

System Administration**Date: 07/01/2026****Medical Director Signature & Approval Requirements****Policy #1010****I. Purpose:**

To define requirements and timelines for advance notification and submission of documentation to the Imperial County EMS Agency Medical Director for review and signature on official agency documents including, but not limited to:

1. DEA controlled substance registration forms and related documentation
2. Reciprocity requests (e.g., for out-of-state or EMS Compact credentials/authorizations)
3. Requests for medication authorization or additions to approved medication lists
4. Other formal requests requiring Medical Director review and signature

This policy ensures adequate time for review, compliance with federal and state regulations, and alignment with local EMS system oversight and accountability.

II. Authority:

- A. California Health & Safety Code, Division 2.5, § 1797.200 et seq.
- B. California Code of Regulations, Title 22, Division 9

III. Definitions:

- A. Medical Director – The licensed physician designated by the County of Imperial to provide medical control and accountability for the local EMS system, including approval of system policies, protocol changes, and signature authority where applicable.
- B. Requesting Agency or Provider – A permitted EMS provider, affiliate, or stakeholder submitting a request for action requiring Medical Director signature.
- C. Covered Documents – Formal filings and documentation including DEA Form 224/DEA renewal paperwork, reciprocity and credential recognition requests, medication authorizations, standing order approvals, and other items requiring medical oversight signature.
- D. Advance Notification Deadline – Four (4) weeks prior to the date by which a Medical Director signature is requested or required.

IV. Policy:

- A. Advance Notification Requirement
 1. All Covered Documents must be submitted to the Imperial County EMS Agency with complete supporting information at least four (4) weeks prior to the deadline for Medical Director signature.
 - a. This timeline is the minimum requirement; earlier submission is strongly encouraged to allow for review, revision, and any necessary consultation.

System Administration**Date: 07/01/2026****Medical Director Signature & Approval Requirements****Policy #1010**

- b. If the request requires regulatory review at the state or federal level, additional time may be necessary and will be communicated by LEMSA staff.

B. Submission Process

1. Requests must be submitted to The Imperial County EMS Agency from a locally recognized provider or stakeholder specifying:
 - a. Requesting agency/provider name and contact information
 - b. Type of request and required signature
 - c. Deadline for signature
 - d. All supporting documents and justification
2. LEMSA staff will provide acknowledgement of receipt within three (3) business days of submission.

C. Review and Processing

1. LEMSA staff will perform an initial completeness review. Incomplete submissions will be returned with a deficiency notice and may not be processed until complete.
2. The Medical Director will review the request, documentation, and legal/regulatory implications and will provide signature, request revisions, or decline with rationale.
3. If the request involves controlled substances (e.g., DEA registration forms), the submitter must also follow applicable DEA requirements for registrant documentation and recordkeeping; such items often require additional medical oversight and audit controls.
 - a. The Medical Director or designee must certify acceptance of controlled substance deliveries and documentation as part of federal recordkeeping requirements.

D. Exceptions and Emergency Requests

1. Requests that cannot reasonably meet the four-week advance notice may be considered under exigent circumstances (e.g., sudden regulatory change or critical operational need).
2. Such requests must include a written explanation of the urgency, and approval for expedited review is at the Medical Director's discretion.

E. Reciprocity and Interstate Requests

1. Requests related to reciprocity, including EMS Compact privileges or out-of-state credential recognition, must include documentation of current credential status, applicable statutes, and timeline requirements.

System Administration**Date: 07/01/2026****Medical Director Signature & Approval Requirements****Policy #1010**

2. Reciprocity requests should be submitted at least four (4) weeks prior to expiration or anticipated start date to allow for verification and Medical Director review.

F. Recordkeeping and Documentation

1. All submissions, review notes, signed documents, and correspondence shall be maintained by The Imperial County EMS Agency consistent with state and federal record retention requirements.
2. Controlled substance related documentation shall be retained in accordance with federal DEA regulations and applicable state law.

V. Provider/Agency Responsibilities:

- A. Submit requests in accordance with timelines and requirements in this policy.
- B. Ensure all necessary supporting documentation is provided at the time of submission.
- C. Communicate directly with LEMSA staff and Medical Director's office for questions regarding submission requirements or timelines.

VI. Enforcement:

Non-compliance with this policy may result in delayed processing, denial of signature, or referral to EMS Agency administrative review. Repeated or willful failure to comply may affect agency standing, privileges, or permitted activities.

APPROVED:

Signature on FileKatherine Staats, M.D.
EMS Medical Director