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Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission:	Department of Health
Division:	Emergency Medical Services
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Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact:	ADA Coordinator at the Division of Emergency Medical Services
Address:	227 French Landing Drive, Suite 303 Heritage Place Metrocenter, Nashville, TN 37243
Phone:	615-741-2584
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Hearing Location(s) (for additional locations, copy and paste table)

Address 1:	Iris Conference Room, Heritage Place Metrocenter		
Address 2:	227 French Landing Drive		
City:	Nashville, TN		
Zip:	37243		
Hearing Date :	03/29/2012		
Hearing Time:	9:00 A.M.	<input checked="" type="checkbox"/> CST/CDT	<input type="checkbox"/> EST/EDT

Additional Hearing Information:

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Revision Type (check all that apply):

- Amendment
 New
 Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1200-12-01	General Rules
Rule Number	Rule Title
1200-12-01-.04	Emergency Medical Technician (EMT)

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

Rule 1200-12-01-.04 Emergency Medical Technician (EMT) is amended by changing the title to Emergency Medical Services Personnel Certification and Licensure and by deleting the rule in its entirety and substituting instead the following language, so that, as amended, the new Rule shall read:

1200-12-01-.04 Emergency Medical Services Personnel Certification and Licensure.

- (1) Scope of Practice for Emergency Medical Services Personnel.
 - (a) Definitions. Terms used in this rule shall be defined as follows:
 1. "Advanced Emergency Medical Technician (AEMT)" means a person who has successfully completed the Advanced Emergency Medical Technician training course, has qualified by examinations to perform pre-hospital emergency patient care, and is to provide basic and limited advanced emergency medical care, under medical oversight, pre-hospital and during transportation for critical and emergent patients, who access the emergency medical system.
 2. "Board" means the Tennessee Emergency Medical Services Board.
 3. "Department" means the Tennessee Department of Health.
 4. "Division" means the Division of Emergency Medical Services.
 5. "Emergency Medical Responder (EMR)" means a person who has successfully completed the Emergency Medical Responder training course and has qualified by examinations to perform lifesaving interventions while awaiting additional EMS response and to assist higher level personnel at the scene and during transport, under medical oversight.
 6. "Emergency Medical Technician (EMT)" means a person who has successfully completed the Emergency Medical Technician training course, has qualified by examinations to perform pre-hospital emergency patient care, and is to provide basic emergency medical care, under medical oversight, pre-hospital and during transportation for critical and emergent patients, who access the emergency medical system.
 7. "Medical Oversight" means the ultimate responsible authority for the medical actions taken by a pre-hospital provider or EMS system and the process of performing actions to ensure that care provided by EMS personnel is appropriate.
 8. "Paramedic" means a person who has successfully completed an accredited Paramedic Program at the certificate or associate degree level, has qualified by examinations to perform pre-hospital emergency patient care, and is to provide basic and advanced emergency medical care, under medical oversight, pre-hospital and during transportation for critical and emergent patients, who access the emergency medical system.
 - (b) Scope of Practice for Certified Emergency Medical Responder (EMR).
 1. An EMR will perform lifesaving interventions while awaiting additional EMS response and will assist higher level personnel at the scene and during transport.

2. An EMR functions as part of a comprehensive EMS response under medical oversight.
 3. A certified EMR shall possess skills as defined by the National Scope of Practice and will utilize the following skills in practice:
 - (i) Airway and Breathing
 - (I) Insertion of airway adjuncts intended to go into the oropharynx;
 - (II) Use of positive pressure ventilation devices such as the bag-valve-mask;
 - (III) Suction of the upper airway; and
 - (IV) Supplemental oxygen therapy.
 - (ii) Pharmacological interventions
 - (I) Use of unit dose auto-injectors for the administration of life saving medications intended for self or peer rescue in hazardous materials situations (MARK I, etc.).
 - (iii) Medical/Cardiac Care
 - (I) Use of an automated external defibrillator.
 - (iv) Trauma Care
 - (I) Manual stabilization of suspected cervical spine injuries;
 - (II) Manual stabilization of extremity fractures;
 - (III) Bleeding control; and
 - (IV) Emergency moves.
 4. An EMR's scope of practice may be extended to include skills the Board authorizes and approves.
- (c) Scope of Practice for a Licensed Emergency Medical Technician (EMT).
1. An EMT will provide basic emergency medical care for critical and emergent patients who access the emergency medical system.
 2. An EMT functions as part of a comprehensive EMS response under medical oversight.
 3. The EMT's scope of practice includes the skills listed within the EMR scope of practice as well as the "Minimum Psychomotor" skills set as identified in the National Scope of Practice for EMTs, including but not limited to, non-invasive interventions to reduce the morbidity and mortality associated with acute out-of-hospital medical and traumatic emergencies for patients of all ages. These skills include:
 - (i) Airway and Breathing:
 - (I) Insertion of airway adjuncts intended to go into the oropharynx or nasopharynx;

