



Colorado Department
of Public Health
and Environment

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
Health Facilities and Emergency Medical Services Division

6 CCR 1015-3

STATE BOARD OF HEALTH
RULES PERTAINING TO EMERGENCY MEDICAL SERVICES

(Amended July 20, 2005, effective October 2, 2005)

Rules Pertaining to Emergency Medical Services

Section 1 - Purpose and Authority for Establishing Rules

- 1.1 The purpose of these rules is to replace the existing rules pertaining to emergency medical services with rules that will more adequately address: 1) current changes in pre-hospital emergency medical care, 2) the department recognition process for pre-hospital emergency medical care Training Centers and groups to assure standardized training, 3) the certification process for all levels of emergency medical technician, 4) disciplinary procedures for denial, revocation, limitation, or suspension of an individual's emergency medical technician certificate, 5) the collection of essential data related to the performance and needs of the emergency medical care system in Colorado, and 6) the minimum equipment required to be carried on each ambulance.
- 1.2 General Authority for the promulgation of these rules is set forth in C.R.S. 25-3.5-105.
- 1.3 These rules apply to and are controlling for: 1) qualified applicants that desire to be state recognized as a Training Center or Training Group for the purpose of conducting established training courses (25-3.5-201), 2) certification requirements for all persons who desire to be state certified as an emergency medical technician (25-3.5-203), 3) disciplinary procedures for denial, revocation, limitation, or suspension of an individual's emergency medical technician certificate, and 4) ambulance services, as defined in 25-3.5-103 (3), shall be governed by these rules for the provisions and maintenance of essential data and reporting requirements (25-3.5-501), and minimum essential equipment to be carried on ambulances (25-3.5-301(2)(a)).

Section 2 - Definitions

- 2.1 All definitions which appear in C.R.S. 25-3.5-103 shall apply to these rules.
- 2.2 "Advanced Cardiac Life Support (ACLS) - A course of instruction sponsored by the American Heart Association designed to prepare students in the practice of advanced emergency cardiac care.
- 2.3 "Ambulance Transport Agency" - Any public agency, volunteer organization or commercial enterprise licensed as an ambulance service by the Board of County

Commissioners of any Colorado county.

- 2.4 "Board of Medical Examiners Rules" - Rules adopted by the Board of Medical Examiners which establish responsibilities of physician advisors and all authorized acts of emergency medical technicians.
- 2.5 "Council" - State Emergency Medical and Trauma Services Advisory Council.
- 2.6 "Department" - Colorado Department of Public Health and Environment.
- 2.7 "Emergency call" - A real or self-perceived event where the EMS system is accessed by the 9-1-1 emergency access number or its local equivalent, or an interfacility transfer where the patient's health or well-being could be compromised if the patient is held at the originating facility indefinitely.
- 2.8 "EMD Training Group" - A public safety communications center, public safety agency, or EMS provider agency that has been formally recognized by the Department to conduct Emergency Medical Dispatcher Training curricula established by the Department in accordance with C.R.S. 25-3.5-201.
- 2.9 "Emergency Medical Technician-Basic (EMT-B)" - An individual who holds a current and valid Emergency Medical Technician-Basic certificate issued by the Department.
- 2.12 "Emergency Medical Technician-Intermediate (EMT-I)" - Any individual who holds a current and valid Emergency Medical Technician-Intermediate certificate issued by the Department.
- 2.13 "Emergency Medical Technician-Paramedic (EMT-P)" - An individual who holds a current and valid Emergency Medical Technician-Paramedic certificate issued by the Department.
- 2.14 "Graduate EMT-Intermediate" - an individual who has successfully completed a Department recognized Emergency Medical Technician-Intermediate training course but has not yet successfully completed the certification requirements set forth in these rules.
- 2.15 "Graduate EMT-Paramedic" - An individual who has successfully completed a Department recognized EMT-Paramedic training course but has not yet successfully completed the certification requirements set forth in these rules.
- 2.16 "Medical Director" - a physician who holds an active Colorado medical license, who establishes protocols and standing orders for medical acts performed by department-

certified EMTs of a prehospital EMS service agency and who is specifically identified as being responsible to assure the competency of the performance of those acts by such department-certified EMTs as described in the physician's medical continuous quality improvement program. Any reference to a "physician advisor" in the state EMS rules or in the Board of Medical Examiners previously adopted rules shall apply to a "medical director" as defined in these rules.

- 2.17 "Physician Advisor" - A Colorado licensed physician who establishes protocols and standing orders for medical acts performed by EMT-Basics, EMT-Intermediates, or EMT-Paramedics of a prehospital emergency medical care service agency and who is specifically identified as being responsible to assure the competency of the performance of those acts by such EMT-Basics, EMT-Intermediates, or EMT-Paramedics.
- 2.18 "Refresher/Continuing Education" - A course of instruction designed to provide training to persons for the purpose of preparing them for renewal of certification. A course of instruction condensed over a short period of time is classified as a refresher course. The same course, or a self-directed program, extended over a period of three years which meets the educational requirements for renewal of certification is classified as Continuing Education.
- 2.19 "Training Center" - A university, college, vocational educational institution, or licensed hospital that has been formally recognized to conduct training courses for the purpose of preparing individuals for state certification or course completion certificates issued by the Department. Training Centers are eligible to apply for any or all of the specialized training courses specified in section 3.1.
- 2.20 "Training Course" - A series of lectures and other training activity that has been developed from curricula designed and developed by the Department in consultation with the Council and the Board of Medical Examiners.
- 2.21 "Training Course Policies" - Policies and procedures developed by the Department and the Council that provide the basis for proper instruction of specialized curricula to be conducted by the Training Center or Training Group.
- 2.22 "Training Group" - An EMS provider agency or organization that has been formally recognized by the Department to conduct training courses for the purpose of preparing individuals for renewal of certification as emergency medical technicians. Training Group is eligible for recognition to conduct training curricula for Emergency Medical Technician Refresher/Continuing Education Classes, Emergency Medical Technician - Basic -Intravenous Therapy, and Emergency Medical Technician-Basic-Defibrillator.

Section 3 - Recognition of Training Centers and Training Groups for the Purpose of Establishing Eligibility to Conduct Training Courses Which Prepare Individuals for State Certification.

3.1 Specialized Training Curricula

The Department, in accordance with 25-3.5-201, has established the following training curricula.

