical care
18 transport, whose scope of practice is in accordance to the standards prescribed by this
19 Chapter, has completed a training program as specified in Section 100155(c), holds a
20 current certification as a FP by the International Board of Specialty Certification (IBSC),
21 Board for Critical Care Transport Paramedic Certification (BCCTPC), who has a valid
22 license issued pursuant to this Chapter, and is accredited by a LEMSA in which their
23 paramedic service provider is based.

24
25 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.194, Health and Safety
26 Code. Reference: Sections 1797.84, 1797.172, 1797.185 and 1797.194, Health and
27 Safety Code.

28
29 **ARTICLE 2. GENERAL PROVISIONS**

30
31 **§ 100146. Scope of Practice of Paramedic.**

32 (a) A paramedic may perform any activity identified in the scope of practice of an EMT
33 in Chapter 2 of this Division, or any activity identified in the scope of practice of an
34 Advanced EMT (AEMT) in Chapter 3 of this Division without requiring a separate
35 certification.

36
37 (b) A licensed paramedic shall be affiliated with an approved paramedic service provider
38 in order to perform the scope of practice specified in this Chapter.

39
40 (c) A paramedic student or a licensed paramedic, as part of an organized EMS system,
41 while caring for patients in a hospital as part of his/her training or continuing education
42 (CE) under the direct supervision of a physician, registered nurse, or physician
43 assistant, or while at the scene of a medical emergency or during transport, or during
44 interfacility transfer, or while working in a small and rural hospital pursuant to Section
45 1797.195 of the Health and Safety Code, may perform the following procedures or

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1 administer the following medications when such are approved by the medical director of
2 the LEMSA and are included in the written policies and procedures of the LEMSA.

3
4 (1) Basic Scope of Practice:

5
6 (A) Utilize electrocardiographic devices and monitor electrocardiograms, including 12-
7 lead electrocardiograms (ECG).

8
9 (B) Perform defibrillation, synchronized cardioversion, and external cardiac pacing.

10
11 (C) Visualize the airway by use of the laryngoscope and remove foreign body(ies) with
12 Magill forceps.

13
14 (D) Perform pulmonary ventilation by use of lower airway multi-lumen adjuncts, the
15 esophageal airway, perilaryngeal airways, stomal intubation, and adult oral
16 endotracheal intubation.

17
18 (E) Utilize mechanical ventilation devices for continuous positive airway pressure
19 (CPAP)/bi-level positive airway pressure (BPAP) and positive end expiratory pressure
20 (PEEP) in the spontaneously breathing patient.

21
22 (F) Institute intravenous (IV) catheters, saline locks, needles, or other cannulae (IV
23 lines), in peripheral veins and monitor and administer medications through pre-existing
24 vascular access.

25
26 (G) Institute intraosseous (IO) needles or catheters.

27
28 (H) Administer IV or IO glucose solutions or isotonic balanced salt solutions, including
29 Ringer's lactate solution.

30
31 (I) Obtain venous blood samples.

32
33 (J) Use laboratory devices, including point of care testing, for pre-hospital screening use
34 to measure lab values including, but not limited to: glucose, capnometry, capnography,
35 and carbon monoxide when appropriate authorization is obtained from State and
36 Federal agencies, including from the Centers for Medicare and Medicaid Services
37 pursuant to the Clinical Laboratory Improvement Amendments (CLIA).

38
39 (K) Utilize Valsalva maneuver.

40
41 (L) Perform percutaneous needle cricothyroidotomy.

42
43 (M) Perform needle thoracostomy.

44
45 (N) Perform nasogastric and orogastric tube insertion and suction.

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- 1 (O) Monitor thoracostomy tubes.
2
- 3 (P) Monitor and adjust IV solutions containing potassium, equal to or less than 40
4 mEq/L.
5
- 6 (Q) Administer approved medications by the following routes: IV, IO, intramuscular,
7 subcutaneous, inhalation, transcutaneous, rectal, sublingual, endotracheal, intranasal,
8 oral or topical.
9
- 10 (R) Administer, using prepackaged products when available, the following medications:
11
- 12 1. 10%, 25% and 50% dextrose;
13
 - 14 2. activated charcoal;
15
 - 16 3. adenosine;
17
 - 18 4. aerosolized or nebulized beta-2 specific bronchodilators;
19
 - 20 5. amiodarone;
21
 - 22 6. aspirin;
23
 - 24 7. atropine sulfate;
25
 - 26 8. pralidoxime chloride;
27
 - 28 9. calcium chloride;
29
 - 30 10. diazepam;
31
 - 32 11. diphenhydramine hydrochloride;
33
 - 34 12. dopamine hydrochloride;
35
 - 36 13. epinephrine;
37
 - 38 14. fentanyl;
39
 - 40 15. glucagon;
41
 - 42 16. ipratropium bromide;
43
 - 44 17. lorazepam;
45
 - 46 18. midazolam;

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- 1
- 2 19. lidocaine hydrochloride;
- 3
- 4 20. magnesium sulfate;
- 5
- 6 21. morphine sulfate;
- 7
- 8 22. naloxone hydrochloride;
- 9
- 10 23. nitroglycerine preparations, except IV, unless permitted under (c)(2)(A) of this
- 11 section;
- 12
- 13 24. ondansetron;
- 14
- 15 25. sodium bicarbonate.
- 16

17 (S) In addition to the approved paramedic scope of practice, the CCP or FP may
18 perform the following procedures and administer medications, as part of the basic scope
19 of practice for interfacility transports when approved by the LEMSA medical director.
20 ~~when a licensed and accredited paramedic has completed a Critical Care Paramedic~~
21 ~~(CCP) training program as specified in Section 100160(b) and successfully completed~~
22 ~~competency testing, holds a current certification as a CCP from the BCCTPC, and other~~
23 ~~requirements as determined by the medical director of the LEMSA.~~

- 24
- 25 1. set up and maintain thoracic drainage systems;
- 26
- 27 2. set up and maintain mechanical ventilators;
- 28
- 29 3. set up and maintain IV fluid delivery pumps and devices;
- 30
- 31 4. blood and blood products;
- 32
- 33 5. glycoprotein IIB/IIIA inhibitors;
- 34
- 35 6. heparin IV;
- 36
- 37 7. nitroglycerin IV;
- 38
- 39 8. norepinephrine;
- 40
- 41 9. thrombolytic agents;
- 42
- 43 10. maintain total parenteral nutrition;
- 44
- 45 (2) Local Optional Scope of Practice:
- 46

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1 (A) Perform or monitor other procedure(s) or administer any other medication(s)
2 determined to be appropriate for paramedic use, ~~in the professional judgment of the~~ by
3 the medical director of the LEMSA, that have been approved by the Director of the
4 Authority. Paramedics shall demonstrate competency in performing these procedures
5 and administering these medications through training and successful testing. ~~when the~~
6 ~~paramedic has been trained and tested to demonstrate competence in performing the~~
7 ~~additional procedures and administering the additional medications.~~

8
9 (B) The medical director of the LEMSA shall submit a written request, Form #EMSA-
10 0391, revised 01/17, Revised 03/18/03 incorporated herein by reference, to, and obtain
11 approval from, the Director of the Authority for approval of any procedures or
12 medications proposed for use in accordance with Section 1797.172(b) of the Health and
13 Safety Code ~~for any procedures or medications proposed for use pursuant to this~~
14 ~~subsection prior to implementation, of these medication(s) and or procedure(s).~~

15
16 (C) The Authority shall, within fourteen (14) days of receiving Form #EMSA-
17 0391, revised 01/17, the request, notify the medical director of the LEMSA submitting
18 request Form #EMSA-0391 that the request form has been received and shall specify
19 what information, if any, is missing.

20
21 (D) The Director of the Authority, in consultation with the Emergency Medical Services
22 Medical Directors Association of California's (EMDAC) Scope of Practice Committee,
23 shall approve or disapprove the request for additional procedures and/or administration
24 of medications and notify the LEMSA medical director of the decision within ninety (90)
25 days of receipt of the completed request. Approval is for a three (3) year period and An
26 approved status shall be in effect for a period of three (3) years. An approved status
27 may be renewed for another three (3) year period, based on evidence from upon the
28 authority's receipt of a written request that includes, but is not limited to, the following
29 information: at a minimum the utilization of the procedure(s) or medication(s), beneficial
30 effects, adverse reactions or complications, appropriate statistical evaluation, and
31 general conclusion.

32
33 (E) The Director of the Authority, in consultation with the EMDAC Scope of Practice
34 Committee ~~a committee of the LEMSA medical directors named by the EMDAC~~
35 ~~Emergency Medical Directors Association of California,~~ may suspend or revoke
36 approval of any previously approved additional procedure(s) or medication(s) for cause.

37
38 (d) The medical director of the LEMSA may develop policies and procedures or
39 establish standing orders allowing the paramedic to initiate any paramedic activity in the
40 approved scope of practice without voice contact for medical direction from a physician,
41 authorized registered nurse, or mobile intensive care nurse (MICN), provided that an
42 EMSQIP, as specified in Chapter 12 of this Division, is in place. as specified in Chapter
43 12 of this Division.

1 Note: Authority cited: Sections 1797.107, 1797.172, 1797.185, 1797.192, 1797.195 and
2 1797.214, Health and Safety Code. Reference: Sections 1797.56, 1797.172, 1797.178
3 and 1797.185, Health and Safety Code.

4
5 **§ 100148. Responsibility of the LEMSA.**

6 (a) The LEMSA that authorizes an ALS program shall establish policies and procedures
7 approved by the medical director of the LEMSA that shall include:

8
9 ~~(a)~~ (1) Approval, denial, revocation of approval, suspension, and monitoring of the ALS
10 components of the EMS System such as training programs, base hospitals or
11 alternative base stations, and paramedic service providers.

12
13 ~~(b)~~ (2) Assurance of compliance with provisions of this Chapter. ~~Chapter by the~~
14 ~~paramedic program and the EMS system.~~

15
16 ~~(c)~~ (b) ~~Submission to the Authority, as changes occur, of the following information on~~
17 ~~the approved paramedic training programs: The LEMSA shall submit to the Authority,~~
18 along with any changes to, the following paramedic training program information:

19
20 (1) Name of program director and/or program contact;

21
22 (2) Program address ~~Address~~, phone number, email address, website address, and
23 facsimile number;

24
25 (3) Date of program approval, date classes will ~~initially~~ begin, and date of program
26 expiration.

27
28 (4) Date of Commission on Accreditation of Allied Health Education Programs
29 (CAAHEP) approval;

30
31 (5) Date of Bureau of Private Post-Secondary Education (BPPE) approval for private
32 post-secondary educational institutions;

33
34 (6) Issue date of Committee on Accreditation of Educational Programs for the
35 Emergency Medical Services Professions (CoAEMSP) letter of review (LoR).

36
37 ~~(d)~~ (c) Development or approval, implementation and enforcement of policies for
38 medical control, medical accountability, and an EMSQIP of the paramedic services,
39 including:

40
41 (1) Treatment and triage protocols.

42
43 (2) Patient care record and reporting requirements.

44
45 (3) Medical care audit system.

46

1 (4) Role and responsibility of the base hospital and paramedic service provider.

2
3 ~~(e)~~ (d) System data collection and evaluation.

4
5 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
6 Reference: Sections 1797.172, 1797.178, 1797.200, 1797.202, 1797.204, 1797.208,
7 1797.220, 1797.218 1798 and 1798.100, Health and Safety Code.

