Central California Emergency Medical Services Agency

A Division of Fresno County Department of Public Health

Dan Lynch, EMS Director
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SPECIAL MEMORANDUM

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TO: All Fresno/Kings/Madera/Tulare EMS Providers, Hospitals, First Responders Agencies, and Interested Parties

FROM: Miranda Lewis, MD, EMS Medical Director
Daniel J. Lynch, EMS Director

DATE: August 6, 2026

SUBJECT: Clarification of EMS Policy #811 – Cardiac Monitor Data Integration and Continued Authorization for Endotracheal Intubation

EMS Policy #811, **effective December 2023**, requires ECG rhythm strips and end-tidal CO_2 ($EtCO_2$) waveforms to be electronically imported from the cardiac monitor into the electronic Patient Care Report (ePCR). The purpose of this memorandum is to clarify the policy requirements and provide notice regarding the continued authorization of endotracheal intubation within the Central California Emergency Medical Services Agency (CCEMSA) region.

Cardiac monitors generate time-stamped clinical data, including ECG rhythms, capnography waveforms, vital sign trends, and defibrillation or cardioversion events. This information is an integral part of the patient's prehospital medical record and supports continuity of care, hospital clinical decision-making, quality improvement, and retrospective clinical review.

Manual entry of monitor data or the attachment of photographs does not preserve the complete clinical record or allow independent verification of cardiac rhythms, intervention timing, or patient response. Therefore, all Advanced Life Support (ALS) provider agencies are required to maintain the technological capability to electronically import cardiac monitor data into their ePCR system.

The following documentation requirements apply:

- **ECG Rhythm Strips:** ECG data shall be electronically imported into the ePCR whenever a 12-lead ECG is obtained or cardiac monitoring is required as part of patient care, including but not limited to cardiac arrest, supraventricular tachycardia, symptomatic bradycardia, ventricular tachycardia with pulses, or other monitored cardiac conditions.
- **$EtCO_2$ Waveforms:** Continuous waveform capnography shall be electronically imported into the ePCR whenever a patient is ventilated through an advanced airway, including an endotracheal tube, supraglottic airway, tracheostomy tube, or needle cricothyrotomy.

Endotracheal intubation is an optional scope skill within the CCEMSA region. Continued authorization to perform endotracheal intubation requires compliance with the continuous waveform capnography monitoring and documentation requirements established in EMS Policy #811.

Provider agencies will have until **October 1, 2026**, to achieve full compliance. During this implementation period, EMS Agency staff will meet with each provider agency to review its implementation plan and progress.

Continued authorization to perform endotracheal intubation is contingent upon the agency demonstrating satisfactory progress toward implementation and achieving compliance by the required deadline. Agencies that fail to demonstrate an acceptable implementation plan or achieve compliance within the required timeframe may have their authorization to perform endotracheal intubation modified or revoked.

If you have any questions please contact Mark Zamora, EMS Coordinator at (559) 600-3387.