3.1.1 Emergency Medical Dispatcher-Provider (Initial and Refresher/Continuing Education)

3.1.2 Emergency Medical Dispatcher-Instructor/Coordinator

3.1.3 Emergency Medical Technician-Basic (Initial and Refresher/Continuing Education)

3.1.4 Emergency Medical Technician-Basic-Intravenous Therapy (IV)

3.1.5 Emergency Medical Technician-Basic-Defibrillator

3.1.6 Emergency Medical Technician-Intermediate (Initial and Continuing Education)

3.1.7 Emergency Medical Technician-Paramedic (Initial and Refresher/Continuing Education)

3.1.8 Emergency Medical Service-Instructor

3.2 Application for Recognition as a Training Center or Training Group.

To qualify the applicant must submit documentation containing the following:

3.2.1 An application form provided by the Department containing information deemed appropriate by the Department.

3.2.2 A narrative description for each level or levels of EMT training course or courses which the applicant is applying for recognition, the area to be served by the Training Center or Training Group, justification that the training course is needed within the area of service, and the approximate number of courses that will be conducted over the three year recognition period.

- 3.2.3 An agreement acknowledging the role of the Department in the recognition process and attesting to the fact that the applicant will conduct training courses that will be overseen by the Training Center or Training Group Medical Director and in conformance with training course policies established by the Department and Council.
- 3.2.4 A personnel roster, to include a curriculum vitae for the course coordinator and medical director and the names of the instructional staff.
- 3.2.5 A description of the facilities to be used for course didactic and clinical instruction and a listing of all training aids, and medical equipment necessary for the course.
- 3.2.6 Course policies and procedures, which at a minimum shall include:
 - a) admission requirements,
 - b) attendance requirements,
 - c) course schedule which details a breakdown of the didactic, clinical, skills evaluations and testing criteria of the training course,
 - d) discipline/counseling of students,
 - e) grievance procedures,
 - f) successful course completion requirements,
 - g) testing policies,
 - h) tuition policy statement,
 - i) infection control plan,
 - j) description of insurance coverage for students,
 - k) state practical examination policies, if applicable, and
 - l) continuous quality improvement plan.

3.3 Application Procedures for Recognition as an EMD Training Group.

To qualify for recognition, the agency must submit the following:

3.3.1 An application form provided by the Department containing information deemed appropriate by the Department.

3.3.2 An agreement acknowledging the role of the Department in the recognition process and attesting to the fact that the applicant will conduct the programs in conformance with training course policies adopted by the Department and Council.

3.3.3 Name and qualifications of the instructor.

3.3.4 Course policies and procedures, that at a minimum shall include:

- a) admission requirements,
- b) attendance requirements,
- c) course schedule which details a breakdown of the didactic, clinical, and testing criteria,
- d) discipline/counseling of students,
- e) grievance procedures,
- f) successful course completion requirements,
- g) testing policies,
- h) tuition policy statement, and
- i) continuous quality improvement plan

3.4 Emergency Medical Service Instructor Course.

3.4.1 The Department provides Emergency Medical Service Instructor training courses to prepare individuals as an Emergency Medical Services Instructor. Any educational institution or hospital may submit an application containing

information deemed appropriate by the Department to conduct an Emergency Medical Services Instructor Course. Upon acceptance of the requirements specified in training course policies adopted by the Department and the Council, the applicant may conduct the instructor training course.

3.5 Procedure for Training Center, Training Group, and EMD Training Group Recognition.

The Department will notify the applicant regarding the status of the application. This notification will either specify official recognition, indicate that a site visit is required, or identify deficiencies with the application.

3.5.1 If the notification specifies a site visit, the applicant should be prepared to introduce staff, faculty, medical director, and show all documentation, equipment, supplies and facilities.

3.5.2 Applications determined to be incomplete shall be returned to the applicant with a list specifying elements to be completed.

3.5.3 Official recognition shall be in written form from the Director of the Department or their designee, and shall be based upon proof that the applicant has met all application requirements, has demonstrated the ability to conduct training courses in compliance with training course policies, has the necessary professional staff, equipment and supplies to provide the training, and has justified the need for training within the area of service.

3.5.4 Denial of recognition will be in accordance with Section 4 of these rules.

3.5.5 Training Center recognition shall be valid for a period of three (3) years from the date of the final recognition letter. Renewal of recognition shall be based upon satisfactory past performance and submission of an updated application form and signature sheet. Any application information as specified in section 3.2 may be required by the Department depending on program status. The Department may require an additional site visit in conjunction with the renewal application.

3.6 Minimum Course Coordinator Requirements for Currently recognized Training Centers or Groups.

By no later than January 1, 1995, currently recognized Training Centers and Training Groups must utilize a course coordinator that has successfully completed a state Emergency Medical Services Instructor course or its equivalent as established by the Department.

- 3.7 Recognition Procedures for Currently Recognized Training Centers and Training Groups.
- 3.7.1 By no later than 1 year from enactment of these rules, all Training Centers and Training Groups recognized by the Department prior to the enactment of these rules shall be required to submit all information as specified in Section 3.2 of these rules.
- 3.7.2 Currently recognized Training Centers or Training Groups complying with the provisions stated in 3.7.1 shall receive official recognition which shall be valid for a period of three (3) years from the date of issue.
- 3.7.3 Currently recognized Training Centers which fail to comply with the provision of 3.7.1 will no longer be recognized as a Training Center.
- 3.8 By no later than 1 year from enactment of these rules, currently recognized EMT-Paramedic Training Centers must obtain accreditation by the Committee on Accreditation of Allied Health Educational Programs) upon the recommendation of the Joint Review Committee on Educational Programs for the Emergency Medical Technician-Paramedic.
- 3.9 To maintain recognition as an EMT-P Training Center, Training Centers receiving recognition after the date of enactment of these rules must receive accreditation within one year after completion of the first training course.

Section 4 - Denial, Revocation, Suspension, or Limitations of Training Center or Training Group Recognition

- 4.1 The Department, in accordance with the administrative procedures act, 24-4-101, et seq., may initiate action to deny recognition if any of the following conditions apply.
- 4.1.1 The applicant does not possess the necessary qualifications to conduct an adequate training course in conformance with established training course policies.
- 4.1.2 The applicant is not capable of providing the necessary clinical experience that will enable the student to gain practical skills in the performance of patient care.
- 4.1.3 The applicant has not demonstrated that a need exists within the area to conduct the training course.
- 4.1.4 The applicant has committed fraud, misrepresentation, or deception in applying

for recognition.

- 4.1.5 The applicant fails to meet the application requirements specified in Section 3 of these rules.
- 4.2 Any currently recognized Training Center or Training Group may have their recognition suspended, revoked, limited, or placed on probation by the Department in accordance with the provision of the Administrative Procedures Act as defined in C.R.S. 24-4-101, et seq, for the following reasons:
 - 4.2.1 Failure to conduct the training courses in compliance with training course policies.
 - 4.2.2 Students are not receiving a course of instruction which meets generally accepted standards.
 - 4.2.3 Failure to notify the Department of changes in the medical director or course coordinator.
 - 4.2.4 Providing false information to the Department with regard to successful completion of training or successful completion of the state practical examination on behalf of students.
 - 4.2.5 Failure to comply with the provisions specified in Section 3.8 or 3.9.