8
9 **ARTICLE 3. PROGRAM REQUIREMENTS FOR PARAMEDIC TRAINING**
10 **PROGRAMS**

11
12 **§ 100149. Approved Training Programs.**

13 (a) An approved paramedic training program or an institution eligible for paramedic
14 training program approval, as defined in Section 100149(j)(i) of this Chapter, may
15 provide CCP training upon approval by the paramedic training program approving
16 authority. The purpose of a paramedic training program shall be:

17
18 ~~The purpose of a paramedic training program shall be:~~

19
20 (1) to prepare individuals to render prehospital ALS within an organized EMS system;
21 and

22
23 (2) to prepare individuals to render critical care transport within an organized EMS
24 system

25
26 ~~(b) By January 1, 2004, all All approved paramedic training programs approved by a~~
27 ~~paramedic training program approving authority prior to January 1, 2000, shall be~~
28 ~~accredited and shall maintain current accreditation, or be in the process of receiving~~
29 ~~accreditation approval by the Commission on Accreditation of Allied Health Education~~
30 ~~Programs (CAAHEP), CAAHEP upon the recommendation of CoAEMSP the Committee~~
31 ~~on Accreditation of Educational Programs for the Emergency Medical Services~~
32 ~~Professions (CoAEMSP), in order to continue to operate as an approved paramedic~~
33 ~~training program.~~

34
35 (c) All approved paramedic training programs ~~shall: approved by a paramedic training~~
36 ~~program approving authority January 1, 2000, or thereafter shall submit their~~
37 ~~application, fee, and self-study to CoAEMSP for accreditation within twelve (12) months~~
38 ~~of the startup of classes and receive and maintain CAAHEP accreditation no later than~~
39 ~~two (2) years from the date of application to CoAEMSP for accreditation in order to~~
40 ~~continue to operate as an approved paramedic training program.~~

41 (1) Receive a Letter of Review (LoR) from CoAEMSP prior to starting classes; and

42
43 (2) Submit their application, fee, and Initial Self-Study Report (ISSR) to CoAEMSP for
44 accreditation within six (6) months of the first class' graduation; and

1 (3) Receive and maintain CAAHEP accreditation no later than two (2) years from the
2 date of the ISSR submission to CoAEMSP for accreditation.

3
4 (d) Paramedic training programs approved according to the provisions of this Chapter
5 shall provide the following information in writing to all their paramedic training program
6 applicants prior to the applicants' enrollment in the paramedic training program:
7

8 (1) ~~The date by which the paramedic training program must submit their CAAHEP~~
9 Request for Accreditation Services (RAS) form and ISSR application and self-study for
10 ~~initial accreditation or the date their application for accreditation renewal was sent to~~
11 CoAEMSP.

12
13 (2) ~~The date by which the paramedic training program must be initially accredited or the~~
14 date have their its accreditation must be renewed by CAAHEP.

15
16 ~~(3) (e) Failure of the paramedic training program to maintain its LoR, submit their RAS~~
17 form application and ISSR to CoAEMSP, self-study or obtain and maintain its their
18 accreditation renewal to CoAEMSP with CAAHEP, as described in 100149(c), by the
19 date specified will shall result in withdrawal of program approval as specified in Section
20 100162 of this Chapter. closure of the paramedic training program by their respective
21 paramedic training program approving authority, unless the paramedic training program
22 approving authority has approved a plan for meeting compliance as provided in Section
23 100157 of this Chapter. When a paramedic training program approval is revoked under
24 this provision, the paramedic training program course director must demonstrate to the
25 satisfaction of their respective paramedic training program approving authority that the
26 deficiency for which the paramedic training program approval was revoked has been
27 rectified before submitting a new application for paramedic training program approval.
28

29 ~~(4) Failure of the paramedic training program to obtain or maintain CAAHEP~~
30 accreditation by the required date will result in closure of the paramedic training
31 program by their respective paramedic training program approving authority, unless the
32 paramedic training program approving authority has approved a plan for meeting
33 compliance as provided in Section 100157 of this Chapter. When a paramedic training
34 program approval has been revoked under this provision, the paramedic training
35 program course director must demonstrate to the satisfaction of their respective
36 paramedic training program approving authority that the deficiency for which the
37 paramedic training program approval was revoked has been rectified before submitting
38 a new application for paramedic training program approval.
39

40 ~~(5) (f) Students graduating from a paramedic training program that fail to apply, receive,~~
41 for accreditation with, receive accreditation from, or maintain CAAHEP accreditation
42 with, CAAHEP by the dates required will not be eligible for state licensure as a
43 paramedic.
44

45 ~~(e) (g) Paramedic training programs shall submit to their respective paramedic training~~
46 program approving authority all documents submitted to, and received from, CoAEMSP

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1 and CAAHEP for accreditation, including but not limited to, the RAS form, ISSR, and
2 ~~initial application and self-study for accreditation and the documents required for~~
3 maintaining accreditation.

4
5 ~~(f)~~ (h) Paramedic training programs shall submit to the Authority the date their initial
6 RAS form application was submitted to CoAEMSP and copies of documentation
7 received from CoAEMSP and/or CAAHEP verifying accreditation.

8
9 ~~(g) Paramedic training program approving authorities shall revoke approval, in~~
10 ~~accordance with Section 100162 of this Chapter, of any paramedic training program~~
11 ~~which fails to comply with subsections (b) through (e) of this Section.~~

12
13 ~~(h)~~ (i) Approved paramedic training programs shall participate in the EMSQIP of their
14 respective paramedic training program approving authority. ~~In addition, an approved~~
15 ~~paramedic training program, which is conducting a paramedic training program outside~~
16 ~~the jurisdiction of their approving authority, shall also agree to participate in the EMSQIP~~
17 ~~of the LEMSA which has jurisdiction where the paramedic training program is being~~
18 ~~conducted.~~

19
20 ~~(i)~~ (j) Eligibility for program approval shall be limited to the following institutions:

21
22 (1) Accredited universities, colleges, including junior and community colleges, and
23 private post-secondary schools as approved by the State of California, Department of
24 Consumer Affairs, and Bureau for Private Postsecondary Education.

25
26 (2) Medical training units ~~of a branch~~ of the United States Armed Forces or Coast Guard
27 ~~of the United States.~~

28
29 (3) Licensed general acute care hospitals which meet the following criteria:

30
31 (A) Hold a special permit to operate a basic or comprehensive emergency medical
32 service pursuant to the provisions of Division 5;

33
34 (B) Provide continuing education (CE) to other health care professionals; and

35
36 (C) are accredited by a Centers for Medicare and Medicaid Services approved with
37 deeming authority.

38
39 (4) Agencies of government.

40
41 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.173, Health and Safety
42 Code. Reference: Sections 1797.172, 1797.173, 1797.208 and 1797.213, Health and
43 Safety Code.

44
45 **§ 100150. Teaching Staff.**

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1 (a) Each training program shall have ~~an approved~~ a program medical director who shall
2 ~~be is~~ is a physician currently licensed in the State of California, ~~who has two (2) years'~~
3 ~~experience in emergency medicine prehospital care in the last five (5) years, and who is~~
4 ~~qualified by~~ has education or experience in methods of instruction. Duties of the
5 program medical director shall include, but not be limited to the following:

6
7 (1) Review and approve educational content of the program curriculum, including
8 training objectives for the clinical and field instruction, to certify its ongoing
9 appropriateness and medical accuracy.

10
11 (2) Review and approve the quality of medical instruction, supervision, and evaluation of
12 the students in all areas of the program.

13
14 (3) Approval of hospital clinical and field internship experience provisions. ~~provision for~~
15 ~~hospital clinical and field internship experiences.~~

16
17 (4) Approval of principal instructor(s).

18
19 (b) Each training program shall have ~~an approved~~ a course program director who shall
20 ~~be licensed in California as a physician, is either a California licensed physician, a~~
21 ~~registered nurse who has a baccalaureate degree, or a paramedic who has a~~
22 ~~baccalaureate degree, or shall be an individual who holds a baccalaureate degree in a~~
23 ~~related health field or in~~ field or in education field. The ~~course program~~ director shall be
24 qualified by education and experience in methods, materials, and evaluation of
25 instruction, and shall have a minimum of one (1) year experience in an administrative or
26 management level position, and have a minimum of three (3) years academic or clinical
27 experience in prehospital care education. ~~within the last five (5) years.~~ Duties of the
28 ~~course program~~ director shall include, but not be limited to the following:

29
30 (1) Administration, organization and supervision of the educational program.

31
32 (2) In coordination with the program medical director, approve the principal instructor(s),
33 teaching assistants, field and hospital clinical preceptors, clinical and internship
34 assignments, and coordinate the development of curriculum, including instructional
35 objectives, and approve all methods of evaluation.

36
37 (3) Ensure training program compliance with this chapter and other related laws.

38
39 (4) Sign all course completion records.

40
41 (5) Ensure ~~that~~ the preceptor(s) are trained according to the curriculum in subsection
42 (e)(4).

43
44 (c) Each training program shall have a principal instructor(s), who is responsible for
45 areas including, but not limited to, curriculum development, course coordination, and
46 instruction and shall meet the following criteria: ~~may also be the program medical~~

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1 ~~director or course director if the qualifications in subsections (a) and (b) are met, who~~
2 ~~shall:~~

3
4 (1) Be a physician, registered nurse, physician assistant, or paramedic, currently
5 certified or licensed in the State of California.

6
7 (2) Be knowledgeable in the course content of the January 2009 United States
8 Department of Transportation (U.S. DOT) National Emergency Medical Services
9 Education Standards DOT HS 811 077 EA, ~~January 2009~~, herein incorporated by
10 reference; and

11
12 (3) Have six (6) years of experience in an allied health field and an associate degree or
13 two (2) years of experience in an allied health field and a baccalaureate degree.

14
15 ~~(4) Instructors of tactical casualty care (TCC) topics shall be qualified by education and~~
16 ~~experience in TCC methods, materials, and evaluation of instruction.~~

17
18 ~~(4) Be responsible for areas including, but not limited to, curriculum development,~~
19 ~~course coordination, and instruction.~~

20
21 ~~(5)~~(4) Be qualified by education and experience with at least forty (40) hours of
22 documented teaching methodology instruction in areas related to methods, materials,
23 and evaluation of instruction. ~~in methods, materials, and evaluation of instruction, which~~
24 ~~shall be documented by at least forty (40) hours of instruction in teaching methodology.~~
25 Following, but not limited to, are examples of courses that meet the required instruction
26 in teaching methodology:

27
28 (A) California State Fire Marshal (CSFM) "Training Instructor 1A, 1B, and 1C";

29
30 (B) National Fire Academy (NFA) "Fire Service Instructional Methodology" course; and

31
32 (C) A course that meets the U. S. Department of Transportation/National Highway
33 Traffic Safety Administration 2002 Guidelines for Educating EMS Instructors, such as
34 the National Association of EMS Educators' EMS Educator Course.

35
36 ~~(6)~~(5) A Principal Instructor may also be the program medical director or program
37 director.

38
39 (d) Each CCP training program shall have a principal instructor(s) who ~~shall be~~ is either
40 licensed in California as a physician ~~and~~ with knowledgeable in the subject matter, a
41 registered nurse knowledgeable in the subject matter, or a paramedic with current CCP
42 certification or a flight paramedic (FP) FP certification from the BGCTPGInternational
43 Board of Specialty Certification (IBSC) Board for Critical Care Transport Paramedic
44 Certification (BCCTPC).