- (II) Use of positive pressure ventilation devices such as the bag-valve-mask;
 - (III) Use of positive pressure ventilation devices such as manually triggered ventilators and automatic transport ventilators;
 - (IV) Suction of the upper airway; and
 - (V) Supplemental oxygen therapy.
- (ii) Pharmacological Interventions:
- (I) Use of unit dose auto-injectors for the administration of life saving medications intended for self or peer rescue in hazardous materials situations (MARK I, etc.);
 - (II) Assist patients in taking their own prescribed medications; and
 - (III) Administration of the following over-the-counter medications with appropriate medical oversight, including the following:
 - I. Oral glucose for suspected hypoglycemia; and
 - II. Aspirin for chest pain of suspected ischemic origin.
- (iii) Medical/Cardiac Care:
- (I) Use of an automated external defibrillator.
- (iv) Trauma Care:
- (I) Manual stabilization of suspected cervical spine injuries;
 - (II) Manual stabilization of extremity fractures;
 - (III) Bleeding control; and
 - (IV) Emergency moves; including the following:
 - I. Application and inflation of the pneumatic anti-shock garment (PASG) for fracture stabilization.
4. An EMT's scope of practice may be extended to include skills the Board authorizes and approves.
- (d) Scope of Practice for a Licensed Advanced Emergency Medical Technician (AEMT).
- 1. An AEMT will provide basic and advanced skills that are effective and can be performed safely in an out-of-hospital setting with medical oversight and limited training and focused on the acute management and transportation of critical and emergent patients.
 - 2. An AEMT functions as part of a comprehensive EMS response under medical oversight.
 - 3. The AEMT's scope of practice includes the skills listed within that of an EMT as well as the "Minimum Psychomotor" skills set identified in the National Scope of Practice for Advanced EMT including, but not limited to basic non-invasive and advanced invasive interventions to reduce the morbidity and mortality associated with acute out-of-hospital medical and traumatic emergencies for patients of all ages. These skills include:

- (i) Airway and Breathing:
 - (I) Insertion of airway adjuncts intended to go into the oropharynx or nasopharynx;
 - I. Insertion of airways that are not intended to be placed into the trachea;
 - (II) Use of positive pressure ventilation devices such as the bag-valve-mask;
 - (III) Use of positive pressure ventilation devices such as manually triggered ventilators and automatic transport ventilators;
 - (IV) Suction of the upper airway:
 - I. Tracheobronchial suctioning of an already intubated patient.
 - (V) Supplemental oxygen therapy.
- (ii) Assessment
- (iii) Pharmacological Interventions:
 - (I) Dose auto-injectors for the administration of life saving medications intended for self or peer rescue in hazardous materials situations (MARK I, etc.)
 - (II) Assist patients in taking their own prescribed medications;
 - (III) Administration of the following over-the-counter medications with appropriate medical oversight:
 - I. Oral glucose for suspected hypoglycemia;
 - II. Aspirin for chest pain of suspected ischemic origin;
 - III. Establish and maintain peripheral intravenous access, including the following:
 - A. Establish and maintain intraosseous access in a pediatric patient;
 - B. Administer (non-medicated) intravenous fluid therapy;
 - IV. Administer sublingual nitroglycerine to a patient experiencing chest pain of suspected ischemic origin;
 - V. Administer subcutaneous or intramuscular epinephrine to a patient in anaphylaxis;
 - VI. Administer glucagon to a hypoglycemic patient;
 - VII. Administer intravenous D50 to a hypoglycemic patient;
 - VIII. Administer inhaled beta agonists to a patient experiencing difficulty breathing and wheezing;

- IX. Administer a narcotic antagonist to a patient suspected of narcotic overdose; and
 - X. Assist in patient self-administered nitrous oxide for pain relief.
- (iv) Medical/Cardiac Care:
 - (I) Use of an automated external defibrillator.
 - (v) Trauma Care:
 - (I) Manual stabilization of suspected cervical spine injuries;
 - (II) Manual stabilization of extremity fractures;
 - (III) Bleeding control; and
 - (IV) Emergency moves, including the following:
 - A. Application and inflation of the pneumatic anti-shock garment (PASG) for fracture stabilization.
4. An AEMT's scope of practice may be extended to include skills the Board authorizes and approves.
- (e) Scope of Practice for a Licensed Paramedic.
1. A Paramedic will provide basic and advanced skills that are effective and can be performed safely in an out-of-hospital setting with medical oversight and limited training and focused on the acute management and transportation of critical and emergent patients.
 2. Paramedics also function as part of a comprehensive EMS response, under medical oversight, to perform interventions with the basic and advanced equipment typically found on an ambulance.
 3. The Paramedic scope of practice includes all basic knowledge and skills of an AEMT as well as the "Minimum Psychomotor" skills set identified in the National Scope of Practice for a Paramedic to include the following advanced invasive and non invasive interventions to reduce the morbidity and mortality associated with acute out-of-hospital medical and traumatic emergencies for patients of all ages. These skills include:
 - (i) Airway and Breathing:
 - (I) Perform endotracheal intubation;
 - (II) Perform percutaneous non-surgical cricothyrotomy;
 - (III) Decompress the pleural space; and
 - (IV) Perform gastric decompression.
 - (ii) Pharmacological Interventions:
 - (I) Insert an intraosseous cannula;
 - (II) Enteral and parenteral administration of approved prescription medications;