Section 5 - Initial EMT-Basic, EMT-Intermediate, EMT-Paramedic Certification

5.1 General Requirements

- 5.1.1 No person shall hold them self out as an Emergency Medical Technician or offer, whether or not for compensation, any services included in these rules or authorized acts permitted by the Board of Medical Examiners Rules, unless that person is currently state certified as an Emergency Medical Technician under these regulations, or is working under the provisions of the Board of Medical Examiners Rules pertaining to Graduate EMT-I or Graduate EMT-P, or otherwise authorized by law.
 - 5.1.2 Certificates issued by the Department shall be for the highest level of training attained by the individual, and multiple certifications within the levels of EMT will not be permitted. Certification at a higher level indicates that the holder of the certificate may also provide medical care at a lower level of certification provided the certification has not been revoked, modified, suspended, or expired.
 - 5.1.3 All applicants must complete certification requirements within six (6) months of successful completion of the training course. Successful completion of training shall be the date specified on the course completion certificate issued by the Training Center or Training Group.
 - 5.1.4 Any individual holding current and valid EMT state certification may request a lower level of certification upon written request to the Department and meeting the current lower level qualifications. The Department will issue a certificate for the appropriate level. Such certificate will be valid for the remaining time allotted on the higher-level certificate.
 - 5.1.5 Any individual dropping in levels of certification will not be permitted to elevate to a higher level of certification until such time as that individual either successfully completes an initial training course or, if eligible, complies with the re-entry requirements as specified in Section 7 of these rules, and successfully completes state certification requirements.
- 5.2 An applicant for initial EMT-Basic, EMT-Intermediate, or EMT-Paramedic certification shall submit all of the following information to the Department:
- 5.2.1 a statement that the applicant is at least 18 years of age at the time of application;
 - 5.2.2 an application form containing such information as deemed appropriate by the

Department;

5.2.3 proof of length of time having lived in Colorado in a manner defined by the Department. This requirement may be met with a signed attestation.

5.2.4 all of the following reports:

A) if the applicant attests to having been a continuous resident of Colorado for more than three (3) of the previous three (3) years, current results of a fingerprint based criminal history check generated by the Colorado Bureau of Investigation, or

B) if the applicant attests to having resided outside of Colorado for three (3) years or less during the previous three (3) years, current results of a fingerprint based criminal history check generated by the Federal Bureau of Investigations, and

C) a current report obtained from the State Motor Vehicle Division, local law enforcement agency, or the applicant's employer, that provides information as to whether the applicant does or does not have a past history of motor vehicle traffic violations.

D) for the purposes of this section, a current report is defined as a report obtained no earlier than three (3) months prior to submitting application;

5.2.5 successfully completes an initial training course from a Department-recognized training center;

5.2.6 current and valid certification with the National Registry of Emergency Medical Technicians on an EMT level equivalent to or higher than the Colorado EMT level being applied for; and

5.2.7 current professional level Basic Cardiac Life Support (CPR) certification issued by a national or local organization recognized by the Department as providing training in cardiopulmonary resuscitation at the time of application;

In addition to 5.2.1 through 5.2.7, EMT-Paramedic applicants shall submit proof of current advanced cardiac life support course completion from a national or local organization recognized by the Department at the time of application.

5.3 All certificates issued by the Department shall be valid for three (3) years from the date of issue. Date of issue for initial certification is defined as the date of application

approval by the Department.

Section 6 - Renewal of EMT-Basic, EMT-Intermediate, EMT-Paramedic Certification

6.1 General Requirements

6.1.1 Any individual who holds an expired EMT certificate is not classified as a state certified EMT and shall not hold themselves out as such or provide medical care in the capacity of a state certified emergency medical technician.

6.1.2 All persons who have permitted their certification to expire for a period not to exceed six (6) months from the expiration date may renew their certification by complying with the provisions of this Section 6. Persons permitting their certification to expire for a period greater than six (6) months from the expiration date will not be eligible for renewal of certification and, if desiring to become re-certified, will be subject to compliance with the re-entry program requirements specified in Section 7 of these rules.

6.1.3 All certificates renewed by the Department shall be valid for three years from the date of issue.

A) Date of issue is established as follows:

- 1) for applicants successfully completing the renewal of certification requirements earlier than six months from the expiration date listed on their current certificate, the date of issue will be the date of application approval by the Department.
- 2) for applicants successfully completing the renewal of certification requirements during the last six (6) months prior to their current certificate expiration date, the date of issue will be the expiration date of the current valid certificate being renewed.
- 3) for applicants successfully completing the renewal of certification requirements after the expiration date of their certificate, the date of issue will be the date of application approval by the Department.

6.2 An applicant for renewal of a current and valid EMT-Basic, EMT-Intermediate, or EMT-Paramedic certificate or one not more than six (6) months expired shall submit all of the

following information to the Department:

- 6.2.1 an application form containing such information as deemed appropriate by the Department;
- 6.2.2 proof of length of time having lived in Colorado in a manner defined by the Department. This requirement may be met with a signed attestation.
- 6.2.3 all of the following reports:
 - A) if the applicant attests to having been a continuous resident of Colorado for more than three (3) of the previous three (3) years, the current results of a fingerprint based criminal history check generated by the Colorado Bureau of Investigation, or
 - B) if the applicant attests to having resided outside of Colorado for three (3) years or less during the previous three (3) years, the current results of a fingerprint based criminal history check generated by the Federal Bureau of Investigations.
 - C) for applications received after June 17, 2007, documentation of any additional criminal activity in a manner defined by the Department, and
 - D) a current report obtained from the State Motor Vehicle Division, local law enforcement agency, or the applicant's employer, that provides information as to whether the applicant does or does not have a past history of motor vehicle traffic violations.
 - E) for the purposes of this section, a current report is defined as a report obtained no earlier than three (3) months prior to submitting application; and
- 6.2.4 successful completion of one of the following:
 - A) current registration by the National Registry of Emergency Medical Technicians as an NREMT-Basic, NREMT-Intermediate/99, or NREMT-Paramedic.
 - B) the appropriate level refresher education training course by a Department recognized training group and the practical skill examination for the appropriate EMT application level.

C) an appropriate level continuing education training course by a Department recognized training group and practical skill evaluation or examination for the appropriate EMT application level.

6.2.5 In addition to 6.2.1 through 6.2.4 the following shall apply for every certification application after July 1, 2005:

A) Persons renewing an EMT-Basic, EMT-Intermediate, or EMT-Paramedic certificate shall submit current CPR certification issued by a national or local organization recognized by the Department as providing training in cardiopulmonary resuscitation at the time of application.