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1 (e) Each training program may have a teaching assistant(s) who ~~shall be an~~
2 ~~individual(s) qualified by~~ has training and experience to assist with teaching of the
3 course. A The teaching assistant(s) shall be supervised by a principal instructor, the
4 ~~course~~ program director and/or the program medical director.

5
6 (f) Each training program may have a clinical coordinator(s) who is either a Physician,
7 Registered Nurse, Physician Assistant, or a Paramedic currently licensed in California,
8 and who shall have two (2) years of academic or clinical experience in emergency
9 medicine or prehospital care. Duties of the program clinical coordinator shall include,
10 but not be limited to, the following:

11
12 (1) The coordination and scheduling of students with qualified clinical preceptors in
13 approved clinical settings as described in Section 100152.

14
15 (2) Ensuring adequate clinical resources exist for student exposure to the minimum
16 number and type of patient contacts established by the program as required for
17 continued CAAHEP accreditation.

18
19 (3) The tracking of student internship evaluation and terminal competency documents.

20
21 ~~(f)-(g)~~ Each paramedic training program shall have a field preceptor(s) who meets the
22 following criteria: ~~shall:~~

23
24 (1) Be a certified or licensed paramedic; and

25
26 (2) Be working in the field as a certified or licensed paramedic for the last two (2) years;
27 and

28
29 (3) Be under the supervision of a principal instructor, the ~~course~~ program director and/or
30 the program medical director; ~~and director.~~

31
32 (4) Have completed a field preceptor training program approved by the LEMSA ~~and/or~~
33 ~~comply one that complies with the field preceptor guidelines approved by the LEMSA in~~
34 accordance with **CoAEMSP guidelines CAAHEP Standards and Guidelines for the**
35 **Accreditation of Educational Programs in the Emergency Medical Services**
36 **Professions (2015).** Training shall include a curriculum that will result in the preceptor
37 competency in the evaluation of paramedic students during the internship phase of the
38 training program and the completion of the following: ~~being competent to evaluate the~~
39 ~~paramedic student during the internship phase of the training program, and how to do~~
40 ~~the following in cooperation with the paramedic training program:~~

41
42 (A) Conduct a daily field evaluation of students.

43
44 (B) Conduct cumulative and final field evaluations of all students.

45
46 (C) Rate students for evaluation using written field criteria.

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- 1
- 2 (D) Identify ALS contacts and requirements for graduation.
- 3
- 4 (E) Identify the importance of documenting student performance.
- 5
- 6 (F) Review the field preceptor requirements contained in this Chapter.
- 7
- 8 (G) Assess student behaviors using cognitive, psychomotor, and affective domains.
- 9
- 10 (H) Create a positive and supportive learning environment.
- 11
- 12 (I) Measure students against the standards of entry level paramedics.
- 13
- 14 (J) Identify appropriate student progress.
- 15
- 16 (K) Counsel the student who is not progressing.
- 17
- 18 (L) Identify training program support services available to the student and the preceptor.
- 19
- 20 (M) Provide guidance and applicable procedures to address student injuries or for
21 ~~dealing with an injured student or student who has had an exposure to illness,~~
22 communicable disease or hazardous material.
- 23
- 24 ~~(g)~~ (h) Each training program shall have a hospital clinical preceptor(s) who shall meet
25 the following criteria:
- 26
- 27 (1) Be a physician, registered nurse or physician assistant currently licensed in the
28 State of California.
- 29
- 30 (2) Have worked in emergency medical care services or areas of medical specialization
31 for the last two (2) years.
- 32
- 33 (3) Be under the supervision of a principal instructor, the course director, and/or the
34 program medical director.
- 35
- 36 (4) Receive training instruction in the evaluation of evaluating paramedic students in the
37 clinical settings. ~~Means of instruction~~ Instructional tools may include, but need not be
38 limited to, educational brochures, orientation, training programs, or training videos, and
39 Training shall include the following components of instruction: how to do the following in
40 cooperation with the paramedic training program:
- 41
- 42 (A) Evaluate a student's ability to safely administer medications and perform
43 assessments.
- 44
- 45 (B) Document a student's performance.
- 46

- 1 (C) Review clinical preceptor requirements contained in this Chapter.
2
3 (D) Assess student behaviors using cognitive, psychomotor, and affective domains.
4
5 (E) Create a positive and supportive learning environment.
6
7 (F) Identify appropriate student progress.
8
9 (G) Counsel the student who is not progressing.
10
11 (H) Provide guidance and ~~applicable~~ procedures for addressing student injuries or
12 dealing with an injured student or student who has had an exposure to illness,
13 communicable disease or hazardous material.

14
15 (i) Instructors of tactical casualty care (TCC) topics shall be qualified by education and
16 experience in TCC methods, materials, and evaluation of instruction.
17

18 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
19 Reference: Sections 1797.172 and 1797.208, Health and Safety Code.
20

21 **§ 100153. Field Internship.**

22 (a) A field internship shall provide emergency medical care training and experience to
23 paramedic students under continuous supervision, instruction, and evaluation by an
24 authorized preceptor and shall promote student competency in medical procedures,
25 techniques, and the administration of medications as supervised at all times by an
26 authorized field preceptor to result in the paramedic student being competent to provide
27 the medical procedures, techniques, and medications specified in Section 100146, in
28 the prehospital emergency setting within an organized EMS system.
29

30 (b) An approved paramedic training program shall enter into a written agreement with a
31 paramedic service provider(s) that provide field internship services to students. to
32 provide for field internship, as well as for a field preceptor(s) to directly supervise,
33 instruct, and evaluate the students. The assignment of a student to a field preceptor
34 shall be a collaborative effort between the training program and the provider agency. If
35 the paramedic service provider is located outside the jurisdiction of the paramedic
36 training program approving authority, then the training program shall do the following:
37 This agreement shall include provisions to ensure compliance of this Chapter.
38

39 (c) The medical director of the LEMSA where the internship is located shall have
40 medical control over the paramedic intern.
41

42 (d) The assignment of a student to a field preceptor shall be a collaborative effort
43 between the training program and the provider agency.
44

45 (1) The assignment of a student to a field preceptor shall be limited to duties associated
46 with the student's training or the student training program.

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1
2 (e) If the paramedic service provider is located outside the jurisdiction of the paramedic
3 training program approving authority, the paramedic training program shall do the
4 following:

5
6 (1) Ensure the student intern receives orientation in collaboration with the LEMSA in
7 which where the field internship will occur, ~~ensure that the student has been oriented~~
8 ~~to that LEMSA,~~ The orientation shall include that LEMSA's local policies, and
9 procedures, and treatment protocols,

10
11 (2) ~~contact the LEMSA where the paramedic service provider is located and r~~ Report to
12 that the LEMSA, where the field internship will occur, the name of the paramedic intern
13 in their jurisdiction, the name of the ~~EMS~~ field internship provider, and the name of the
14 preceptor. ~~The paramedic intern shall be under the medical control of the medical~~
15 ~~director of the LEMSA in which the internship occurs.~~

16
17 ~~(e) (3) The training program shall be responsible for ensuring that the filed~~ Ensure the
18 field preceptor has the experience and training as required in Section 100150(g)(1) -(4).

19
20 ~~(d) (f) The paramedic training program shall not enroll any more students than the~~
21 ~~training program can commit to providing a filed internship to begin no later than ninety~~
22 ~~(90) days after a student's completion of the hospital clinical education and training~~
23 ~~portion of the training program.~~ enroll only the number of students it is able to place in
24 field internships within ninety (90) days of completion of their hospital clinical education
25 and training phase of the training program. The training program director and a student
26 may mutually agree to start the field internship at a later date, ~~for the filed internship to~~
27 ~~begin~~ in the event of special circumstances (e.g., student or preceptor illness or injury,
28 student's military duty, etc.). This agreement shall be in writing.

29
30 ~~(e) For at least half of the ALS patient contacts specified in Section 100154(b) the~~
31 ~~paramedic student shall be required to provide the full continuum of care of the patient~~
32 ~~beginning with the initial contact with the patient upon arrival at the scene through~~
33 ~~release of the patient to a receiving hospital or medical care facility.~~

34
35 ~~(f) (g) All interns,~~ The internship, regardless of the location, shall be continuously
36 monitored by the training program staff, in collaboration with the assigned field
37 preceptor, ~~regardless of the location of the internship, as described in written~~
38 ~~agreements between the training program and the internship provider.~~ The training
39 program shall document a student's progress, based on the assigned field preceptor's
40 input, and identify specific weaknesses of the student, if any, and/or problems
41 encountered by, or with, the student. Documentation of the student's progress, including
42 any identified weaknesses or problems, shall be provided to the student at least twice
43 during the student's field internship.

44
45 (h) Training program staff shall, upon receiving input from the assigned field preceptor,
46 document the progress of the student. Documentation shall include the identification of

1 student deficiencies and strengths and any training program obstacles encountered by,
2 or with, the student.

3
4 (i) Training program staff shall provide documentation reflecting student progress to the
5 student at least twice during the student's internship.

6
7 ~~(g)~~ (j) No more than one (1) EMT-trainee, of any level, shall be assigned to a response
8 vehicle at any one time during the paramedic student's field internship.

9
10 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.173, Health and Safety
11 Code. Reference: Sections 1797.172, 1797.173 and 1797.208, Health and Safety Code.

12
13 **§100154. Required Course Hours.**

14 (a) The total paramedic training program shall consist of not less than ~~one thousand and~~
15 ~~ninety (1090)~~ one thousand and ninety-four (1094) hours. These training hours shall be
16 divided into:

17
18 (1) A minimum of four-hundred and fifty-four ~~(450)~~ (454) hours of didactic instruction
19 and skills laboratories that shall include not less than four (4) hours of training in tactical
20 casualty care principles as provided in Section 100155(b);

21
22 (2) The hospital clinical training shall consist of no less than one-hundred and sixty
23 (160) hours; ~~and the field internship shall consist of no less than four-hundred and~~
24 ~~eighty (480) hours.~~

25
26 (3) The field internship shall consist of no less than four-hundred and eighty (480)
27 hours.

28
29 (b) The student shall have a minimum of forty (40) documented ALS patient contacts
30 during the field internship as specified in Section 100153. An ALS patient contact shall
31 be defined as the student performance of one or more ALS skills, except cardiac
32 monitoring and CPR, on a patient.

33
34 (1) When available, up to ten (10) of the required ALS patient contacts may be satisfied
35 through the use of high fidelity adult simulation patient contacts as defined in Section
36 100141.1.

37
38 (2) Students shall document patient contacts utilizing an EHR system under supervision
39 of the preceptor.

40
41 (c) The student shall have a minimum of ~~ten (10)~~ twenty (20) documented experiences
42 performing the role of team lead during the field internship. A team lead shall be defined
43 as a student who, with minimal to no prompting by the preceptor, successfully takes
44 charge of EMS operation in the field including, but not limited to, the following:

45
46 (1) Lead coordination of field personnel,

1
2 (2) Formulation of field impression,

3
4 (3) Comprehensively assessing patient conditions and acuity.

5
6 (4) Directing and implementing patient treatment,

7
8 (5) Determining patient disposition, and

9
10 (6) Leading the packaging and movement of the patient.

11
12 (d) The minimum hours shall not include the following:

13
14 (1) Course material designed to teach or test exclusively EMT knowledge or skills
15 including CPR.

16
17 (2) Examination for student eligibility.

18
19 (3) The teaching of any material not prescribed in Section 100155 ~~400160~~ of this
20 Chapter.

21
22 (4) Examination for paramedic licensure.