- (III) Access indwelling catheters and implanted central IV ports for fluid and medication administration;
 - (IV) Administer medications by IV infusion;
 - (V) Maintain an infusion of blood or blood products; and
 - (VI) Other medications which may be deemed necessary by the ordering physician.
- (iii) Medical/Cardiac Care:
 - (I) Perform cardioversion, manual defibrillation, and transcutaneous pacing.
- (4) A paramedic's scope of practice may be extended to include skills the Board authorizes and approves.
- (2) Emergency Medical Responder Initial Certification, Renewal, and Reinstatement Requirements.
 - (a) Initial Certification as an EMR. To be eligible for initial certification as an EMR by the Division, an applicant shall meet the following requirements:
 - 1. Be at least seventeen (17) years of age;
 - 2. Be able to read, write and speak the English language;
 - 3. Have no documented history within the past three (3) years of habitual intoxication or personal misuse of any drugs or intoxicating liquors, in such a manner as to adversely affect the applicant's ability to practice as an EMR;
 - 4. Hold a signed current Basic Cardiopulmonary Resuscitation Healthcare Provider card;
 - 5. Successfully complete all aspects of a Board approved Emergency Medical Responder course, including but not limited to attendance requirements;
 - 6. Achieve an established passing score on a Board approved examination within one (1) year of completion of an EMR training course;
 - (i) Applicants who fail to pass the examination shall be eligible to reapply for examination;
 - 7. Remit the appropriate certification and application fees, as determined by rule, with the completed form supplied by the Division, with all required certification and course completion documents, as well as all other required documents, and proof of successful completion of written examinations, and payment of appropriate fees within one (1) year of completion of EMR course.
 - 8. If an applicant does not complete all requirements for licensure within (1) one year of date of initial application, the application shall be considered abandoned and the Division shall destroy it.
 - 9. Validity of initial EMR certification shall not exceed thirty-six (36) months.
 - (b) Post Initial Certification Requirements for an EMR.
 - 1. An EMR shall receive training and show competency under EMS Agency authorized medical direction to be permitted to perform Board approved extended skills and/or procedures.

2. The EMS Agency medical director shall monitor performance through a Board approved quality assurance program.
- (c) Renewal Requirements for Emergency Medical Responder Certification. To be eligible for renewal of their certification as an EMR by the Division, an applicant shall meet the following requirements:
1. File the Division provided renewal application and submission of renewal fees, as determined by rule;
 2. Submit a copy of a signed current Basic Cardiopulmonary Resuscitation Healthcare Provider card;
 3. Submit verification of one of the following:
 - (i) Successful completion of Board approved refresher training course; or
 - (ii) Satisfactory completion of the examination as established in part (2)(a)6; or
 - (iii) Completion of ten (10) Continuing Education Contact Hours, or one (1) college credit hour in EMR related studies, as approved by the Division. A minimum of two (2) hours must be in pediatric related topics.
 - (l) Documentation of skills competency must also be submitted to the Division administrative office with documentation of continuing education.
 4. Continuing education contact hours shall be obtained through a Division approved agency or institution or program.
 5. Validity of renewed EMR certification shall not exceed twenty-four (24) months.
- (d) Reinstatement Requirements for Emergency Medical Responder Certification.
1. Those persons who fail to timely renew certification are eligible to apply for reinstatement of their certification as an EMR by the Division, if the applicant completes the following requirements:
 - (i) Submission of approved reinstatement application;
 - (ii) Payment of reinstatement fee as determined by rule;
 - (iii) Submission of copy of a signed current Basic Cardiopulmonary Resuscitation Healthcare Provider card.
 - (iv) Those persons applying for reinstatement of their certification less than sixty (60) days after expiration of previous certification shall present documentation of successful completion of one of the following:
 - I. required continuing education requirements and documentation of skills competency;
 - II. the Board approved refresher course; or
 - III. the examination as required in parts (2)(a)5 and 6.
- (e) Those persons applying for reinstatement of their certification more than sixty (60) days after expiration of previous certification shall present documentation of successful completion of both the Board approved refresher course and the examination as required in parts (2)(a)5 and 6.

- (3) Initial Licensure Procedure for Emergency Medical Services Personnel.
- (a) All applicants for licensure pursuant to T.C.A. Title 68, Chapter 140 shall comply with the following requirements to be eligible for licensure:
1. Be at least eighteen (18) years of age;
 2. Be able to read, write, and speak the English language;
 3. Possess a minimum of an academic high school diploma or a general equivalency diploma (G.E.D.);
 4. Have no documented history within the past three (3) years of habitual intoxication or personal misuse of any drugs or the use of intoxicating liquors, in such a manner as to adversely affect the person's ability to practice emergency medical services.
 5. Present evidence to the Division of Emergency Medical Services of a medical examination certifying physical health sufficient to conduct activities associated with patient care, including, but not limited to, visual acuity, speech and hearing, use of all extremities, absence of musculoskeletal deformities, absence of communicable diseases, and suitable emotional fitness to provide for the care and lifting of the ill or injured. This information shall be provided on a form approved by the Board and shall be consistent with the provisions of the Americans with Disabilities Act
 6. Successfully complete Board approved Tennessee training; for the level at which licensure is being requested.
 7. Qualify by examination to perform pre-hospital care.
 - (i) Each applicant shall successfully complete both a Board approved written and practical examination, for the level at which licensure is being requested.
 - (ii) Applicants who fail to pass the examination shall be eligible to reapply for examination.
 - (iii) Applicants must successfully complete all requirements for licensure within two (2) years of completion of training.
 8. Submit a completed application for licensure form as provided by the Division with all necessary documents, attachments and appropriate fees.
 9. If an applicant does not complete all requirements for licensure within (2) two years of date of completion of initial training and/or application, his application shall be considered abandoned and the Division shall destroy it.
 10. Remit the appropriate licensure and application fees as determined by rule; and
 11. Cause the result of a criminal background check to be submitted to the administrative office of the Division, directly from the vendor identified in the Division's licensure application materials. Criminal background check shall be valid for one (1) year from the date it is obtained for filing with the Division.
- (b) Initial Licensure for an EMT. In addition to meeting all licensure requirements listed in subparagraph (a), to be eligible for licensure an applicant for an EMT license shall have knowledge of, and is expected to be competent in, all of the skills of the Emergency Medical Responder.