B) Persons renewing an EMT-Intermediate or EMT-Paramedic certificate must possess current ACLS certification at the time of application.

Section 7 - Re-entry Process for Persons That Have Permitted Their Certification to Expire for a Period Greater than Six (6) Months but Not Greater than Thirty-Six (36) Months

7.1 General Requirements.

7.1.1 Persons permitting their certification to expire for a period greater than six (6) months or persons who have not successfully completed initial certification requirements within six (6) months from the date of course completion, or persons who have voluntarily dropped in level of certification may become certified by complying with Section 7 of these rules provided the certificate has not been expired for more than thirty-six (36) months.

7.1.2 Persons who, being certified at a higher level of certification, have requested and received a lower level of certification will be eligible to return to their previous level of certification by meeting the provisions of this Section 7 provided their current lower level of certification is current and valid at the time of application.

7.1.3 Persons with an expired certificate greater than thirty-six (36) months from the date of expiration, or persons who have not been initially certified within thirty-six (36) months from the date of successful completion of an initial training course shall not be eligible for certification until such time as the person successfully completes an initial training course conducted by a recognized training center.

- 7.2 Applicants for EMT-Basic, EMT-Intermediate, or EMT-Paramedic certification who meet the criteria specified in 7.1.1 or 7.1.2 shall submit all of the following information to the Department:
- 7.2.1 an application form containing such information as deemed appropriate by the Department;
 - 7.2.2 proof of length of time having lived in Colorado in a manner defined by the Department. This requirement may be met with a signed attestation.
 - 7.2.3 all of the following reports:
 - A) if the applicant attests to having been a continuous resident of Colorado for more than three (3) of the previous three (3) years, the current results of a fingerprint based criminal history check generated by the Colorado Bureau of Investigation, or
 - B) if the applicant attests to having resided outside of Colorado for three (3) years or less of the previous three (3) years, the current results of the fingerprint based criminal history check generated by the Federal Bureau of Investigations.
 - C) for applications received after June 17, 2007, documentation of any additional criminal activity in a manner defined by the Department,
 - D) and a current report obtained from the State Motor Vehicle Division, local law enforcement agency, or the applicant's employer, that provides information as to whether the applicant does or does not have a past history of motor vehicle traffic violations, and
 - E) for purposes of this section, a current report is defined as a report obtained no earlier than three (3) months prior to submitting the application.
 - 7.2.4 evidence of completion of the refresher training course for the appropriate level of certification;
 - 7.2.5 evidence of completion of the initial clinical and field training requirements specified in training course policies for the appropriate level of certification;
 - 7.2.6 evidence of successful completion of the state practical examination as identified in training course policies for initial certification for the appropriate level of

certification; and

- 7.2.7 evidence of current professional level CPR certification issued by a national or local organization recognized by the Department as providing training in cardiopulmonary resuscitation.
- 7.2.8 In addition to 7.2.1 through 7.2.7, a person wanting to obtain certification as an EMT-Intermediate or EMT-Paramedic after July 1, 2005, shall possess current ACLS certification.
- 7.2.9 In lieu of completing requirements 7.2.4 through 7.2.6, an applicant may submit current certification with the National Registry of EMTs at the requested certification level.

Section 8 - Legal Recognition for Persons Possessing out of State EMT Certification

- 8.1 The Department may issue an EMT-B, EMT-I, or EMT-P certificate to an applicant from another state possessing a current NREMT-Basic, NREMT-Intermediate/99, or NREMT-Paramedic certificate, issued by the National Registry of Emergency Medical Technicians who:
 - 8.1.1 is eighteen (18) years of age or older and submits an application form containing such information as deemed appropriate by the Department
 - 8.1.2 submits a completed fingerprint card to the Colorado Bureau of Investigation or Federal Bureau Of Investigations for a current fingerprint based national history check with the Department identified as the recipient of the results.
 - 8.1.3 provides the following report:
 - A) a current report obtained from the State Motor Vehicle Division, local law enforcement agency, or the applicant's employer, that provides information as to whether the applicant does or does not have a past history of motor vehicle traffic violations.
 - B) for the purposes of this section, a current report is defined as a report obtained no earlier than three (3) months prior to submitting application;
 - 8.1.4 possesses current and valid certification with the National Registry of Emergency Medical Technicians on an EMT level equivalent to or higher than the Colorado EMT level being applied for; and

- 8.1.5 the applicant possesses current professional level CPR issued by a national or local organization recognized by the Department as providing training in cardiopulmonary resuscitation.
- 8.1.6 In addition, persons wanting to obtain certification as an EMT-Intermediate or EMT-Paramedic after July 1, 2005, must possess current ACLS certification.
- 8.1.7 Any certificate issued under these provisions will be classified as a transfer of the NREMT certification and will be valid for thirty-six (36) months from the date of application approval by the Department.

Section 9 - State Practical Skills Evaluations

9.1 State Practical Skills Evaluation Requirements.

The State practical skills evaluation, provided in training course policies, will be conducted by recognized training centers or training groups after successful completion of the training course.

Section 10 - Denial, Suspension, Revocation, Modification, or Limitation of Certification

10.1 Denial of Certification

The Department, in accordance with the Administrative Procedures Act, CRS 24-4-101, et seq., as amended, may deny any certificate or refuse to renew a certificate to any applicant for, but not limited to, the following reasons:

- 10.1.1 Failure to meet requirements specified in Sections 5 or 6 of these rules pertaining to the Issuance of Certificates and the renewal of certification.
- 10.1.2 Any conduct as described in Sections 10.2.2 and 10.2.3 pertaining to good cause for disciplinary action.
- 10.1.3 Any conduct by a Graduate EMT-I or Graduate EMT-P as described in Section 10.2.2 and 10.2.3 pertaining to good cause for disciplinary action.
- 10.1.4 Fraud, misrepresentation, or deception in applying for or securing certification, or

in taking any written or practical certification examination.

10.1.5 Aiding and abetting another person in procuring EMT certification for any person who is not eligible for certification.

10.1.6 Creating a disturbance during a state practical skills evaluation or a state written examination, or conducting themselves in a manner that disrupts other persons taking the examination or prevents the examination proctor from conducting the examination.

10.2 Revocation, Suspension, or Limitation of EMT Certification

10.2.1 Any certification issued by the Department may be suspended, summarily suspended, revoked, or limited for good cause in accordance with the Administrative Procedures Act, CRS 24-4-101 et seq., as amended.