23
24 (e) The total CCP training program shall consist of not less than two-hundred and two
25 (202) hours. These training hours shall be divided into:

26
27 (1) A minimum of one-hundred and eight (108) hours of didactic and skills laboratories;
28 and

29
30 (2) No less than ninety-four (94) hours of hospital clinical training as prescribed in
31 Section 100152(b) of this Chapter.

32
33 (f) For at least half of the ALS patient contacts specified in Section 100154(b) the
34 paramedic student shall be required to provide the full continuum of care of the patient
35 beginning with the initial contact with the patient upon arrival at the scene through
36 transfer of care to hospital personnel.

37
38 Note: Authority cited: Sections 1797.107 ~~and~~, 1797.172, and 1797.173, Health and
39 Safety Code. Reference: Section 1797.172 and 1797.173, Health and Safety Code.

40
41 **§ 100155 Required Course Content.**

42 (a) The content of a paramedic course shall meet the objectives contained in the
43 January 2009 U.S. Department of Transportation (DOT) National Emergency Medical
44 Services Education Standards, DOT HS 811 077~~EA~~, ~~January 2009, to result in the~~ and
45 be consistent with ~~paramedic being competent in~~ the paramedic basic scope of practice
46 specified in Section 100146(a) of this Chapter. The DOT HS 811 077 EA can be

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1 accessed through the U.S. DOT National Highway Traffic Safety Administration at the
2 following National Highway Traffic Safety Administration website address:

3 <http://www.ems.gov/education/nationalstandardandnics.html>

4 <http://www.nhtsa.gov/>

5
6 (b) In addition to the above, the content of the training course shall include a minimum
7 of four (4) hours of tactical casualty care (TCC) principles applied to violent
8 circumstances with at least the following topics and skills and shall be competency
9 based:

10
11 (1) History and Background of Tactical Casualty Care

12
13 (A) Demonstrate knowledge of tactical casualty care

14
15 1. History of active shooter and domestic terrorism incidents

16
17 2. Define roles and responsibilities of first responders including Law Enforcement, Fire
18 and EMS.

19
20 3. Review of local active shooter policies

21
22 4. Scope of Practice and Authorized Skills and procedures by level of training,
23 certification, and licensure zone

24
25 (2) Terminology and definitions

26
27 (A) Demonstrate knowledge of terminology

28
29 1. Hot zone/warm zone/cold zone

30
31 2. Casualty collection point

32
33 3. Rescue task force

34
35 4. Cover/concealment

36
37 (3) Coordination, Command and Control

38
39 (A) Demonstrate knowledge of Incident Command and how agencies are integrated into
40 tactical operations.

41
42 1. Demonstrate knowledge of team command, control and communication

43
44 a. Incident Command System (ICS) /National Incident Management System (NIMS)

45
46 b. Mutual Aid considerations

- 1
- 2 c. Unified Command
- 3
- 4 d. Communications, including radio interoperability
- 5
- 6 e. Command post
- 7
- 8 f. Staging areas
- 9
- 10 g. Ingress/egress
- 11
- 12 h. Managing priorities
- 13
- 14 (4) Tactical and Rescue Operations
- 15
- 16 (A) Demonstrate knowledge of tactical and rescue operations
- 17
- 18 1. Tactical Operations – Law Enforcement
- 19
- 20 a. The priority is to mitigate the threat
- 21
- 22 b. Contact Team
- 23
- 24 c. Rescue Team
- 25
- 26 2. Rescue Operations – Law Enforcement/EMS/Fire
- 27
- 28 a. The priority is to provide life-saving interventions to injured parties
- 29
- 30 b. Formation of Rescue Task Force (RTF)
- 31
- 32 c. Casualty collection points
- 33
- 34 (5) Basic Tactical Casualty Care and Evacuation
- 35
- 36 (A) Demonstrate appropriate casualty care at your scope of practice and certification
- 37
- 38 1. Demonstrate knowledge of the components of the Individual First Aid Kit (IFAK)
- 39 and/or medical kit.
- 40
- 41 2. Understand the priorities of Tactical Casualty Care as applied by zone.
- 42
- 43 3. Demonstrate competency through practical testing of the following medical treatment
- 44 skills:
- 45
- 46 a. Bleeding control

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- 1
- 2 b. Apply Tourniquet
- 3
- 4 i. Self-Application
- 5
- 6 ii. Application on others
- 7
- 8 c. Apply Direct Pressure
- 9
- 10 d. Apply Pressure Dressing
- 11
- 12 e. Apply Hemostatic Dressing with Wound Packing, utilizing California EMSA-approved
- 13 products
- 14
- 15 2. Airway and Respiratory management
- 16
- 17 a. Perform Chin Lift/Jaw Thrust Maneuver
- 18
- 19 b. Recovery position
- 20
- 21 c. Position of comfort
- 22
- 23 d. Airway adjuncts
- 24
- 25 3. Chest/torso wounds
- 26
- 27 a. Apply Chest Seals, vented preferred
- 28
- 29 4. Demonstrate competency in patient movement and evacuation.
- 30
- 31 a. Drags and lifts.
- 32
- 33 b. Carries
- 34
- 35 5. Demonstrate knowledge of local multi-casualty/mass casualty incident protocols.
- 36
- 37 a. Triage procedures (START or SALT).
- 38
- 39 b. Casualty Collection Point.
- 40
- 41 c. Triage, Treatment and Transport.
- 42
- 43 (6) Threat Assessment.
- 44
- 45 (A) Demonstrate knowledge in threat assessment.
- 46

1 1. Understand and demonstrate knowledge of situational awareness

2
3 2. Pre-assessment of community risks and threats.

4
5 3. Pre-incident planning and coordination

6
7 4. Medical resources available.

8
9 (b)(c) The content of the CCP course shall include:

10
11 * * * * *

12
13 (d) Training programs in operation prior to the effective date of these regulations shall
14 submit evidence of compliance with this Chapter to the appropriate approving authority
15 as specified in Section 100137 of this Chapter within twelve (12) months after the
16 effective date of these regulations.

17
18 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
19 Reference: Sections 1797.172, 1797.173, 1797.185 and 1797.213, Health and Safety
20 Code.

21
22 **§ 100156. Required Testing.**

23 (a) Approved paramedic and CCP training programs shall include ~~periodic~~ a minimum of
24 two (2) formative examinations and one (1) final comprehensive competency-based
25 examinations to test the knowledge and skills specified in this Chapter.

26
27 (b) ~~Documentation of~~ successful student clinical and field internship performance in
28 ~~the clinical and field setting~~ shall be required prior to course completion.

29
30 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.185, Health and Safety
31 Code. Reference: Sections 1797.172, 1797.185, 1797.208, 1797.210 and 1797.213,
32 Health and Safety Code.

33
34 **§ 100157. Course Completion Record.**

35 (a) ~~Approved paramedic training program and/or CCP training program shall issue a~~ A
36 tamper resistant course completion record shall be issued to each person who has
37 successfully completed the paramedic training program and/or CCP training program.
38 The course completion record shall be issued no later than ten (10) working days from
39 the date of the student's ~~successfully completion of~~ completes the paramedic and/or
40 CCP training program.

41
42 (b) The course completion record shall contain the following:

43
44 (1) The name of the individual.

45
46 (2) The date of completion.

1
2 (3) The following statement:

3
4 (A) "The individual named on this record has successfully completed an approved
5 paramedic training program", or

6
7 (B) "The individual named on this record has successfully completed an approved
8 Critical Care Paramedic training program."

9
10 (4) The name of the ~~paramedic training program or CCP training program~~ approving
11 authority, ~~depending on the training program being taught.~~

12
13 (5) The signature of the ~~course~~program director.

14
15 (6) The name and location of the training program issuing the record.

16
17 (7) The following statement in bold print: "This is not a paramedic license."

18
19 (8) For paramedic training, a list of the approved optional scope of practice procedures
20 and/or medications taught in the course ~~approved~~ pursuant to subsection (c)(2)(A)-(D)
21 of Section 100146. ~~taught in the course.~~

22
23 (9) For CCP training, a list of the approved procedures and medications taught in the
24 course ~~approved~~ pursuant to subsection (c)(1)(S)(1-10) of Section 100146. ~~taught in the~~
25 ~~course.~~

26
27 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
28 Reference: Section 1797.172, Health and Safety Code.

29
30 **§ 100158. Student Eligibility.**

31 (a) To be eligible to enter a paramedic training program an individual shall meet the
32 following requirements:

33
34 (1) Possess a high school diploma or general education equivalent; and

35
36 (2) possess a current basic cardiac life support (CPR) card equivalent to the current
37 American Heart Association's Guidelines for Cardiopulmonary Resuscitation and
38 Emergency Cardiovascular Care at the healthcare provider level; and

39
40 (3) possess a current EMT certificate or NREMT-Basic registration; or

41
42 (4) possess a current AEMT certificate in the State of California; or

43
44 (5) be currently registered as an Advanced-EMT ~~Intermediate~~ with the NREMT.

45
46 ~~(b) Starting January 1, 2021, the following prerequisites shall be met:~~

1
2 ~~(1) A college level course in introductory human anatomy and physiology with lab, and~~

3
4 ~~(2) A college level course in introductory psychology.~~

5
6 ~~(b)(c)(b)~~ To be eligible to enter a CCP training program an individual shall be currently
7 licensed, and accredited, in California as a paramedic with three (3) years of basic
8 paramedic practice.

9
10 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
11 Reference: Sections 1797.172 and 1797.208, Health and Safety Code.

12
13 **§ 100159. Procedure for Training Program Approval.**

14 (a) Eligible training institutions, as defined in Section 100149(j), shall submit a written
15 request for training program approval to the paramedic training program approving
16 authority. ~~A paramedic training program approving authority may deem a training~~
17 ~~program approved that has been accredited by the CAAHEP upon submission of proof~~
18 ~~of such accreditation, without requiring the paramedic training program to submit for~~
19 ~~review the information required in subsections (b) and (c) of this section.~~

20
21 (b) The paramedic training program approving authority shall receive and review the
22 following documentation prior to program approval:

23
24 (1) ~~A statement verifying that the course content meets the requirements contained in~~
25 ~~the U.S. DOT National Education Standards DOT HS 811 077 EA January 2009.~~

26
27 ~~(2) A statement verifying that the CCP training program course content meets the~~
28 ~~requirements contained in Section 100160(b) of this Chapter. The CCP training program~~
29 ~~must also verify compliance with Subsections (b)(3)-(b)(6) and (b)(8)-(b)(9) of this~~
30 ~~Section.~~

31
32 ~~(3) (2)~~ An outline of course objectives.

33
34 ~~(4) (3)~~ Performance objectives for each skill.

35
36 ~~(5) (4)~~ The names and qualifications of the training program ~~course~~ director, program
37 medical director, and principal instructors.

38
39 ~~(6) (5)~~ Provisions for supervised hospital clinical training including student evaluation
40 criteria and standardized forms for evaluating paramedic students; and monitoring of
41 preceptors by the training program.

42
43 ~~(7) (6)~~ Provisions for supervised field internship including student evaluation criteria and
44 standardized forms for evaluating paramedic students; and monitoring of preceptors by
45 the training program.