- (c) Initial Licensure for an AEMT. In addition to meeting all licensure requirements listed in subparagraph (a), to be eligible for licensure an applicant for an AEMT license shall be competent in the basic knowledge and skills of an Emergency Medical Technician.
 - 1. AEMT training shall begin no later than one hundred and twenty (120) days after successful completion of EMT training; or
 - 2. AEMT training beginning more than one hundred and twenty (120) days after successful completion of Board approved EMT training or failure to successfully complete an AEMT training course shall require current Tennessee EMT licensure prior to admission into AEMT training.
 - (d) Initial Licensure for a Paramedic. In addition to meeting all licensure requirements listed in subparagraph (a), to be eligible for licensure an applicant for a Paramedic license shall:
 - 1. Demonstrate knowledge and competence in the basic knowledge and skills of an AEMT and possess the complex knowledge and skills necessary to provide patient care and transportation; and
 - 2. Hold a current Tennessee license as an AEMT.
 - (e) Post Initial Certification Requirements for licensed EMS personnel.
 - 1. Licensed emergency medical services personnel shall receive training and show competency under EMS agency authorized medical direction to be permitted to perform Board approved extended skills and/or procedures.
 - 2. The EMS agency medical director shall monitor performance through a Board approved quality assurance program.
- (4) Licensure Renewal for all Emergency Medical Services Personnel.
- (a) To be eligible for licensure renewal all EMS personnel must complete the following requirements prior to the expiration date of the license cycle:
 - 1. Submit the renewal application and appropriate renewal fee as determined by rule;
 - 2. Prior to license expiration date, successfully complete a Board approved renewal examination or the continuing education requirements for the licensure renewal. A renewal applicant using continuing education requirements shall produce proof of continuing education requirement upon a request for inspection.
 - (i) Certificates verifying the licensee's completion of the continuing education program(s) shall consist of one or more of the following:
 - (I) continuing education program's sponsor, date, length in hours awarded, program title, licensed licensee's name, and/or license number; or,
 - (II) an original letter on official stationery from the continuing education program's sponsor indicating date, length hours awarded, program title, licensed licensee's name, and/or license number.
 - (ii) Retention of independent documentation of completion of continuing education renewal requirements shall be maintained for all emergency medical services personnel as follows:

- (I) Independent documentation of completion of continuing education renewal requirements must be retained for a period of four (4) years from the end of the renewal period in which the requirement was acquired; and,
 - (II) This documentation must be maintained in a form available for production for inspection and verification, if requested by the Division during its verification process.
3. EMT Licensure Renewal. In addition to meeting all licensure renewal requirements listed in subparagraph (2)(a), an applicant for an EMT licensure renewal shall complete EMT continuing education requirements as follows, to be eligible for licensure renewal:
- (i) Maintain proof of successful completion of a board approved license renewal examination; or
 - (ii) Complete twenty (20) Board approved continuing education contact hours (A minimum of five (5) must be in pediatric related topics); or
 - (iii) Complete two (2.0) Division approved college credit hours in EMT-related studies, as approved by the Division.
4. AEMT Licensure Renewal. In addition to meeting all licensure renewal requirements listed in subparagraph (2)(a) an applicant for an AEMT licensure renewal shall complete AEMT continuing education requirements as follows, to be eligible for licensure renewal:
- (i) Maintain proof of successful completion of a board approved license renewal examination; or
 - (ii) Complete thirty (30) Board approved continuing education contact hours (A minimum of eight (8) must be in pediatric related topics.); or
 - (iii) Complete three (3.0) Division approved college credit hours in AEMT-related studies.
5. Paramedic Licensure Renewal. In addition to meeting all licensure renewal requirements listed in subparagraph (2)(a), an applicant for a Paramedic licensure renewal shall complete Paramedic continuing education requirements as follows, to be eligible for licensure renewal:
- (i) Maintain proof of successful completion of a board approved license renewal examination; or
 - (ii) Complete forty (40) Board approved continuing education contact hours (A minimum of ten (10) must be in pediatric related topics); or
 - (iii) Complete four (4.0) division approved semester college credit hours in Paramedic-related studies.
- (c) Licensure Reinstatement of a Lapsed License for All Emergency Medical Services Personnel.
1. Reinstatement of expired license within one (1) year of expiration for licensees showing "Good Cause." For the purpose of reinstatement renewal under the "Good Cause" provision of an emergency services personnel license which has expired, the following requirements shall be met by the applicant to be eligible for reinstatement:

- (i) The Division receives written notification and a request for reinstatement within one (1) year of expiration for "Good Cause" from the licensee. If no notification is initiated by the licensee, then "Good Cause" cannot be applied.
 - (I) "Good Cause" for delayed compliance with the regulations shall include:
 - I. personal illness or hospitalization;
 - II. extensive travel or relocation within the affected time period;
 - III. conflicting professional or educational schedules (military);
 - IV. immediate family illness or death; or
 - V. extraordinary circumstances beyond the control of the licensee.
 - (II) The following reasons shall not constitute "Good Cause":
 - I. failure to submit necessary forms or fees by the expiration date;
 - II. willful defiance of rules.
 - (ii) The licensee completes a continuing education or renewal examination within their prior license period and pays the reinstatement fee as specified by rule.
 - (iii) The Division receives the completed renewal application and appropriate documentation and the reinstatement fee as specified by rule within one (1) year of their expiration date.
2. Reinstatement less than one (1) year of expiration of the license for licensees not qualifying under the "Good Cause" provision. For the purpose of reinstatement of an emergency services personnel license which has expired, the following requirements shall be met by the applicant to be eligible for reinstatement:
- (i) The licensee successfully completes an EMS Board approved license renewal written examination for appropriate level of desired licensure;
 - (ii) The licensee pays all applicable fees as specified by rule; and,
 - (I) The Division receives the completed reinstatement application and appropriate documentation and the reinstatement fee as specified by rule within one (1) year after expiration of the license.
3. Reinstatement greater than one (1) year but less than two (2) years after expiration of the license. For the purpose of renewal of an emergency services personnel license which has expired, the following requirements shall be met by the applicant to be eligible for reinstatement:
- (i) The licensee successfully completes an EMS Board approved refresher course for appropriate level of desired licensure;

- (ii) The licensee successfully completes an EMS Board license renewal written and practical examination for appropriate level of desired licensure;
 - (iii) The licensee pays all applicable fees as specified by rule; and,
 - (iv) The Division receives the completed reinstatement application and appropriate documentation and the reinstatement fee as specified by rule within two (2) years after expiration of the license.
 - (v) The licensee shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check. Criminal background check shall be valid for one (1) year from the date it is obtained for filing with the Division.
4. Reinstatement greater than two (2) years after expiration of the license. When the license of an EMT or AEMT has lapsed for two (2) years or more, an licensee must complete the board approved training course for appropriate level of licensure in its entirety and comply with license requirements in effect under subparagraph (3)(a).
5. Reinstatement of a Paramedic license greater than two (2) years after expiration of the license. When the license of a Paramedic has lapsed for two (2) years or more, the licensee must complete the following requirements:
- (i) Officially document completion of a DOT EMT-Paramedic / Paramedic Training Program after January 1, 1977;
 - (ii) Show evidence of previous Tennessee licensure as a Paramedic;
 - (iii) Successfully complete board approved written and practical examinations;
 - (iv) Hold a current Advanced Cardiac Life Support (ACLS) provider or instructor certification from the American Heart Association;
 - (v) Hold a current Pre-hospital Trauma Life Support (PHTLS) or International Trauma Life Support (ITLS) certification as a provider or instructor;
 - (vi) Hold a current Pediatric Advanced Life Support (PALS) certification as a provider or instructor; and
 - (vii) Complete a state approved Paramedic Refresher Training Program or complete forty-eight (48) hours of Advanced Life Support training that overviews the topical content of the state approved Paramedic Refresher Training Program.
- (4) Reciprocity Requirements for Emergency Medical Services Personnel for Certification or Licensure.
- (a) Currently Certified or Licensed EMR, EMT, AEMT or Paramedic. Any EMR, EMT, AEMT or Paramedic who meets the following requirements is eligible to apply for reciprocity for certification or licensure:
 - 1. Applicant holds current certification or licensure from another state, country, or was certified/licensed while employed by the federal government;
 - 2. Applicant certified/licensed while employed by the federal government, but not certified or licensed currently by another state or country, holds current

certification/licensure from the National Registry of Emergency Medical Technicians for the level at which reciprocity is being requested;

3. Applicant has successfully completed a course or curriculum based on the National Emergency Medical Services Education Standards for EMR, EMT, or Advanced EMT or Paramedic has successfully completed a course or curriculum equivalent;
 4. Applicant submits appropriate documentation of training conducted by an authorized federally approved training agency, if applicant was trained while employed by the federal government;
 5. Applicant conforms to all license/certification requirements for Tennessee certification or license, for level at which reciprocity is being requested;
 6. Applicant demonstrates successful completion of all Board approved written and practical examinations, for level at which reciprocity is being requested; and,
 7. Applicant submits the appropriate application forms and fees, if applicable, to the Division.
 8. Applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check. Criminal background check shall be valid for six (6) months from the date it is obtained for filing with the Division.
- (5) Name or Address Change Notification Requirements.
- (a) Certified or Licensed EMS personnel shall notify the Division in writing or online through the Division's website of a change of name or address within thirty (30) days of such change.
 - (b) EMS Division notifications for any purpose, including but not limited to continuing education requirements, renewals or disciplinary actions, shall be posted to the address listed on file with the Division.
 - (c) Return by the post office of any Division notifications, which are posted to the address listed on file with the Division for the licensee, shall be interpreted as a willful violation for failure to retain a current address on file by the licensee.
- (6) Retirement of an EMS Certification or Professional License and Title Privilege
- (a) Retirement of certification or license. A currently certified EMR or licensed EMT, AEMT or Paramedic may be eligible to retire his/her license upon submitting the following information to the Division:
 - (i) A properly completed retirement affidavit form to be furnished by the Division; and,
 - (ii) All other necessary documentation, if applicable, to the Division.
 - (b) EMS Professional Title Privilege. Any EMS professional who has filed the required information for permanent retirement of his/her license and received confirmation that the license will be retired, as requested, shall be permitted to use the following appropriate title for the licensee's level of licensure:
 - (i) For emergency medical responder, EMR Retired or EMRR;
 - (ii) For emergency medical technicians, EMT Retired or EMTR;
 - (iii) For advanced emergency medical technician, AEMT- Retired, or AEMT-R; or,