10.2.2 Good cause for disciplinary sanctions listed in this section shall include, but not be limited to:

- A) Unlawful use, possessing, dispensing, administering, or distributing controlled substances.
- B) Driving an emergency vehicle in a reckless manner, or while under the influence of alcohol or other performance altering drugs.
- C) Responding to or providing patient care while under the influence of alcohol or other performance altering drugs.
- D) Demonstrating a pattern of alcohol or other substance abuse.
- E) Obtaining certification or recertification by fraud, misrepresentation, deception, or subterfuge.
- F) Materially altering any Department certificate, or using and/or possessing any such altered certificate.
- G) Having a certificate or license suspended or revoked in another state while holding a Colorado EMT certificate.
- H) Unlawfully discriminating in the provision of services.

- I) Representing qualifications at any level other than the person's current certification level.
- J) Failing to follow accepted standards of care in the management of a patient, or in response to a medical emergency.
- K) Failing to administer medications or treatment in a responsible manner in accordance with the physician advisor's orders or protocols.
- L) Failing to maintain confidentiality of patient information.
- M) Failing to provide the Department with the current place of residence, or change of name, or fails to register with the Department as an EMT-Basic with IV.
- N) A pattern of behavior that demonstrates routine response to medical emergencies without being under the policies and procedures of the designated emergency medical response agency and providing medical care without medical direction or supervision of a physician advisor.
- O) Performing medical acts not authorized by the Board of Medical Examiners as defined in CCR 3-713-6 and in the absence of any other lawful authorization to perform such medical acts.
- P) Failing to provide care, or discontinuing care when a duty to provide care has been established.
- Q) Appropriating or possessing without authorization medications, supplies, equipment or personal items of a patient or employer.
- R) Falsifying entries or failing to make essential entries in a patient's run report or medical record.
- S) Falsifying entries made on the state pre-hospital care reporting form.
- T) Violating any state or federal rule or regulation that would jeopardize the health or safety of a patient or the public.
- U) Unprofessional conduct at the scene of an emergency that hinders, delays, eliminates, or deters the provision of medical care to the patient or endangers the safety of the public.

V) Committing or permitting, aiding or abetting the commission of an unlawful act that substantially relates to performance of an EMT's duties and responsibilities as determined by the Department.

10.2.3 Good cause for disciplinary sanctions also includes conviction of, or a plea of no contest to, a felony or misdemeanor, which relates to the duties and responsibilities of an EMT, including patient care and public safety.

A) The following crimes set forth in the Colorado Criminal Code (Title 18, C.R.S.) are considered to relate to the duties and responsibilities of an EMT:

- 1) offenses under article 3 – offenses against the person.
- 2) offenses under article 4 – offenses against property.
- 3) offenses under article 5 – offenses involving fraud.
- 4) offenses under article 6 – offenses involving the family relations.
- 5) offenses under article 6.5 – wrongs to at-risk adults.
- 6) offenses under article 7 – offenses relating to morals.
- 7) offenses under article 8 – offenses - governmental operations.
- 8) offenses under article 9 – offenses against public peace, order and decency.
- 9) offenses under article 17 – Colorado Organized Crime Control Act.
- 10) offenses under article 18 – Uniform Controlled Substances Act of 1992.

B) Offenses listed in 10.2.3(a) are not exclusive. The Department may consider other criminal convictions, including those from other state, federal, foreign or military jurisdictions.

C) In determining whether to deny, revoke, suspend or otherwise limit a certificate or refuse to renew a certificate based on a felony or misdemeanor conviction, the department may consider and review the following:

- 1) the nature and seriousness of the crime;
- 2) the relationship of the crime to the purposes of requiring a certificate;
- 3) the relationship of the crime to the ability, capacity or fitness required to perform the duties and discharge the responsibilities of an EMT; and
- 4) the time frame in which the crime was committed.

10.5 Appeals

10.5.1 If the Department denies any certificate or refuses to renew a certificate to an applicant, the Department will provide the applicant with notice of the grounds for the certification denial or refusal to renew and inform the applicant of the applicant's right to request a hearing.

- A) A request for a hearing must be submitted to the Department in writing within sixty (60) calendar days from the date of the notice.
- B) If a hearing is requested, the applicant must file an answer within sixty (60) calendar days of the date of the notice.
- C) If a request for a hearing is made, the hearing shall be conducted in accordance with the Administrative Procedures Act.
- D) If the applicant does not request a hearing in writing within sixty (60) calendar days of the date of the notice, the applicant is deemed to have waived the opportunity for a hearing.

10.5.2 If the Department proposes to revoke, suspend, limit or otherwise modify a certificate, the Department will notify the certificate holder by first class mail to the last address furnished to the Department by the certificate holder. The notice shall state the alleged facts and/or conduct warranting the proposed action and state that the certificate holder may request a hearing.

- A) The certificate holder shall file a written answer within thirty (30) calendar days of the date of mailing of the notice.
- B) A request for a hearing must be submitted to the Department in writing within thirty (30) calendar days from the date of mailing of the notice.

- C) If a request for a hearing is made, the hearing shall be conducted in accordance with the Administrative Procedures Act.
- D) If the certificate holder does not request a hearing in writing within thirty (30) calendar days of the date of mailing of the notice, the certificate holder is deemed to have waived the opportunity for a hearing.

10.5.3 If the Department summarily suspends a certificate, the Department will provide the certificate holder notice of such in writing, which notice shall be sent by first class mail to the last address furnished to the Department by the certificate holder. The notice shall state that the certificate holder is entitled to a prompt hearing on the matter. The hearing shall be conducted in accordance with the Administrative Procedures Act.

Section 11 - Data and Information Collection and Record Keeping

11.1 State Prehospital Care Reporting Requirements

All ambulance transport agencies shall provide the department with such data and information required to evaluate, coordinate and plan for the continued development of the emergency medical care system in the State. Such data and information shall be provided on forms supplied by the Department, or on alternate media in a form acceptable to the Department.

11.1.1 In accordance with C.R.S. 25-3.5-501, the following information is necessary to evaluate, coordinate and plan for the continued development of the emergency medical care system and shall be reported to the Department by all ambulance services as defined in CRS 25-3.5-103(3) for each emergency call.

- a) Agency identification as assigned by the Department.
- b) Date call was dispatched.
- c) Time, in military format, to include:
 - 1) Time call was dispatched.
 - 2) Time ambulance went en route to the incident scene, if applicable.