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- 1 ~~(8)~~ (7) The location at which the courses are to be offered and their proposed dates.
2
- 3 ~~(9)~~ (8) Written agreements between the paramedic training program and a hospital(s)
4 and other clinical setting(s), if applicable, for student placement for clinical education
5 and training.
6
- 7 ~~(10)~~ (9) Written contracts or agreements between the paramedic training program and a
8 provider agency (ies) for student placement for field internship training.
9
- 10 (11) (10) A copy of an approved CoAEMSP LoR issued to the training institution
11 applying for approval or documentation of current CAAHEP accreditation.
12
- 13 ~~(c)~~ (c) The paramedic training program approving authority shall review the following prior
14 to program approval:
15
- 16 ~~(1)~~ (11) Samples of written and skills examinations administered by the training
17 program, for periodic testing.
18
- 19 ~~(2)~~ (12) Samples of a A final written examination administered by the training program.
20
- 21 ~~(3)~~ (13) Evidence that the training program provides of adequate training program
22 facilities, equipment, examination securities security and student record keeping.
23
- 24 (14) CCP programs shall submit a statement verifying the CCP training program course
25 content complies with the requirements of subsection 100155(c) of this Chapter and
26 documentation listed in subsections (b)(2)(B)(C)(D)(E)(G) and (H) of this Section, If
27 applicable.
28
- 29 ~~(d)~~ (c) The paramedic training program approving authority shall submit to the Authority
30 an outline of program objectives and eligibility on each training program being proposed
31 for approval in order to allow the Authority to make the determination required by
32 section 1797.173 of the Health and Safety Code. Upon request by the Authority, any or
33 all materials submitted by the training program shall be submitted to the Authority.
34
- 35 (d) Paramedic training programs will be approved by meeting all requirements in
36 subsection (b) of this section. Notification of program approval or deficiencies with the
37 application shall be made in writing by the paramedic training program approving
38 authority to the requesting training program in a time period not to exceed ninety (90)
39 days.
40
- 41 (e) The paramedic training program approving authority shall establish the effective date
42 of program approval in writing upon the satisfactory documentation of compliance with
43 all program requirements.
44

1 (f) Paramedic training program approval shall be valid for four (4) years ending on the
2 last day of the month in which it was issued and may be renewed every four (4) years
3 subject to the procedure for program approval specified in Section 100159(b).
4

5 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
6 Reference: Sections 1797.172, 1797.173 and 1797.208, Health and Safety Code; and
7 Section 15376, Government Code.
8

9 **§ 100160. Program Review and Reporting.**

10 (a) All program materials specified in this Chapter shall be subject to ~~periodic~~ review by
11 the paramedic training program approving authority and ~~may~~ shall also be made
12 available for review ~~reviewed~~ upon request by the Authority.
13

14 (b) All programs shall be subject to ~~periodic~~ on-site evaluation by the paramedic
15 approving authority and may also be evaluated by the Authority.
16

17 (c) Any person or agency, conducting a training program shall provide written
18 notification of changes to ~~notify~~ the paramedic training program approving authority ~~in~~
19 ~~writing, in advance when possible, and in all cases within thirty (30) days of any change~~
20 ~~in~~ of course objectives, hours of instruction, ~~course program~~ director, program medical
21 director, principal instructor, provisions for hospital clinical experience, or field
22 internship. Written notification shall be provided in advance, when possible, and no later
23 than thirty (30) days after a change(s) has been identified.
24

25 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
26 Reference: Sections 1797.172, 1797.173 and 1797.208, Health and Safety Code.
27

28 **§ 100161. Paramedic Training Program Approval.**

29 ~~(a) The paramedic training program approving authority shall, within thirty (30) working~~
30 ~~days of receiving a request for training program approval, notify the requesting training~~
31 ~~program that the request has been received, and shall specify what information, if any,~~
32 ~~is missing.~~
33

34 ~~(b) Paramedic training program approval or disapproval shall be made in writing by the~~
35 ~~paramedic training program approving authority to the requesting training program after~~
36 ~~receipt of all required documentation. This time period shall not exceed three (3)~~
37 ~~months.~~
38

39 ~~(c) The paramedic training program approving authority shall establish the effective date~~
40 ~~of program approval in writing upon the satisfactory documentation of compliance with~~
41 ~~all program requirements.~~
42

43 ~~(d) Paramedic training program approval shall be for four (4) years following the~~
44 ~~effective date of approval and may be renewed every four (4) years subject to the~~
45 ~~procedure for program approval specified in this chapter.~~
46

1 ~~Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.~~
2 ~~Reference: Sections 1797.172, 1797.173 and 1797.208, Health and Safety Code; and~~
3 ~~Section 15376, Government Code.~~

4
5 **§ 100162. Withdrawal of Program Approval.**

6 ~~(a) Noncompliance with any criterion required for program approval, use of any~~
7 ~~unqualified teaching personnel, or noncompliance with any other applicable Failure to~~
8 ~~comply with the provisions of this Chapter may result in denial, probation, suspension or~~
9 ~~revocation of program approval by the paramedic training program approving authority.~~
10 ~~Notification of noncompliance and action to place on probation, suspend or revoke shall~~
11 ~~be done as follows:~~

12
13 (b) The requirements for training program noncompliance notification and actions are as
14 follows:

15
16 (1) A paramedic training program approving authority shall provide written notification of
17 noncompliance ~~notify the approved training program course director in writing, by~~
18 ~~certified mail, of the provisions of with this Chapter with which to the paramedic training~~
19 ~~program provider found in violation. The notification shall be in writing and sent by~~
20 ~~certified mail to the paramedic training program ~~course~~ director.~~ ~~is not in compliance.~~

21
22 (2) Within fifteen (15) days ~~of~~ from receipt of the noncompliance notification ~~of~~
23 ~~noncompliance~~, the approved training program shall submit in writing, by certified mail,
24 to the paramedic training program approving authority one of the following:

25
26 (A) Evidence of compliance with the provisions of this Chapter, or

27
28 (B) A plan ~~for meeting compliance with~~ to comply with the provisions of this Chapter
29 within sixty (60) days from the day of receipt of the notification of noncompliance.

30
31 (3) Within fifteen (15) days ~~of~~ from receipt of the ~~response from the~~ approved training
32 program's response, or within thirty (30) days from the mailing date of the
33 noncompliance notification, if no response is received from the approved paramedic
34 training program, the paramedic training program approving authority shall issue a
35 decision letter by certified mail to ~~notify the Authority and the approved paramedic~~
36 ~~training program, in writing, by certified mail, of the~~ The letter shall identify the
37 paramedic training program approving authority's decision to take one or more of the
38 following actions: accept the evidence of compliance, accept the plan for meeting
39 compliance, place on probation, suspend or revoke the training program approval.

40
41 (A) Accept the evidence of compliance provided.

42
43 (B) Accept the plan for meeting compliance provided.

44
45 (C) Place the training program on probation.

46

1 (D) Suspend or revoke the training program approval.

2
3 (4) The decision letter shall also include, but not be limited to, the following information:

4
5 (A) Date of the program training approval authority's decision;

6
7 (B) Specific provisions found noncompliant by the training approval authority, if
8 applicable;

9
10 (C)The probation or suspension effective and ending date, if applicable;

11
12 (D) The terms and conditions of the probation or suspension, if applicable;

13
14 (E)The revocation effective date, if applicable;

15
16 (4)-(5) The paramedic training program approving authority shall establish the probation,
17 suspension, or revocation effective dates no sooner than sixty (60) days after the date
18 of the decision letter, as described in subsection (3) of this Section.~~If the paramedic~~
19 ~~training program approving authority decides to suspend or revoke the training program~~
20 ~~approval, the notification specified in subsection (a)(3) of this section shall include the~~
21 ~~beginning and ending dates of the probation or suspension and the terms and~~
22 ~~conditions for lifting of the probation or suspension or the effective date of the~~
23 ~~revocation, which may not be less than sixty (60) days from the date of the paramedic~~
24 ~~training program approving authority's letter of decision to the Authority and the training~~
25 ~~program.~~

26
27 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
28 Reference: Sections 1797.172, 1797.208 and 1798.202, Health and Safety Code.

29
30 **ARTICLE 4. APPLICATIONS AND EXAMINATIONS**

31
32 **§ 100163 ~~Written and~~ Cognitive Written and Psychomotor Skills Examination.**

33 (a) Applicants shall comply with the procedures for examination established by the
34 Authority and the NREMT and shall not violate or breach the security of the
35 examination. Applicants found to have violated the security of the examination or
36 examination process as specified in Section 1798.207 of the Health and Safety Code,
37 shall be subject to the penalties specified therein.

38
39 (b) Students enrolled in an accredited paramedic training program, or a paramedic
40 training program with a current Letter of Review on file with the NREMT, shall be eligible
41 to take the ~~practical~~ psychomotor skills examination specified in Section 100140 of this
42 chapter upon successful completion of didactic and skills laboratory,~~;~~ and Students shall
43 be eligible to take the cognitive written examination specified in Section 100141 when
44 they have successfully completed the didactic, clinical, and field training and have met
45 all the provisions of the approved paramedic training program.

1 Note: Authority cited: Sections 1797.7, 1797.107, 1797.172, 1797.174 and 1797.185,
2 Health and Safety Code. Reference: Sections 1797.7, 1797.172, 1797.185, 1797.214
3 and 1798.207, Health and Safety Code.

4
5 **§ 100164. Date and Filing of Applications.**

6 (a) The Authority shall notify the applicant within forty-five (45) calendar ~~thirty (30)~~ days
7 of receipt of the state application that the application was received and shall specify
8 what information, if any, is missing. The types of applications, which the applicant may
9 be required to be submitted to the Authority, by the applicant are as follows:

10
11 (1) Initial In-State Paramedic License Application, for Initial License (California
12 Graduate), Form #L-01, revised 03/2019 Revised (7/2011) herein incorporated by
13 reference, for California paramedic program graduates, herein incorporated by
14 reference.

15
16 (2) Application for Initial License of Out-of-State Paramedic License Application Form
17 #L-01A revised 03/2019, herein incorporated by reference, for Out-of-State applicants
18 Candidates who are registered with the National Registry of Emergency Medical
19 Technicians as a paramedic, Form #L-01A, Revised 7/2011, herein incorporated by
20 reference.

21
22 (3) Initial Challenge Paramedic License Application, Form #CL-01A revised 03/2019,
23 herein incorporated by reference.

24
25 (3) (4) Application for License Renewal, Renewal Paramedic License Form #RL-01,
26 revised 03/2019, Revised 6/2014, herein incorporated by reference.

27
28 (5) Audit Renewal Paramedic License Application, Form #AR-01, revised 03/2019,
29 herein incorporated by reference.

30
31 (6) (4) Application for Lapsed License Reinstatement: Paramedic License
32 Applications(s):

33
34 (A) Reinstatement Paramedic License Application Lapsed Less than One Year, Form
35 #RLL-01A, revised 03/2019 Revised 06/2012, herein incorporated by reference.

36
37 (B) Reinstatement Paramedic License Application Lapsed of One Year or More, Form
38 #RLL-01B, revised 03/2019 Revised 06/2012, herein incorporated by reference.

39
40 (5) Application for Challenge, Form #C L-01A, revised 06/2012, herein incorporated by
41 reference.

42
43 (7) Applicant fingerprint card, FD-258 dated 5/11/99 or a Request for Live Scan Service
44 Applicant Submission Form, BCII 8016 (Rev 06/0905/2018), submitted to the California
45 Department of Justice (DOJ), for a state and federal criminal history report summary

1 provided by the Department of Justice in accordance with the provisions of section
2 11105 et seq. of the Penal Code.

3
4 ~~(8) Statement of Citizenship, Alienage, and Immigration Status for State Paramedic~~
5 ~~License Application /Renewal Form IS-01 (8/11), herein incorporated by reference.~~

6
7 (8) Request for Licensure/Certification Verification, Form #VL-01, revised 03/2019.