- (iv) For Paramedics, Paramedic – Retired or Paramedic - R.
- (7) Reinstatement of a Retired EMS Professional Certificate or License.
- (a) Reinstatement request within two (2) or less years of retirement of certificate or license. A reinstatement applicant whose certificate or license has been retired for two years or less may be eligible to reinstate his/her certificate or license by completing the following requirements:
 - (i) Completion of reinstatement requirements for expired certificate or license;
 - (ii) Submission of documentation to prove satisfactory health and good character; and,
 - (iii) Submission of the appropriate applications forms and fees applicable for reinstatement of the applicant's certificate or level of license to the Division within the two year period.
 - (iv) The applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check. Criminal background check shall be valid for one (1) year from the date it is obtained for filing with the Division.
 - (b) Reinstatement request after two (2) or more years of retirement of certificate or license. If a reinstatement applicant's certificate or license has been retired for more than two years, an applicant must complete the following requirements, to be eligible for reinstatement of the applicant's retired certificate or license:
 - (i) Successfully complete a Board approved Tennessee refresher course for the appropriate level of professional certificate or license for which reinstatement has been applied;
 - (ii) Successfully complete a Board approved written and practical examination for the level of licensure for which reinstatement has been applied;
 - (iii) Submit documentation to prove satisfactory health and good character of the applicant; and
 - (iv) Submit the appropriate application forms and fees applicable for reinstatement of the certificate or license to the Division.
 - (v) The applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check. Criminal background check shall be valid for one (1) year from the date it is obtained for filing with the Division.
- (8) Downgrade of a Current AEMT or Paramedic EMS Professional License
- (1) A currently licensed AEMT or Paramedic may be eligible to downgrade his/her license by submitting the following to the Division:
 - (i) A properly completed downgrade affidavit form to be furnished by the Division; and
 - (ii) All necessary documentation, if applicable.

Authority: T.C.A. § 68-140-304.

Rule 1200-12-01-.13 EMT and EMT Paramedic Training Programs is amended by changing the title to EMT, Advanced EMT and Paramedic Education Programs and by deleting the rule in its entirety and substituting instead the following language, so that, as amended, the new Rule shall read:

Rule 1200-12-01-.13 EMT, Advanced EMT and Paramedic Education Programs

- (1) Definitions. Terms used in this rule shall be defined as follows:
 - (a) "Approval" means the approval process the Tennessee Emergency Medical Services Board ("Board") uses to assure that EMT, Advanced EMT, and Paramedic education programs comply with the educational standards, requirements, and policies it adopts.
 - (b) "Approved Program" means an education program approved by the Tennessee Emergency Medical Services Board.
 - (c) "Contract or Agreement" means a written agreement between the school and the cooperating agency.
 - (d) "EMS Educational Institution" means an institution sponsoring an EMT, Advanced EMT or Paramedic education program shall be an accredited post-secondary educational institution, such as a university, college, community college, technical school, or fire department in accordance with T.C.A. § 68-140-327, or state agencies conducting classes for state law enforcement employees at a state law enforcement training academy, with adequate resources and dedication to educational endeavors.
 - (e) "Medical Director" means a physician with an unencumbered Tennessee license having experience and current knowledge of emergency care of acutely ill and/or traumatized patients. This individual shall be familiar with base station operation including communication with, and direction of, pre-hospital emergency units. The medical director must have knowledge of administrative problems affecting EMS personnel education programs and legislative issues regarding educational programs for the pre-hospital provider.
 - (f) "National Accreditation" means accreditation from the Commission on Accreditation of Allied Health Education ("CAAHE").
 - (g) "National Education Standards" shall mean national education standards developed from the National Scope of Practice for Emergency Medical Service Personnel as promulgated by the U.S. Department of Transportation, National Highway Traffic Safety Administration.
- (2) EMS Educational Programs:
 - (a) Any EMS Educational Institution sponsoring and EMT, Advanced EMT, or Paramedic education program to qualify applicants for licensure shall ensure that its program conforms, at a minimum, to the national educational standards developed from the National Scope of Practice for Emergency Medical Service Personnel promulgated by the U.S. Department of Transportation, National Highway Traffic Safety Administration which the EMS Board has approved, and such rules as it shall promulgate.
 - (b) Any EMS Educational Institution sponsoring an EMT, Advanced EMT or Paramedic education program shall adopt, at a minimum, all parts of the curricula as developed from the national education standards including skills, training requirements, and permitted practices and procedures for appropriate licensure classification which the EMS Board has adopted.
 - (c) The EMS Educational Institutions sponsoring EMS training programs shall:
 1. File a written request for Division approval with the EMS Division at least thirty (30) days prior to the start date of classes;

