



Public Health
Division

County of Santa Cruz

HEALTH SERVICES AGENCY

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To: Santa Cruz County EMS Providers
From: David Ghilarducci, MD, EMS Medical Director
Subject: Policy 632: Assisting Patients with Emergency Medications
Date: October 1, 2019

Background: EMS providers are trained and equipped to handle a broad spectrum of commonly encountered emergency medical conditions that require immediate field interventions. There are, however, rare conditions that may also require emergency field medications that, due to their low prevalence, are not practical to stock medications and are not in standard paramedic scope of practice.

In such cases, California regulations allow for paramedics and EMTs to assist or administer the patient's own prescribed medication when they are unable to self-administer the medication as directed by their physician.

New Policy: Effective immediately, Policy 632 provides guidance for these situations, the most notable example being Congenital Adrenal Hyperplasia. Your clinical manager will reach out to affected crews for particular patients as we become aware of them.



Policy 632: Assisting Patients with their Emergency Medications

New 10/1/19
Effective 10/1/19

- I. EMT and Paramedic Scope of Practice related to Patient's Emergency Medications
 - A. As described in Policy 208: EMS Responder Scope of Practice, and in California law all Paramedics may function under the EMT scope of practice:
 1. **100145. Scope of Practice of Paramedic.** *A paramedic may perform any activity identified in the scope of practice of an EMT in Chapter 2 of this Division [including] Administer approved medications by the following routes: intravenous, intramuscular, subcutaneous, inhalation, transcutaneous, rectal, sublingual, endotracheal, oral or topical*
 - B. State law also allows EMTs to assist patients with the administration of prescribed emergency medications:
 2. **100063. Scope of Practice of Emergency Medical Technician.** *Assist patients with the administration of physician prescribed devices, including but not limited to, patient operated medication pumps, sublingual nitroglycerin, and self-administered emergency medications, including epinephrine devices.*
 - C. This means any EMT or Paramedic may assist any patient with self-administration of any 'emergency' medication, including during situations where the patient is incapacitated and unable to participate in self-administration.
 - D. The term "emergency medications" is not fully defined but is generally understood to include any medication that must be given in the field because waiting for transport to a higher-level provider to administer the medication would result in death or injury. Effectively, there are no limits to the types of medications if it could be shown there was an emergency need. The only limit would be on the route as EMTs are effectively not allowed to use the IV or IM route.
- II. Specific Conditions
 - A. Congenital Adrenal Hyperplasia
 1. This is a situation where Paramedics might be asked to assist with the IM administration of a specific emergency medication. Some children are born with a genetic defect that prevents their body from producing adequate amounts of Cortisol. (an essential hormone*) The signs & symptoms of an adrenal crisis includes nausea, fever, pallor, confusion, weakness, tachycardia, tachypnea, hypoglycemia, hypotension and shock. Symptoms that might lead to their death.
 2. Families who have such a child will be very aware of their condition. When these children experience an adrenal crisis, the proper treatment is the IM administration of

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the drug Solu-Cortef. During this emergency, the parents or caregivers may not be able to properly deliver the IM medication and might request assistance from the EMS system. In this type of an emergency Paramedics can assist the parents or caregivers with drawing up and administering the Solu-Cortef. The family members, if available, should be familiar with the proper dosage and should have the necessary equipment. In some cases, such as when a child is at school, the school personnel may have medication and instructions available.

3. Although this condition might not be recognized until puberty the clear majority of cases would be recognized at birth and treatment would begin as infants. All children in adrenal crisis shall be transported to the hospital.
4. Depending upon the presenting symptoms, base contact may not be necessary. If you do need any assistance or have questions, then making base contact would be appropriate.

*Cortisol is a steroid hormone produced by the adrenal gland. It is released in response to stress and low levels of cortisol. Its main functions are to increase blood sugar, suppress the immune system (inflammation) and aids in fat, protein and carbohydrate metabolism. (Low-potency hydrocortisone is sold over the counter)

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