8
9 (b) Applications for renewal of license shall be complete and postmarked, hand
10 delivered, or otherwise received by the Authority at least thirty (30) calendar days prior
11 to the expiration date of the current license. Applications postmarked, hand delivered or
12 otherwise received by the Authority less than thirty (30) calendar days prior to the
13 expiration date of the current license ~~will not cause the license to lapse but will require~~
14 the applicant to pay a \$50 late fee, as specified in Section 100172(b)(4) of this Chapter.

15
16 (c) Eligible out-of-state applicants as defined in section 100165(b) (a)(2) and eligible
17 applicants as defined in section 100165~~(e)~~ (a)(3) of this Chapter who have applied to
18 challenge the paramedic licensure training requirements ~~process~~ shall be notified by the
19 Authority within forty-five (45) calendar working days of receiving the application.
20 Notification shall advise the applicant that the application has been received, and shall
21 specify what information, if any, is missing.

22
23 (d) An application shall be denied without prejudice when an applicant does not
24 complete the application, furnish additional information or documents requested by the
25 Authority or fails to pay any required fees. An applicant shall be deemed to have
26 abandoned an application if the applicant does not complete the requirements for
27 licensure within one (1) year from the date on which the application was filed. An
28 application submitted subsequent to an abandoned application shall be treated as a
29 new application.

30
31 (e) A complete state application is a signed application submitted to the Authority that
32 provides all the requested information and is accompanied by the appropriate
33 application fee(s). All statements submitted by or on behalf of an applicant shall be
34 made under penalty of perjury.

35
36 Note: Authority cited: Sections 1797.107 and 1797.172, Health and Safety Code.
37 Reference: Section 1797.172, Health and Safety Code.

38
39 **ARTICLE 5. LICENSURE**

40
41 **§ 100165. Licensure.**

42 (a) In order to be eligible for initial paramedic licensure an individual applicant shall
43 meet at least one of the following requirements:-

44
45 (1) ~~Have a~~ Provide documentation of a California paramedic training program course
46 completion record as specified in Section 100157 of this Chapter or other documented

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1 proof of successful completion of ~~an a~~ California approved paramedic training program
2 within the last two years from the date of application to the Authority for paramedic
3 licensure, and shall meet the following requirements:

4
5 ~~(2)~~(A) Complete and submit the appropriate state Initial In-State Paramedic License
6 application form forms as specified in Section 100164.

7
8 ~~(3)~~(B) Provide documentation of successful completion of the paramedic licensure
9 cognitive written and psychomotor practical skills examinations within the previous two
10 (2) years as specified in sections 100140, and 100141, and 100163, or possess a
11 current NREMT paramedic registration.

12
13 (C) Submit to the California DOJ, an applicant fingerprint card, FD-258 dated 5/11/99 or
14 a Request for Live Scan Service Applicant Submission Form, BCII 8016 (Revised
15 05/2018), for a state criminal history record provided by the DOJ in accordance with the
16 provisions of Section 11105 et seq. of the Penal Code.

17
18 ~~(4)~~(E)(D) Pay the established fees pursuant to Section 100172.

19
20 ~~(b)An individual who possesses a current paramedic registration issued by the NREMT~~
21 ~~shall be eligible for licensure when that individual fulfills the requirements of subsection~~
22 ~~(a)(2) and (4) of this section and successfully completes a field internship as defined in~~
23 ~~Sections 100153 and 1001589(b)~~

24
25 ~~(c)A physician, registered nurse or physician assistant currently licensed shall be~~
26 ~~eligible for paramedic licensure upon:~~

27
28 ~~(1) providing documentation that their training is equivalent to the DOT HS 811-077A~~
29 ~~specified in Section 100160;~~

30
31 ~~(2) successfully completing a field internship as defined in Sections 100153(a) and~~
32 ~~100159(b); and,~~

33
34 ~~(3) fulfilling the requirements of subsection (a)(2) through (a)(4) of this section.~~

35
36 (2) Provide documentation of a paramedic license or a paramedic training program
37 course completion issued from an approved training program outside the State of
38 California and meet the following requirements:

39
40 (A) Complete and submit the Initial Out-of-State Paramedic License application form as
41 specified in Section 100164.

42
43 (B) Provide documentation of a current paramedic NREMT registration or proof of
44 passing the paramedic licensure cognitive written and psychomotor skills exams within
45 the last two (2) years.

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1 (C) Provide documentation of successful completion of an approved paramedic field
2 internship, provided by an approved paramedic program director, consisting of no less
3 than 40 advanced life support patient contacts as defined in Section 100153(a), or a
4 letter on official letterhead by an applicant's employer, training program director, or
5 medical director verifying applicant's successful completion of 40 ALS patient contacts.
6

7 (D) An individual who is currently or was previously paramedic certified/licensed out-of-
8 state shall submit a completed Request for License/Certification Verification, Form # VL-
9 01 03/2019.

10
11 (E) Submit to the California DOJ, an applicant fingerprint card, FD-258 dated 5/11/99 or
12 a Request for Live Scan Service Applicant Submission Form, BCII 8016 (Revised
13 05/2018), for a state criminal history record provided by the DOJ in accordance with the
14 provisions of Section 11105 et seq. of the Penal Code

15
16 (F) Pay the established fees pursuant to Section 100172.
17

18 (3) A physician, authorized registered nurse, mobile intensive care nurse (MICN), or
19 physician assistant currently licensed shall be eligible to challenge the required
20 paramedic training for initial paramedic licensure upon meeting the following
21 requirements:
22

23 (A) If licensed as a physician, authorized registered nurse, MICN or physician assistant
24 outside the state of California, provide documentation that their training is equivalent to
25 the DOT HS 811 077 E specified in Section 100155,
26

27 (B) If licensed as a physician, authorized registered nurse, MICN or physician assistant
28 in the state of California, provide a copy of their current license, or
29

30 (C) Complete and submit the Initial Challenge Paramedic License application form as
31 specified in Section 100164.
32

33 (D) Provide documentation of successful completion of no less than 40 advanced life
34 support patient contacts during an approved paramedic training program field
35 internship, as specified in Section 100153(a), or a letter on official letterhead by a
36 paramedic employer, training program director, or medical director verifying applicant's
37 successful completion of 40 ALS patient contacts in an approved paramedic service
38 provider field environment.
39

40 (E) Pay the established fees pursuant to Section 100172.
41

42 (F) Submit a completed Request for Licensure/Certification Verification Form # VL-01
43 03/2019, if applicable.
44

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1 (G) Provide documentation of a current paramedic NREMT registration or proof of
2 passing the paramedic licensure cognitive written and psychomotor skills exams within
3 the last two (2) years.

4
5 1. If a letter of support is required by the NREMT to take the paramedic licensure
6 cognitive written or psychomotor skills exams, the applicant shall notify the Authority.
7 The Authority shall review an applicant's completed and signed application for eligibility
8 to provide a letter of support to NREMT.

9
10 (H) Submit to the California DOJ, an applicant fingerprint card, FD-258 dated 5/11/99 or
11 a Request for Live Scan Service Applicant Submission Form, BCII 8016 (Revised
12 05/2018), for a state criminal history record provided by the DOJ in accordance with the
13 provisions of Section 11105 et seq. of the Penal Code

14
15 (b) If a letter of support is required by the NREMT to take the paramedic licensure
16 cognitive written or psychomotor skills exams, the applicant shall be required to submit
17 the appropriate application as identified in section 100165(a) and at least one of the
18 following to the Authority:

19
20 (1) Documentation showing the applicant is currently licensed as an out-of-state
21 paramedic.

22
23 (2) Documentation showing proof of completion of a state, or country, approved or
24 CAAHEP accredited paramedic training program within the past two (2) years.

25
26 (3) Documentation showing applicants training program course content is equivalent or
27 surpasses the content and hours of the January 2009 United States Department of
28 Transportation (U.S. DOT) National Emergency Medical Services Education Standards
29 DOT HS 811 077E."

30
31 (d)(c) All documentation submitted in a language other than English shall be
32 accompanied by a translation into English certified by a translator who is in the business
33 of providing certified translations and who shall attest to the accuracy of such translation
34 under penalty of perjury.

35
36 (e)(d) The Authority shall issue within forty-five (45) calendar days of receipt of a
37 completed application as specified in Section 100164(e) a wallet-sized license to eligible
38 individuals who apply for a license and successfully complete the licensure
39 requirements.

40
41 (f)(e) The ~~initial paramedic licenses'~~ effective date of the ~~initial license~~ shall be the day
42 the license is issued. The license shall be valid for a period of two (2) years; beginning
43 on the effective date through ~~from~~ the last day of the approval month in the second
44 year. ~~which it was issued.~~

1 ~~(g)~~(f) The paramedic shall be responsible for notifying the Authority of her/his proper
2 and current mailing address and shall notify the Authority in writing within thirty (30)
3 calendar days of any and all changes of the mailing address, giving both the old and the
4 new address, and paramedic license number.

5
6 ~~(h)~~(g) A paramedic may request a duplicate license if the individual submits a request in
7 writing certifying to the loss or destruction of the original license, or the individual has
8 changed his/her name. If the request for a duplicate card is due to a name change, the
9 request shall also include documentation of the name change. The duplicate license
10 shall bear the same number and date of expiration as the replaced license.

11
12 ~~(h)~~(h) An individual currently licensed as a paramedic by the provision of this section is
13 ~~deemed to be certified~~ may function as an EMT and/or an AEMT, except when the
14 paramedic license is under suspension, with no further testing or certification process
15 ~~required. If certificates are issued, the expiration date of the EMT or AEMT certification~~
16 ~~shall be the same expiration date as the paramedic license, unless the individual~~ If a
17 separate EMT or AEMT certificate is sought the certifying entity shall follows the EMT,
18 or AEMT certification/recertification process provisions as specified in Chapters 2 and 3
19 of this Division.

20
21 ~~(i)~~(i) An individual currently licensed as a paramedic by the provisions of this section
22 may voluntarily deactivate his/her paramedic license if the individual is not under
23 investigation or disciplinary action by the Authority for violations of Health and Safety
24 Code Section 1798.200. If a paramedic license is voluntarily deactivated, the individual
25 shall not engage in any practice for which a paramedic license is required, shall return
26 his/her paramedic license to the Authority, and shall notify any LEMSA with which
27 he/she is accredited as a paramedic or with which he/she is certified as an EMT or
28 AEMT that the paramedic license is no longer valid. Reactivation of the paramedic
29 license shall be done in accordance with the provisions of Section 100167(b) of this
30 Chapter.

31
32 Note: Authority cited: Sections 1797.107, 1797.172, 1797.175, 1797.185, 1797.194,
33 1798.200 and 1798.202, Health and Safety Code. Reference: Sections 1797.56,
34 1797.63, 1797.172, 1797.175, 1797.177, 1797.185, 1797.194 and 1798.200, Health
35 and Safety Code; and Section 15376, Government Code.

36
37 **ARTICLE 6. LICENSE RENEWALS, LICENSE AUDIT RENEWALS and LICENSE**
38 **REINSTATEMENTS.**

39
40 **§ 100167. License Renewal, License Audit Renewal, and License Reinstatement**

41 (a) In order to be eligible for renewal of a non-lapsed paramedic license, an individual
42 shall comply with the following requirements:

43
44 (1) Possess a current paramedic license issued in California.
45

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1 (2) Complete forty-eight (48) hours of CE pursuant to the provisions of Chapter 11 of
2 this Division.