2. Ensure that the entity has sufficient supervised practice, equipment, and experience for each required clinical skill;
 3. Have a medical director whose affiliation is confirmed in writing;
 4. File a description of curriculum with the EMS Division; and
 5. Meet the instructor/student ratio approved by the Board.
- (d) Only students from Tennessee approved programs or those who have met reciprocity requirements shall be eligible for state licensure.
- (e) Purposes of Approval are as follows:
1. To set standards for education programs to prepare emergency medical services licensees to practice safely; and
 2. To ensure that graduates of an approved EMS Education institution are eligible for admission to the licensure examinations.
- (f) Approval shall be categorized, and awarded or revoked in accordance with the following criteria:
1. The Board may grant initial approval to a new program that has not been in operation long enough to graduate its first class but demonstrates its eligibility for full approval. The Board shall review programs for full approval one year after initial approval or when its first class of students graduates.
 2. Approval and renewal of approval shall be based on recommendations of the Division made to the Board based upon application information, survey and site visits, review of clinical experiences and documentation, instructor student ratio, instructor qualifications, and related evidence of continuing compliance with the regulations of the Board.
 3. The Board may grant approval for a period of five (5) years to a program that has met the requirements that are set forth by the Board and the policies of the Division of EMS.
 4. The Board may grant conditional approval to a program which has failed to maintain the standards and has been notified that it must meet the requirements within a specified time period or upon demonstration of compliance.
 5. The Board shall deny approval for cause, or it may be revoke or condition approval for failure to comply with the standards the Board establishes.
 6. If the institution does not correct deficiencies within the specified time, and until the Board approves such action, the education program shall not convene a subsequent class.
 7. Programs desiring to cease education activities shall notify the Director of EMS in writing.
- (g) Requirements for Approval.
1. Sponsorship/Affiliation
 - (i) EMS Educational Institutions must have affiliation agreements with Tennessee licensed Emergency Medical Services, and Tennessee licensed medical facilities or hospitals which are capable of supporting EMT, Advanced EMT and/or Paramedic education with sufficient

supervised practice and experience for the number of students enrolled in the program.

- (ii) The EMS educational institution must provide the financial support, facilities, and leadership capable of ensuring a sound educational program and appropriate services to faculty and students.
- (iii) The EMS educational institution shall maintain records of overall student competency in knowledge, skills and experience while maintaining the capability to endorse participants for the license examination.
- (iv) The EMS educational institution shall notify the Division of any proposed major curriculum or program change in writing which will be subject to Board approval.

2. Curriculum

(i) Program Goals and Objectives

- (I) The program shall have a written statement of program goals and objectives consistent with and responsive to the demonstrated needs and expectations of the various communities it serves.
- (II) Statements of goals and objectives shall provide the basis for program planning, implementation, and evaluation.
- (III) An advisory committee shall be designated and charged with assisting program and sponsoring institutional personnel in formulating appropriate goals and standards, monitoring needs and expectations, and ensuring program responsiveness to change.

(ii) Minimum Expectations

- (I) Program goals and objectives must include, but need not be limited to, providing assurance that graduates demonstrate entry-level competencies, as periodically defined by nationally accepted educational standards and scope of practice for the appropriate level of licensure.
- (II) The curriculum shall follow planned outlines that shall be kept on file for Division review that appropriately integrate lecture, laboratory, clinical, and field experience sequenced to assure efficient learning and opportunity for every student. Content and support courses shall include basic theoretical and scientific knowledge reflective of state of the art patient care.
- (III) The curriculum shall meet, or exceed, the national educational standards and competencies for the appropriate level of licensure as adopted in the United States Department of Transportation National Scope of Practice and Educational Standards.

3. Administration and Faculty

(i) Administration of EMS Educational Programs

- (I) EMS Institutions offering paramedic educational programs shall include the following:

- I. A full time Division authorized EMS Program Director, whose primary responsibility and fulltime commitment is to the educational program.
 - II. The Program Director shall have appropriate training and experience to fulfill the role of program director as indicated in rule 1200-12-01-.12(1).
 - III. The Program Director shall be responsible for the organization's administration periodic review, development and effectiveness of the paramedic educational program.
 - IV. The Program Director shall act as a liaison between faculty, the sponsoring agency, students, the local medical community, and the Division of Emergency Medical Services.
 - V. The Program Director is responsible for recruitment and the continued development of faculty to meet the needs of the institution
- (II) EMS Educational Institutions offering Advanced EMT education shall include the following;
- I. At a minimum, a Division authorized Advanced EMT Instructor Coordinator, who is responsible for the organization's administration periodic review, development and effectiveness of the paramedic educational program.
 - II. An EMS Program Director in EMS institutions authorized to provide Paramedic educational programs may also administer Advanced EMT educational programs.
- (III) EMS Educational Institutions offering EMT education shall include the following:
- I. At a minimum, a Division authorized EMT Instructor Coordinator, who is responsible for the organizations administration periodic review, development and effectiveness of the paramedic educational program.
 - II. An EMS Program Director in EMS institutions authorized to provide Paramedic or Advanced EMT educational programs may also administer EMT educational programs
- (IV) Medical Director. The program shall appoint a medical director who shall be responsible for reviewing and approving the educational content of the program's curriculum. The medical director shall:
- I. Review and approve the content and quality of the medical instruction and supervision the EMS educational program delivers;
 - II. Ensure that each student is appropriately assessed to assure that the student is making adequate progress toward the completion of the educational program; and

- III. Attest that each student has achieved the desired level of competence prior to graduation.
- (V) Instructional Faculty
- I. The faculty shall be authorized by the Division and qualified through academic preparation, training, and experience to teach the courses or topics to which they are assigned in the curriculum.
 - II. Faculty members shall demonstrate individual proficiency and qualifications by submitting a personal Curriculum Vitae that will be kept on file with the Program Director.
 - III. The number of faculty instructors shall be sufficient to provide instruction and supervision for each period of the program or field experience.
- (VI) An Authorized Paramedic Instructor/Coordinator shall be responsible for the delivery of instruction in a Paramedic education program.
- I. The Paramedic Instructor/Coordinator shall be knowledgeable in all aspects of pre-hospital care, capable of applying techniques and modalities of adult education, and of managing resources and resource personnel.
 - II. Paramedic Instructor Assistants shall be responsible for teaching practical skills to include: assisting the Program Director and/or Instructor/Coordinator in the delivery of instruction, evaluating student performance of skills under supervision of Program Director or Authorized Paramedic Instructor/Coordinator.
- (VII) An authorized Advanced EMT Instructor/Coordinator shall be responsible for the delivery of instruction in an Advanced EMT educational program.
- I. An authorized Advanced EMT Instructor/Coordinator shall be in the classroom for, at least but not limited to, the following:
 - A. Delivery of didactic material;
 - B. Demonstration of the psychomotor skills;
 - C. Verification of skill proficiency; and
 - D. Supervision of EMT Assistant Instructors.
 - II. The education program may utilize Authorized Advanced EMT Instructor Assistants for teaching practical skills including, but not limited to, assisting the Program Director and/or Advanced EMT Instructor Coordinator in the delivery of instruction and evaluating student performance of skills during a lab.