- 3) Time ambulance arrived at the incident scene, if applicable.
 - 4) Time ambulance departed the incident scene, if applicable.
 - 5) Time ambulance arrived at the receiving facility or patient care was transferred to another EMS agency, if applicable.
 - 6) Time ambulance was available to respond to another call.
- d) County in which incident occurred.
 - e) Incident location categorized by classifications specified by the Council.
 - f) Mode of response (emergent or non-emergent) to and from the incident scene, if applicable.
 - g) Classification of the call as "trauma" or "medical" in nature.
 - h) If the call is designated as "trauma", the primary mechanism of injury categorized by classifications specified by the Council and the patient's initial Revised Trauma Score. In addition, if the trauma is the result of an incident involving a bicycle, motorcycle, motor vehicle or recreational vehicle, an indication, if known, of the protective equipment worn or utilized by the patient, and an indication, if known, whether the patient was the operator or passenger of the vehicle.
 - i) If the call is designated as "medical", the signs, symptoms, illness or emergency categorized by classifications as specified by the Department.
 - j) Patient age and sex.
 - k) Number of miles patient was transported from the incident scene to the receiving facility or point of transfer to another EMS agency.
 - l) Receiving facility or agency identification number assigned by the Department.

- m) Any special codes assigned by the Department to identify the classes of patients or specific procedures performed in the field.
- n) Five-digit ZIP code of the patient's residence, if known. Patients residing outside the United States, or others without a residence will be designated by a five-digit code assigned by the Department.
- o) The outcome of the call categorized by classifications specified by the Council.
- p) An indication of the highest level of training, certification or licensure of the medical personnel providing care from the reporting agency.

11.1.2 All ambulance transport agencies providing this information on data-collection forms supplied by the state shall deliver a copy of the form to the receiving facility with the patient, or include the state-assigned ambulance trip report number from the data-collection form on the patient encounter record delivered with the patient. Ambulance transport agencies providing this information on alternate media shall deliver a copy of the patient encounter record including the state-assigned ambulance trip report number, or its equivalent, to the receiving facility.

11.1.3 A licensed ambulance service must provide the information specified in Section 11.1.1 for that agency to be eligible for State monies distributed through the EMS Provider Grant Program pursuant to the provisions of C.R.S. 25-3.5-601, as amended.

Section 12 – Licensure Of Ambulance Services

12.1 Purpose And Scope

12.1.1 These rules are promulgated pursuant to § 25-3.5-308, CRS (2004). They are consistent with § 25-3.5-301, 302, and 304 -306, CRS (2004). Each county may adopt rules that exceed these rules adopted herein.

12.2 Definitions

12.2.1 Based: an ambulance service headquartered, having a substation, office ambulance post or other permanent location in a county.

12.2.2 County: county or city and county government within Colorado.

- 12.2.3 Department: the Colorado Department of Public Health and Environment.
- 12.2.4 Ambulance: any public or privately owned land vehicle especially constructed or modified and equipped, intended to be used and maintained or operated by, ambulance services for the transportation, upon the roads, streets and highways of this state, of individuals who are sick, injured, or otherwise incapacitated or helpless.
- 12.2.5 Ambulance-advanced life support: a type of permit issued by a county to a vehicle equipped in accordance with Section 9 of these rules and operated by an ambulance service authorizing the vehicle to be used to provide ambulance service limited to the scope of practice of the emergency medical technician-intermediate or emergency medical technician-paramedic as defined in the Colorado Board of Medical Examiners rules, 3 CCR 713-6, Rule 500, Sections 5 and 6.
- 12.2.6 Ambulance-basic life support: a type of permit issued by a county to a vehicle equipped in accordance with Section 9 of these rules and authorized to be used to provide ambulance service limited to the scope of practice of the emergency medical technician-basic as defined in the Colorado Board of Medical Examiners rules, 3 CCR 713-6, rule 500, section 4.
- 12.2.7 Ambulance service license: a legal document issued to an ambulance service by a county as evidence that the applicant meets the requirements for licensure to operate an ambulance service as defined by county resolution or regulations.
- 12.2.8 Ambulance service: the furnishing, operating, conducting, maintaining, advertising, or otherwise engaging in or professing to be engaged in the transportation of patients by ambulance. Taken in context, the person so engaged or professing to be so engaged and the vehicles used for the emergency transportation of persons injured at a mine are excluded from this definition when the personnel utilized in the operation of said vehicles are subject to the mandatory safety standards of the federal mine safety and health administration, or its successor agency.
- 12.2.9 Medical Director: a Colorado licensed physician who establishes protocols and standing orders for medical acts performed by department-certified EMTs of a prehospital EMS service agency and who is specifically identified as being responsible to assure the competency of the performance of those acts by such department-certified EMTs as described in the physician's medical continuous quality improvement program. Any reference to a "physician advisor" in the state EMS rules or in the Board of Medical Examiners previously adopted rules shall apply to a "medical director" as defined in these rules.

- 12.2.10 Patient Care Report: a medical record of an encounter between any patient and a provider of medical care.
- 12.2.11 Permit: the authorization issued by the governing body of a local government with respect to an ambulance used or to be used to provide ambulance service in this state.
- 12.2.12 Medical quality improvement program: a process consistent with Colorado Board of Medical Examiners rules, 3 CCR 713-6, Rule 500, Section 3.2 (b), used to objectively, systematically and continuously monitor, assess and improve the quality and appropriateness of care provided by the medical care providers operating on an ambulance service.
- 12.2.13 Rescue Unit: any organized group chartered by this state as a corporation not for profit or otherwise existing as a nonprofit organization whose purpose is the search for and the rescue of lost or injured persons and includes, but is not limited to, such groups as search and rescue, mountain rescue, ski patrols, (either volunteer or professional), law enforcement posses, civil defense units, or other organizations of governmental designation responsible for search and rescue.
- 12.2.14 Quick Response Teams: provides initial care to a patient prior to the arrival of an ambulance.

12.3 County Issuance Of Licenses And Permit

12.3.1 License Required

- A) Within one year following adoption of these rules, no person or agency, private or public, shall transport a patient from any point within Colorado in an ambulance, to any point within or outside Colorado unless that person or agency holds a valid license and permits issued by the county where the service is based and by the county where the patient originates, except as provided in subsection 3.2 of these rules.
- B) Ambulance services that are based outside Colorado, but respond within Colorado and transport patients originating in Colorado are required to be licensed in Colorado by the county in which they provide service.
- C) Counties may enter into reciprocal licensing and permitting agreements with other counties and neighboring states.

12.3.2 County Exemptions From Licensure or Permit Requirements

- A) Vehicles used for the transportation of persons injured at a mine when the

personnel used on the vehicles are subject to the mandatory safety standards of the federal mine safety and health administration, or its successor agency.

- B) Vehicles used by other agencies including quick response teams and rescue units that do not routinely transport patients or vehicles used to transport patients for extrication from areas inaccessible to a permitted ambulance. Vehicles used in this capacity may only transport patients to the closest practical point for access to a permitted ambulance or hospital.
- C) Vehicles, including ambulances from another state, used during major catastrophe or mass casualty incident rendering services when permitted ambulances are insufficient.
- D) An ambulance service that does not transport patients from points originating in Colorado, or transporting a patient originating outside the borders of Colorado.
- E) Vehicles used or designed for the scheduled transportation of convalescent patients, individuals with disabilities, or persons who would not be expected to require skilled treatment or care while in the vehicle.
- F) Vehicles used solely for the transportation of intoxicated persons or persons incapacitated by alcohol as defined in § 25-1-302, CRS (2004) but who are not otherwise disabled or seriously injured and who would not be expected to require skilled treatment or care while in the vehicle.
- G) Ambulances operated by a department or an agency of the federal government, originating from a federal reservation for the purpose of responding to, or transporting patients under federal responsibility.