3
4 (3) Complete and submit the ~~state~~ Renewal Paramedic License Application for License
5 Renewal, Form #RL-01, revised 03/2019. Revised 07/2011 including the Statement of
6 Continuing Education located on the back of the license renewal application. EMSA will
7 notify the paramedic, by mail, approximately six (6) months prior to their paramedic
8 license expiration date on how to renew their license.

9
10 (4) If applicant is selected for audit, submit to the Authority a signed and completed
11 Audit Renewal Paramedic License Application, Form #AR-01, revised 03/2019.

12
13 (A) Applicants selected for audit shall submit documentation of forty-eight (48) hours of
14 CE completion, as specified in (a)(2) of this section.

15
16 (4)(5) Pay the appropriate fees as specified on the application in accordance with
17 Section 100172 of this Chapter.

18
19 (6) EMSA will send a renewal reminder notification by mail to the paramedic,
20 approximately five (5) months prior to their paramedic license expiration date.

21
22 (b) In order for an individual whose license has lapsed to be eligible for license ~~renewal~~
23 reinstatement, the following requirements shall apply:

24
25 (1) For a license lapsed of less than six (6) months, the individual shall submit: comply
26 with (a)(2), and (a)(4) of this section, and complete and submit the state Paramedic
27 Application specified in Section 100163(a)(4), including the Statement of Continuing
28 Education located on the back of the lapsed license renewal application.

29
30 (A) Forty-eight (48) hours of CE pursuant to the provisions of Chapter 11 of this Division
31 with copies of the CE Certificates.

32
33 (B) Pay the appropriate fees as specified on the application in accordance with Section
34 100172 of this Chapter.

35
36 (C) Submit a signed and completed Reinstatement Paramedic License Application,
37 Lapsed Less than 1 year, specified in Section 100164(a)(6)(A).

38
39 (D) If an applicant is or was certified/licensed in another state or country, a signed and
40 completed Licensure/Certification Verification, Form #VL-01, 03/2019, shall be
41 submitted to the Authority for each state or country the applicant was licensed/certified.

42
43 (2) For a license lapsed of six (6) months or more, but less than twelve (12) months, the
44 individual shall: comply with (a)(2), and (a)(4) of this section, complete an additional
45 twelve (12) hours of CE, for a total of sixty (60) hours of CE, and complete and submit
46 the state Paramedic Application specified in Section 100163(a)(4), including the

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1 ~~Statement of Continuing Education located on the back of the lapsed license renewal~~
2 ~~application.~~

3
4 (A) Submit sixty (60) hours of CE pursuant to the provisions of Chapter 11 of this
5 Division, with copies of the CE Certificates.

6
7 (B) Pay the appropriate fees as specified on the application in accordance with Section
8 100172 of this Chapter.

9
10 (C) Submit a signed and completed Reinstatement Paramedic License Application,
11 Lapsed less than 1 year, as specified in Section 100164(a)(6)(A).

12
13 (D) If an applicant is or was certified/licensed in another state or country, a signed and
14 completed Licensure/Certification Verification, Form #VL-01, 03/2019, shall be
15 submitted to the Authority for each state or country the applicant was licensed/certified.

16
17 (3) For a ~~license lapsed of~~ twelve (12) months or more, but less than twenty-four (24)
18 months, the individual shall: ~~pass the licensure examination specified in Sections~~
19 ~~100140, 100141, and 100164 or possess a current paramedic registration issued by the~~
20 ~~NREMT, comply with (a)(2) and (a)(4) of this section, submit to the California DOJ an~~
21 ~~applicant fingerprint card, FD-258 dated 5/11/99 or a Request for Live Scan Service~~
22 ~~Applicant Submission Form, BCII 8016 (Rev 03/07), for a state summary criminal~~
23 ~~history provided by the DOJ in accordance with the provisions of Section 11105 et seq.~~
24 ~~of the Penal Code, complete an additional twenty-four (24) hours of CE, for a total of~~
25 ~~seventy-two (72) hours of CE and complete and submit a state Paramedic Application~~
26 ~~specified in Section 100163(a)(4), including the Statement of Continuing Education~~
27 ~~located on the back of the lapsed license renewal application.~~

28
29 (A) Provide documentation of passing the licensure examinations within the past two (2)
30 years as specified in Sections 100140 and 100141 or provide documentation of a
31 current paramedic registration issued by the NREMT,

32
33 (B) Submit seventy-two (72) hours of CE pursuant to the provisions of Chapter 11 of this
34 Division, with copies of the CE Certificates.

35
36 (C) Pay the appropriate fees as specified on the application in accordance with Section
37 100172 of this Chapter,

38
39 (D) Submit to the California DOJ, an applicant fingerprint card, FD-258 dated 5/11/99 or
40 a Request for Live Scan Service Applicant Submission Form, BCII 8016 (Revised
41 05/2018), for a state criminal history record provided by the DOJ in accordance with the
42 provisions of Section 11105 et seq. of the Penal Code

43
44 (E) Submit a signed and completed Reinstatement Paramedic License Application,
45 Lapsed 1 year or more, specified in Section 100164(a)(6)(B),

46

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1 (F) If an applicant is or was certified/licensed in another state or country, a signed and
2 completed Licensure/Certification Verification, Form #VL-01, 03/2019, shall be
3 submitted to the Authority for each state or country the applicant was licensed/certified.
4

5 (4) For a lapse of twenty-four (24) months or more, the individual shall ~~comply with~~
6 ~~(a)(2) and (a)(4) and (b)(3) of this section. Documentation of the seventy-two (72) hours~~
7 ~~of CE shall include completion of the following courses, or their equivalent:~~
8

9 (A) Provide documentation of passing the licensure examinations within the past two (2)
10 years as specified in Sections 100140 and 100141 or provide documentation of a
11 current paramedic registration issued by the NREMT.
12

13 (B) Pay the appropriate fees as specified on the application in accordance with Section
14 100172 of this Chapter.
15

16 (C) Submit to the California DOJ an applicant fingerprint card, FD-258 dated 5/11/99 or
17 a Request for Live Scan Service Applicant Submission Form, BCII 8016 (Rev 05/2018),
18 for a state criminal history record provided by the DOJ in accordance with the provisions
19 of Section 11105 et seq. of the Penal Code.
20

21 (D) Submit a signed and completed Reinstatement Paramedic License Application,
22 lapsed 1 year or More, specified in Section 100164(a)(6)(B).
23

24 (E) Documentation of seventy-two (72) hours of CE that shall include completion of the
25 following courses, or their equivalent:
26

27 (1) Advanced Cardiac Life Support,
28

29 (2) Pediatric Advanced Life Support,
30

31 (3) Prehospital Trauma Life Support or International Trauma Life Support,
32

33 (4) CPR.
34

35 (F) If an applicant is or was certified/licensed in another state or country, a signed and
36 completed Licensure/Certification Verification, Form #VL-01, 03/2019, shall be
37 submitted to the Authority for each state or country the applicant was licensed/certified.
38

39 (c) Renewal of a license shall be for two (2) years. If the renewal requirements are met
40 within six (6) months prior to the expiration date of the current license, the effective date
41 of licensure shall be the first day after the expiration of the current license. This applies
42 only to individuals who have not had a lapse in licensure.
43

44 ~~(d) For individuals whose Reinstated licenses has lapsed, the licensure cycle shall be~~
45 valid for a period of two (2) years; beginning on the date of issuance through the last

1 ~~day of the approved month in the second year, from the last day of the month in which~~
2 ~~all licensure requirements are completed and the license was issued.~~

3
4 ~~(e) The Authority shall notify the applicant for license renewal within thirty (30) Within~~
5 ~~forty-five (45) calendar working days of receiving the application, the Authority shall~~
6 ~~notify the applicant that the application has been received approved or and shall specify~~
7 ~~what information, if any, is missing.~~

8
9 (f) An individual, who is a member of the ~~reserves and is deployed for active duty with a~~
10 ~~branch of the~~ Armed Forces of the United States, whose paramedic license expires
11 during the time the individual is on active duty or license expires less than six (6)
12 months from the date the individual is deactivated/released from active duty, has an
13 additional six (6) months to comply with the following CE requirements and the late
14 renewal fee is waived upon compliance with the following provisions:

15
16 (1) Provide documentation from the respective branch of the Armed Forces of the
17 United States verifying the individual's dates of activation and deactivation/release from
18 active duty.

19
20 (2) Meet the requirements of Section 100167(a)(2) through (a)(4) of this Chapter, except
21 the individual will not be subject to the \$50 late renewal application fee specified in
22 Section 100172(b)(4).

23
24 (3) Provide documentation showing ~~that the CEs activities submitted for the license~~
25 ~~renewal period were received no sooner taken not earlier than 30 days prior to the~~
26 ~~effective date of the individual's paramedic license that was valid when the individual~~
27 ~~was activated for active duty and not later than six months from the date of~~
28 ~~deactivation/release from active duty.~~

29
30 (A) ~~For an individual~~ Individuals whose active duty required ~~him/her them~~ to use ~~his/her~~
31 ~~their~~ paramedic skills, credit may be given for documented training that meets the
32 requirements of Chapter 11, EMS Continuing Education Regulations (California Code of
33 Regulations, Title 22, Division 9). The documentation shall include verification from the
34 individual's Commanding Officer attesting to the classes attended.

35
36 Note: Authority cited: Sections 1797.107, 1797.172, 1797.175, 1797.185 and 1797.194,
37 Health and Safety Code. Reference: Sections 1797.63, 1797.172, 1797.175, 1797.185,
38 1797.194 and 1797.210, Health and Safety Code; and Section 101, Chapter 1, Part 1,
39 Subtitle A, Title 10, United States Code.

40 41 **ARTICLE 7. SYSTEM REQUIREMENTS**

42 43 **§ 100170. Medical Control.**

44 The medical director of the LEMSA shall establish and maintain medical control in the
45 following manner:

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- 1 (a) Prospectively, by assuring the development of written medical policies and
2 procedures, to include at a minimum:
3
- 4 (1) Treatment protocols that encompass the paramedic scope of practice.
5
- 6 (2) Local medical control policies and procedures as they pertain to the paramedic base
7 hospitals, alternative base stations, paramedic service providers, paramedic personnel,
8 patient destination, and the LEMSA.
9
- 10 (3) Criteria for initiating specified emergency treatments on standing orders or for use in
11 the event of communication failure that is consistent with this Chapter.
12
- 13 (4) Criteria for initiating specified emergency treatments, prior to voice contact, that are
14 consistent with this Chapter.
15
- 16 (5) Requirements to be followed when it is determined that the patient will not require
17 transport to the hospital by ambulance, is treated in place on scene without transport, or
18 when the patient refuses care or transport.
19
- 20 (6) Requirements for the initiation, completion, review, evaluation, and retention of an
21 electronic health record (EHR) patient care record as specified in this Chapter. These
22 requirements shall address but not be limited to:
23
- 24 (A) Initiation of ~~a~~ an electronic health record for every patient response.
25
- 26 (B) Responsibilities for record completion.
27
- 28 (C) Record distribution to include LEMSA, receiving hospital, paramedic base hospital,
29 alternative base station, and paramedic service provider.
30
- 31 (D) Responsibilities for record review and evaluation.
32
- 33 (E) Responsibilities for record retention.
34
- 35 (7) Requirements to be followed for prehospital triage of patients who are assessed and
36 determined to have a non-emergency condition. These requirements may include
37 procedures for patients that are frequent users of the EMS system that require referral;
38 or for patients that require transport to an alternative alternate destination, other than a
39 Hhospital with a Bbasic emergency permit, for further treatment, or for patients who
40 require assessment in an emergency situation. These requirements include but shall
41 not be limited to:
42
- 43 (A) Policies, procedures, and protocols for medical control and quality of care.
44
- 45 (B) Use of advanced life support skills, advanced screening tools and point-of-care
46 testing to evaluate severity of patient-severity medical condition.

