

Comments on Proposed Revisions to Fireline Paramedic Policy
 Public Comment Period
 October 1st, 2015 to October 30th, 2015
 Comments to Cole Taylor (taylorco@co.kern.ca.us)

SECTION # PAGE #	AGENCY	COMMENT	EMS RESPONSE
IX-C	Cal City Fire Rescue	<p>I have reviewed the policy change and attended the October fireline paramedic meeting. First, I must say I'm extremely disappointed that this policy change was proposed without any communication from EMS to the FEMP providers. I believe this to be completely inappropriate and very destructive to the relationship between KCEMS and the pre-hospital providers. Enough said.</p> <p>I believe that 12-lead diagnostic equipment in the field is very important. Furthermore, I think having 12-lead abilities on the fireline is a valuable OPTION for fireline paramedics. I do not believe there is an immediate need for it or that we are withholding appropriate care by not having it.</p> <p>The unique nature of the fireline paramedic position is just that, unique. The location and type of care is unique. The type of patients are also unique.</p> <p>The amount of equipment required, in addition to the medical gear, is extremely heavy. This equipment must be transported by the fireline paramedic up and down steep hills, to remote locations by helicopters with limited lift capabilities, and for extended periods of time while the FEMP is "spiked out".</p>	<p>Comment acknowledged. Timeline extended.</p>

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		<p>Because of the nature of the assignment, fireline patients quite often have limited access to extraction. There are several factors that would prevent the patient from even reaching definitive care including smokey conditions, darkness, altitude, canopy, fire behavior, weather and more.</p> <p>Communications is a significant challenge for the fireline paramedic. There is usually little to no cellular reception and only basic radio reception from temporary repeaters established by the incident. Transmitting any information electronically would rarely be possible, if ever.</p> <p>Patients identified as STEMI candidates on the fireline must be transferred to a local paramedic governed by the LEMSA having jurisdiction in the fire area. This paramedic will be responsible for assessing the patient and adhering to the local protocols as they apply to STEMI patients. The caregiver may have to complete a 12-lead observation, transmit the ECG interpretation, activate a local STEMI network, or any other local STEMI required activity.</p>	

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		<p>In summary, California City Fire Rescue supports the concept of 12-lead diagnostics on the fireline. However, this is a project that needs to be evaluated and reviewed prior to being implemented. The equipment to do this properly is not available yet. The cost of the project for each provider will be significant and is not something that can just occur without being previously budgeted. The overall benefit of the 12-lead program needs to be weighed with the other factors involved in the FEMP position. This level of care needs to be accomplished with little to no weight increase because weight effects too many aspects of the deployment.</p> <p>I understand there is a push to approve this policy because of other changes listed in the document. It is my recommendation that 12-lead be changed to an option in the fireline paramedic policy. I would absolutely support that approval.</p> <p>Once the policy is approved in November KCEMS and the FEMP providers can meet and develop a working group to accomplish all the desires of the Medical Director while meeting the needs of the providers. The 12-lead program can be achieved when KCEMS and the providers come together as one group working toward a common goal.</p>	

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Page 9 - C	KCFD	<p>At this time the Kern County Fire Department is opposed to the additional inventory requirement of 12-Lead capability with printing in the Wildland setting. The FEMP program is a non-transport paramedic level service. The current technology for 12-lead in the field is not compatible with the requirements of a Fireline Paramedic. Our FEMPs are required to carry the entire inventory on their backs into very remote settings. The currently required inventory utilizes two packs of 60+ pounds each to be carried by one FEMP and one FEMT into the field for the medic to function at the FEMP level. Much of the fireline setting is extremely austere in steep inaccessible terrain. Adding the additional weight required for 12-lead is simply not feasible for the safety of our personnel.</p> <p>The FIREScope committee that developed the FEMP program for CA EMSA approval and publishes guidelines for departments wishing to develop such a program are opposed to adding a 12-lead requirement to the program.</p> <p>In the near future as technology is rapidly advancing, 12-lead capability will be becoming lighter and smaller. As that technology evolves to match our needs in weight and size, the Kern County Fire Department would be in full support of adding 12-lead to the FEMP program, just not at this time</p>	Comment acknowledged. Timeline extended.

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IX, Page 9	Bakersfield Fire Department	<p>Under required equipment and supplies, item “C” states that the FEMP will be required to have 12-Lead capability by May 1, 2016. This requirement is not practical for the following reasons:</p> <ul style="list-style-type: none"> • Weight- Each of the fireline paramedic packs weighs approximately 60 lbs. and it takes two packs to carry all of the required equipment. Additions to the packs are measured in ounces, not pounds. Our current 5-Lead monitors weigh 2.2 lbs and a 12-lead weighs 11 lbs. • Size- the size of the monitor makes it impractical for fireline use. The current 5-Lead monitor fits into a backpack and the 12-Lead would have to be carried by hand. • Price- Our current 5-Lead monitors cost approximately \$5,000, where a 12-Lead costs \$38,000. • Time to implement- The May 1, 2016 requirement is within the current fiscal year, so if departments (including BFD, KCFD, and Cal City Fire) do not have the funding currently to purchase monitors, we won't have the money on May1, 2016. • The current size, weight and cost of a 12-lead monitor make it impractical for paramedics who are operating directly on the fireline. It is not uncommon for them to hike 10+ miles per day in rugged, dirty terrain. 	Comment acknowledged. Timeline extended.

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		<ul style="list-style-type: none"> • No other county in the state has this requirement and it is not required by FIRESCOPE. • Loss of the program- The three fire departments in Kern County (Bakersfield Fire, Kern County Fire, and California City Fire) that provide fireline EMTs and Paramedics make up a significant portion of the resources available in the State. Forcing compliance by May 1, 2016 will have negative consequences, up to and including elimination of this valuable program. • Information from FIRESCOPE - <i>The care provided by the FEMP often occurs in a harsh environment. Space and weight limitations preclude the FEMP from delivering all of the care outlined in the California Code of Regulations, Title 22. As such, not every treatment modality will be employed on the fireline. The FEMP is often required to hike significant distances while carrying heavy packs. The FEMP is not routinely assigned to duties within the Base/Camp, but is deployed with line personnel for extended periods of time.</i> 	
IX.C. pg 9	EMS Division	Add clarification to “12 lead capabilities with a cardiac monitor” Add specifications of monitor.	Comment acknowledged. Change made.