12.3.3 General Requirements For County Licensure Of Ambulance Services

- A) Counties shall adopt by resolution or regulations a process for licensure of ambulance services. The process shall include, but not be limited to:
 - 1) Compliance with applicable federal, state, and local laws and regulations to operate an ambulance service in Colorado.
 - 2) An application form adopted by the county.
 - 3) An application fee, as defined in county resolution or regulations.
 - 4) Submission to the county, upon request, of copies of the ambulance service's written policy and procedure manual, operational or medical protocols, or other documentation the county may deem necessary.

- 5) Demonstration by the applicant of minimum vehicle insurance coverage as defined by § 10-4-609, CRS and § 42-7-103 (2), CRS (2004) with the county(s) identified as the certificate holder.
 - 6) Demonstration by the applicant of proof of any additional insurance as identified in county resolution or regulations. In making a decision about additional insurance requirements at any time it deems necessary to promote the public health, safety and welfare, the county shall require a minimum level of worker's compensation consistent with the Colorado worker's compensation act of Colorado title 8, article 4 0-47.
 - 7) Documentation from the applicant that information regarding the amount of professional liability insurance the ambulance service carries was provided to employees.
 - 8) Prior to beginning operations and upon change of ownership of an ambulance service, the new owner or operator must file for and obtain an ambulance license and ambulance permit.
 - 9) The county may adopt minimum acceptable vehicle design standards for ambulances. In doing so, the county shall consider vehicle design standards such as those established by the US General Services Administration: federal specifications for ambulances KKK-A-1822 (e), 2003.
 - 10) The county shall verify that each ambulance is inspected annually by qualified representatives, as defined and appointed by the county commissioners, to assure compliance with these rules.
 - 11) Counties shall verify that all equipment on the ambulance is properly secured, and medications and supplies are maintained and stored according to the manufacturer's recommendations and any federal, state or local requirements.
 - 12) A county may delegate or contract the ambulance inspection process but not the responsibility of licensure as defined by Colorado statute and the rules as defined in § 25-3.5-301, CRS (2004)
 - 13) An ambulance service license or vehicle permit may not be assigned, sold or otherwise transferred.
- B) These rules incorporate by reference (Section 12.3.3 (a) (9)) materials originally published elsewhere. These rules do not include later amendments to or editions of the incorporated materials. The Department of Public Health

and Environment maintains copies of the complete text of the incorporated materials for public inspection during regular business hours, and shall provide certified copies of any non-copyrighted material to the public at cost upon request. The incorporated material may be examined at any state publications depository library.

Information regarding how the incorporated materials may be obtained or examined is available from:

Emergency Medical and Trauma Services Section Chief, Health Facilities and Emergency Medical Services Division, Colorado Department of Public Health and Environment, 4300 Cherry Creek Drive South, Denver, Colorado 80246

12.3.4 Licensure Process

A) Ambulance Service License

- 1) An ambulance service license shall be issued by county upon compliance with these rules and all license requirements duly established by that county. The type of license issued shall describe the maximum level of ambulance service that could be provided at any time by the service.

B) Permits Of Vehicles

- 1) The county shall create a process and procedure for the issuing of permits for each vehicle used by the ambulance service.
- 2) The type of permit issued will describe the maximum level of service that could be provided at any time by that vehicle and appropriate staff. Types of permissible permits are limited to:
 - a. Ambulance basic life support
 - b. Ambulance advanced life support
 - c. Each county shall include in their resolution or regulations the requirements for identification of the permitted level of service on each vehicle issued a permit.

12.3.5 Licensure Period

- A) The licensure period for all ambulance services shall be for twelve months.

12.3.6 License Renewal

- A) Counties shall create an annual license renewal process. The license renewal

process shall require the ambulance service to submit a completed renewal application form and the required licensure fee, as defined in county resolution or regulations. The licensure renewal process shall require the receipt of applications for renewal no less than 30 days before the date of license expiration.

12.4 Complaints

12.4.1 Each county must have a written complaint and investigation policy and procedure to address:

- A) complaints against any ambulance service licensed in the county.
- B) allegations of unlicensed ambulance services or vehicles without a valid permit operating within the county.

12.4.2 The policy shall include, but not be limited to, the procedures associated with complaint intake; complaint validation; criteria for initiating an investigation; a method for notification to the complainant about the resolution of the investigation; and a method for the notification of other local entities with jurisdiction over ambulance services, the department and/or the Board of Medical Examiners for complaints regarding certified emergency medical technicians, other medical personnel associated with the service or the medical director.

12.4.3 The county shall notify the primary medical director of the ambulance service, in writing, of any violation of the ambulance licensing regulations by the ambulance service or alleged complaints or violations by individual medical providers operating on an ambulance service.

12.5 Denial, Revocation, Or Suspension Of Licensure And Vehicle Permits

12.5.1 Each county shall develop policies and procedures for the denial, suspension or revocation of an ambulance service license or ambulance permit consistent with § 25-3.5-304, CRS (2004).

12.6 Minimum Data Collection And Reporting Requirements

12.6.1 The county shall require that licensed ambulance services complete a patient care report for each patient that is assessed. The patient care report shall include the minimum pre-hospital care data set as set forth in the Emergency Medical Services Rules, 6 CCR 1015-3.

12.6.2 The county shall require that the ambulance service provide patient care information to the department pursuant to Emergency Medical Services Rules, 6

CCR 1015-3.

- 12.6.3 The county shall require that each licensed ambulance service complete and submit to the department an agency profile as defined by State Emergency Medical and Trauma Services Advisory Council and approved by the department to provide information on resources available for planning and coordination of statewide emergency medical and trauma services on an annual basis.

12.7 Minimum Staffing Requirements

- 12.7.1 The county shall establish by resolution or regulations ambulance staffing requirements to include, but not be limited to:
- A) The minimum requirement for the person responsible for providing direct emergency medical care to patients transported in an ambulance shall be certified as an emergency medical technician-basic as defined in Emergency Medical Services Rules, 6 CCR 1015-3.
 - B) The minimum requirement for the ambulance driver shall be a valid driver's license.
- 12.7.2 Consistent with § 25-3.5-202, CRS (2004) in the case of an emergency in any ambulance service area where no person possessing the qualifications required by this section is present or available to respond to a call for the emergency treatment and transportation of patients by ambulance, any person may operate such ambulance to transport any sick, injured, or otherwise incapacitated or helpless person in order to stabilize the medical condition of such person pending the availability of personnel meeting these minimum qualifications.