1
2 (C) Documentation of assessment and evaluation in an electronic health record for each
3 patient evaluated.

4
5 (D) Completion of additional training and competency testing based upon standardized
6 curriculum approved by the authority.

7
8 (E) Authorization of EMS personnel by the local EMS agency medical director.

9
10 (F) Designation of ~~alternative~~ alternate receiving facilities, with medical staffing to consist
11 of at least one registered nurse, that includes:

12
13 1. Hospitals with a standby emergency department permit or a hospital operated by the
14 Veterans Administration, or

15
16 2. ~~LEMSA-designated~~ ~~authorized~~ ~~authorized m~~ Mental health facilities as defined
17 in ~~approved pursuant to Subdivision (n) of Section 50085404 of the Welfare and~~
18 Institutions Code, or

19
20 a. Licensed 24-hour health care facilities, hospital based outpatient programs, or
21 provider sites certified by a county Mental Health Plan or by the Department of Health
22 Care Services to provide Medi-Cal crisis stabilization services consistent with and
23 pursuant to sections, 1810.210, 1810.435, 1840.338, 1840.348 under Chapter 11, Title
24 9 of the California Code of Regulations.

25
26 3. ~~Authorized s~~ Sobering centers that are either a federally qualified health center or a
27 clinic as described in Sections ~~1211~~1204 and 1206 of the Health and Safety Code.

28
29 (G) Secure, bi-directional exchange of electronic patient health care information
30 between treating providers by no later than January 1, 2023.

31
32 (H) Retrospective review of records and quality measures by the receiving facility as
33 determined by the LEMSA.

34
35 (b) Establish policies which provide for direct voice communication between a
36 paramedic and a base hospital physician, authorized registered nurse, or MICN, as
37 needed.

38
39 (c) Retrospectively, by providing for organized evaluation and CE for paramedic
40 personnel. This shall include, but not be limited to:

41
42 (1) Review by a base hospital physician, authorized registered nurse, or MICN of the
43 appropriateness and adequacy of paramedic procedures initiated and decisions
44 regarding transport.

45
46 (2) Maintenance of records of communications between the service provider(s) and the

1 base hospital through tape recordings and through emergency department
2 communication logs sufficient to allow for medical control and CE of the paramedic.

3
4 (3) Organized field care audit(s).

5
6 (4) Organized opportunities for CE including maintenance and proficiency of skills as
7 specified in this Chapter.

8
9 (5) Ensuring the EMSQIP methods of evaluation are composed of structure, process,
10 and outcome evaluations which focus on improvement efforts to identify root causes of
11 problems, intervene to reduce or eliminate these causes, and take steps to correct the
12 process and recognize excellence in performance and delivery of care, pursuant to the
13 provisions of Chapter 12 of this Division.

14
15 (d) In circumstances where use of a base hospital as defined in Section 100169 is
16 precluded, alternative arrangements for complying with the requirements of this Section
17 may be instituted by the medical director of the LEMSA if approved by the Authority.

18
19 Note: Authority cited: Sections 1797.106, 1797.107, 1797.172 and 1797.176, Health
20 and Safety Code. Reference: Sections 1204, 1206, 1797.56, 1797.90, 1797.114,
21 1797.172, 1797.202, 1797.220, 1797.227, 1798, 1798.2, 1798.3, 1798.101 and
22 1798.105, Health and Safety Code; and Section 5404 of the Welfare and Institutions
23 Code.

24 25 **ARTICLE 8. RECORD KEEPING AND FEES**

26 27 **§ 100171. Record Keeping.**

28 (a) Each paramedic approving authority shall maintain a record of approved training
29 programs within its jurisdiction and annually provide the Authority with the name,
30 address, and course director of each approved program. The Authority shall be notified
31 of any changes in the list of approved training programs.

32
33 (b) Each paramedic approving authority shall maintain a list of current paramedic
34 program medical directors, course directors, and principal instructors within its
35 jurisdiction.

36
37 (c) The Authority shall maintain a record of approved training programs.

38
39 (d) Each LEMSA shall, at a minimum, maintain a list of all paramedics accredited by
40 them in the preceding five (5) years.

41
42 (e) The paramedic is responsible for accurately completing, in a timely manner, the
43 electronic health record patient care record referenced in Section 100170(a)(6)
44 compliant with the current versions of the National EMS Information System and the
45 California EMS Information System, which shall contain, but not be limited to, the
46 following information when such information is available to the paramedic:

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- 1
- 2 (1) The date and estimated time of incident.
- 3 (2) The time of receipt of the call (available through dispatch records).
- 4 (3) The time of dispatch to the scene.
- 5 (4) The time of arrival at the scene.
- 6 (5) The location of the incident.
- 7 (6) The patient's:
- 8 (A) Name;
- 9 (B) Age or date of birth;
- 10 (C) Gender;
- 11 (D) Weight, if necessary for treatment;
- 12 (E) Address;
- 13 (F) ~~Chief complaint~~Primary Provider Impression~~Chief complaint~~; and
- 14 (G) Vital signs.
- 15
- 16 (7) Appropriate physical assessment.
- 17 (8) Primary Provider Impression.
- 18 ~~(9)~~(9) The emergency care rendered and the patient's response to such treatment.
- 19 ~~(9)~~(10) Patient disposition.
- 20 ~~(10)~~(11) The time of departure from scene.
- 21 ~~(11)~~(12) The time of arrival at receiving facility (if transported).
- 22 ~~(12)~~(13) Time patient care was transferred to receiving facility.
- 23 ~~(13)~~(14) The name of receiving facility (if transported).
- 24 ~~(14)~~(15) The name(s) and unique identifier number(s) of the paramedics.
- 25 ~~(15)~~(16) Signature(s) of the paramedic(s).
- 26
- 27 (f) ~~A LEMSA utilizing computer or other electronic means of collecting and storing the~~
28 ~~information specified in subsection (e) of this section shall in consultation with EMS~~
29 ~~providers establish policies for the collection, utilization, and storage and secure~~
30 ~~transmission of interoperable electronic health records. of such data.~~
- 31
- 32 (g) The paramedic service provider shall submit electronic health records to the LEMSA
33 according to the LEMSA's policies and procedures.
- 34
- 35 (h) The LEMSA shall submit the electronic health record data to the Authority in no
36 greater than quarterly intervals within seventy-two (72) hours after completion of the
37 patient encounter, or at longer intervals if established by written agreement between the
38 LEMSA and the Authority.
- 39

40 Note: Authority cited: Sections 1797.107, 1797.172 and 1797.185, Health and Safety
41 Code. Reference: Sections 1797.172, 1797.173, 1797.185, 1797.200, 1797.227,
42 1797.204 and 1797.208, Health and Safety Code.

43
44 **§ 100172. Fees.**

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1 (a) A LEMSA may establish a schedule of fees for paramedic training program review
2 and approval, CE provider approval, and paramedic accreditation in an amount
3 sufficient to cover the reasonable cost of complying with the provisions of this Chapter.
4

5 (b) The following are the nonrefundable licensing fees established by the Authority:
6

7 (1) ~~The fee for initial~~ Initial In-State Paramedic License application fee shall be two
8 hundred fifty (\$250) dollars. for paramedic licensure for individuals who have completed
9 training in California through an approved paramedic training program shall be \$50.00.
10

11 (A) Effective July 1, 2020 through June 30, 2021, the Initial In-State Paramedic License
12 application fee shall be two hundred seventy-five (\$275) dollars.
13

14 (B) Effective July 1, 202~~2~~1 and thereafter the Initial In-State Paramedic License
15 application fee shall be three hundred (\$300) dollars.
16

17 (2) ~~The fee for initial~~ the Initial Out-of-State Paramedic License application fee shall be
18 three hundred (\$300) dollars. For paramedic licensure for individuals who have
19 completed out-of-state paramedic training, as specified in Section 100165(b), or for
20 individuals specified in Section 100165(c), shall be \$100.00.
21

22 (A) Effective July 1, 2020 through June 30, 2021, the Initial Out-of-State Paramedic
23 License application fee shall be three hundred twenty-five (\$325) dollars.
24

25 (B) Effective July 1, 202~~2~~1 and thereafter the Initial Out-of-State Paramedic License
26 application fee shall be three hundred fifty (\$350) dollars.
27

28 (3) ~~The fee for licensure or licensure renewal as a paramedic~~ the Renewal Paramedic
29 License application fee received at least thirty (30) days prior to expiration of the current
30 license, as specified in 100164(b) of this Chapter, shall be two hundred dollars (\$200)
31 \$195.00.
32

33 (A) Effective July 1, 2020 through June 30, 2021, the Renewal Paramedic License
34 application fee received at least thirty (30) days prior to expiration of the current license,
35 as specified in 100164(b) of this Chapter, shall be two hundred twenty-five (\$225)
36 dollars.
37

38 (B) Effective July 1, 202~~2~~1 and thereafter the Renewal Paramedic License application
39 fee received at least thirty (30) days prior to expiration of the current license, as
40 specified in 100164(b) of this Chapter, shall be two hundred fifty (\$250) dollars.
41

42 (4) ~~The fee for failing to submit an~~ a complete application for renewal, as specified in
43 Section 100164(e), within the timeframe specified in Section 100164(b) or for an
44 individual whose license has lapsed, as specified in Section 100167(b)(1), (2), (3) and
45 (4) shall be a late fee in the amount of fifty dollars (\$50.00).
46

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1 (5) The fee for state ~~summary~~ and criminal history records shall be in accordance with
2 the schedule of fees established by the California DOJ- and the Federal Bureau of
3 Investigations.

4
5 (6) The fee for a duplicate or replacement of a license shall be ten dollars (\$10.00).

6
7 (7) The fee for approval and re-approval of ~~an out-of-state~~ a CE provider shall be two
8 thousand five hundred (\$2,500) dollars. ~~\$200.00.~~

9
10 (8) The fee for administration of the provisions of Section 17520 of the Family Code
11 shall be five dollars (\$5.00); which is incorporated into the fees specified commencing
12 with Section 100172(b)(1).

13
14 (9) The Reinstatement Paramedic License Application fee shall be two hundred fifty
15 dollars (\$250).

16
17 (A) Effective July 1, 2020 through June 30, 2021, the Reinstatement Paramedic License
18 Application fee shall be two hundred seventy-five (\$275) dollars.

19
20 (B) Effective July 1, 202~~2~~1 and thereafter the Reinstatement Paramedic License
21 Application fee shall be three hundred (\$300) dollars.

22
23 (10) The Initial Challenge Paramedic License Application fee shall be three hundred
24 dollars (\$300).

25
26 (A) Effective July 1, 2020 through June 30, 2021, the Initial Challenge Paramedic
27 License Application fee shall be three hundred twenty-five (\$325) dollars.

28
29 (B) Effective July 1, 202~~2~~1 and thereafter the Initial Challenge Paramedic License
30 Application fee shall be three hundred fifty (\$350) dollars.

31
32 (11) The fee for dishonored checks shall be twenty-five dollars (\$25).

33
34 Note: Authority cited: Sections 1797.107, 1797.112, 1797.172, 1797.185 and 1797.212,
35 Health and Safety Code. Reference: Sections 1797.172, 1797.185 and 1797.212,
36 Health and Safety Code; and Section 11105, Penal Code; and Section 1719, Civil
37 Code.