12.8 Medical Oversight And Quality Improvement

- 12.8.1 The county shall require each ambulance service operating within their jurisdiction to have a primary medical director meeting the requirements established by the Colorado Board of Medical Examiners as defined in the Colorado Board of Medical Examiners 3 CCR 713-6, Rule 500 to supervise the medical acts performed by all personnel on the ambulance service. The county shall require a licensee to inform the county within 15 calendar days, in writing, of changes in medical oversight of the ambulance service and/or the medical director of record.
- 12.8.2 The county ambulance service licensure application shall include an attestation by the medical director of willingness to provide medical oversight and a medical continuous quality improvement program for the ambulance service.

- 12.8.3 The county shall require each licensed ambulance service operating within their jurisdiction to have an ongoing medical continuous quality improvement program consistent with the requirements as defined in the Colorado Board of Medical Examiners rules 3 CCR 713-6, Rule 500, 3.2, b.

12.9 Minimum Equipment Requirements

- 12.9.1 Counties shall ensure that permitted ambulances are in compliance with the minimum equipment list for the type of service defined by their permit as defined in 9.3 and 9.4 of these rules.

12.9.2 Minimum Equipment For Basic Life Support Ambulances

A) Ventilation And Airway Equipment

- 1) portable suction unit, and a house (fixed system) or backup suction unit, with wide bore tubing, rigid pharyngeal curved suction tip, and soft catheter suction tips to include pediatric sizes 6 fr. through 14 fr.
- 2) bulb syringe
- 3) house oxygen and portable oxygen bottle, each with a variable flow regulator.
- 4) transparent, non-re breather oxygen masks and nasal cannula in adult sizes, and transparent, non-re breather oxygen masks in pediatric sizes.
- 5) hand operated, self inflating bag-valve mask resuscitators with oxygen reservoirs and standard 15mm /21mm fittings in the following sizes:
 - a. 500cc bag for infant and neonate
 - b. 750cc bag for children
 - c. 1000cc bag for adult
 - d. Transparent masks for infants, neonate patients, children and adults.
- 6) nasopharyngeal airways in adult sizes 24 fr. through 32 fr.
- 7) oropharyngeal airways in adult and pediatric sizes to include: infant, child, small adult, adult and large adult.

B) Patient Assessment Equipment

- 1) blood pressure cuffs to include large adult, regular adult, child and infant

sizes.

- 2) stethoscope.
- 3) penlight.

C) Splinting Equipment

- 1) lower extremity traction splint.
- 2) upper and lower extremity splints.
- 3) long board, scoop™, vacuum mattress or equivalent with appropriate accessories to immobilize the patient from head to heels.
- 4) short board, K.E.D. or equivalent, with the ability to immobilize the patient from head to pelvis.
- 5) pediatric spine board or adult spine board that can be adapted for pediatric use.
- 6) adult and pediatric head immobilization equipment.
- 7) adult and pediatric cervical spine immobilization equipment per medical director protocol.

D) Dressing Materials

- 1) bandages - various types and sizes per agency needs and medical director protocol.
- 2) multiple dressings (including occlusive dressings), various sizes per ambulance service requirements, needs and medical director protocol.
- 3) sterile burn sheets.
- 4) adhesive tape per ambulance service requirements, needs and medical director protocol.

1. Obstetrical Supplies

- 1) sterile ob kit to include: towels, 4x4 dressings, umbilical tape or cord clamps, scissors, bulb syringe, sterile gloves and thermal absorbent blanket.
- 2) neonate stocking cap or equivalent.

2. Miscellaneous Equipment

- 1) heavy bandage scissors, shears or equivalent capable of cutting clothing, belts, boots, etc.
- 2) two working flashlights.
- 3) blankets and appropriate heat source for the ambulance patient compartment.

G) Ambulance Service Medical Treatment Protocols.

H) Communications Equipment

- 1) All communications equipment shall be maintained in good working order. The communications equipment must be capable of transmitting and receiving clear voice communications.
- 2) Two-way communications that will enable the ambulance personnel to communicate with:
 - a. ambulance service's dispatch.
 - b. medical control facility or a physician
 - c. receiving facilities
 - d. mutual aid agencies

I) Extrication Equipment

- 1) Each ambulance should carry extrication equipment appropriate for the level of extrication the ambulance service provides and in accordance with the requirements established by the county in which the ambulance is licensed.

J) Body Substance Isolation (BSI) Equipment Properly Sized To Fit All Personnel

- 1) non-sterile disposable gloves, to include a minimum 1 box of latex free gloves.
- 2) protective eyewear.
- 3) non-sterile surgical masks.

- 4) safety protection gear for extrication consistent with the ambulance service extrication capabilities.
- 5) sharps containers for the appropriate disposal and storage of medical waste and biohazards.
- 6) HEPA masks, which can be of universal size.

K) Safety Equipment

- 1) a set of three (3) warning reflectors.
- 2) one (1) ten pound (10 lb.) or two (2) five pound (5 lb.) ABC fire extinguishers, with a minimum of one extinguisher accessible from the patient compartment and vehicle exterior.
- 3) child safety seat or appropriate protective restraints for patients, crew, accompanying family members and other vehicle occupants.
- 4) properly secured patient transport system (i.e. wheeled stretcher).
- 5) triage tags as approved by the department.

12.9.3 Minimum Equipment Requirement for Advanced Life Support Ambulances

A) All Equipment Listed In 9.2

B) Ventilation Equipment

- 1) adult and pediatric endotracheal intubation equipment to include stylets and an endotracheal tube stabilization device and endotracheal tubes uncuffed range from 2/5 – 5/5, and cuffed size range from 6.0-8.0 per medical director protocol.
- 2) laryngoscope and blades, straight and/or curved of sizes 0-4.
- 3) adult and pediatric magill forceps.
- 4) end tidal co² detector or alternative device, approved by the FDA, for determining end tube placement.

C) Patient Assessment Equipment

- 1) portable, battery operated cardiac monitor- defibrillator with strip chart recorder and adult and pediatric EKG electrodes and defibrillation capabilities.

- 2) pulse oximeter with adult and pediatric probes.
- 3) electronic blood glucose measuring device.

D) Intravenous Equipment

- 1) adult and pediatric intravenous solutions and administration equipment per medical director protocol.
- 2) adult and pediatric intravenous arm boards.

E) Pharmacological Agents

- 1) pharmacological agents and delivery devices per medical director protocol.
- 2) pediatric “length based” device for sizing drug dosage calculations and sizing equipment.