- (VIII) An authorized EMT Instructor/Coordinator shall be responsible for the delivery of instruction in an EMT educational program.
 - I. An authorized EMT Instructor/Coordinator shall be in the classroom for, at least but not limited to, the following:
 - A. Delivery of didactic material;
 - B. Demonstration of the psychomotor skills;
 - C. Verification of skill proficiency; and
 - D. Supervision of EMT Assistant Instructors.
 - II. The education program may utilize Authorized EMT Instructor Assistants for teaching practical skills including, but not limited to, assisting the Program Director and/or EMT Instructor/Coordinator in the delivery of instruction and evaluating student performance of skills during a lab.

4. Resources

(i) Finances

- (I) Financial resources adequate for the continued operation of the educational program shall be provided for each class of students enrolled.
- (II) There shall be a distinct budget with an accounting of financial resources required for operation of the educational program.

(ii) Facilities

(I) Instructional resources shall include:

- I. Classrooms, laboratories and administrative offices with sufficient space to accommodate the number of students matriculating in the program and the supporting faculty;
- II. Library resources, related to the curriculum, shall be readily accessible to students and shall include current EMS and medical periodicals, scientific books, audiovisual and self-instructional resources, and other references; and
- III. Available sufficient supplies and equipment to be used in the provision of instruction that are consistent with the needs of the curriculum and adequate for the students enrolled.

(II) Clinical Resources

- I. The educational program shall establish clinical affiliations that are confirmed by written affiliation agreements with the institutions and agencies that provide students with clinical experience under appropriate medical direction and clinical supervision.

- II. Students shall have access to an adequate number of patients and in distribution by sex and age who present common problems encountered in the delivery of basic and advanced emergency care.
- III. Students shall be assigned in clinical settings where experiences are educationally sufficient to achieve the national educational standards for the appropriate level of licensure.
- IV. Program instructors or hospital personnel, such as nurses or physicians, who have been approved by the program to so function, shall provide supervision in the clinical setting. The ratio of students to instructors in the clinical facilities shall be adequate to assure effective learning.
- V. Students shall be clearly identified by name plate, uniform, or other apparent means to distinguish them from graduate emergency medical services personnel, other health professionals, workers, and students.

(VII) Field Internship

- I. The program's field internship shall occur within an emergency medical system which demonstrates medical accountability. The student must be under direct supervision of preceptors the program and/or EMS services designate. Preceptors shall be physicians, nurses, advanced EMTs or paramedics. The program shall assure that there is appropriate, objective evaluation of student progress in acquiring the desired competencies in accordance with the national education standards.
- II. Field internship shall occur on an Advanced Life Support vehicle within an EMS system having capability of voice telecommunications with on-line medical direction. The vehicle shall be equipped with equipment and drugs necessary for basic and advanced life support.
- III. The majority of the field internship experience shall occur following the completion of the didactic and clinical phases of the program. It must be structured to assure that upon completion of this portion of the program, each student will achieve the desired competencies of the national educational standards.
- IV. Adequate manpower shall be available within the EMS system to assure that the assigned student is never a substitute for paid personnel or a required team member.

5. Students Admission and Conduct

- (i) Selection and Admission. Selection and admission practices for entrance into an EMT, Advanced EMT or Paramedic education program shall be based on the following criteria and shall be clearly defined and published by the institution and shall be non-discriminatory with respect to race, color, creed, sex, age, handicaps, or national origin.

- (I) Meet the admission requirements of the EMS educational institution.
- (II) Possess an academic high school diploma or general education equivalent.
- (III) Show good physical and mental health and possess no physical handicaps or disabilities which would impede the ability to fulfill the functions and responsibilities of an EMT, Advanced EMT or Paramedic.
- (IV) A physical examination form indicating physical health sufficient to perform the duties of an EMT, Advanced EMT or Paramedic shall be completed by a physician who has examined the individual. If there are any limitations in the individual ability to perform adequately, additional documentation shall be submitted from the appropriate professional evaluator which indicates the applicant's abilities to perform adequately (i.e.):
 - I. Speech impairment - Speech Pathologist;
 - II. Hearing impairment - Audiologist;
 - III. Physical handicap or disability - Orthopedist or Registered Physical Therapist; or
 - IV. Vision – Ophthalmologist.
- (V) Readmission or transfer of students shall be made in accordance with clearly defined and published practices of the institution which shall be non-discriminatory with respect to race, color, creed, sex, age, handicaps, or national origin.
- (VI) Dismissal. Students shall be subject to dismissal from the education program for cause.

6. Program Records

- (i) Each student record shall include the following:
 - (I) A transcript of high school graduation or graduate equivalent (GED) in each student's file;
 - (II) Medical evidence that the protection of students and the public from injury or the transmission of communicable diseases is assured for each student;
 - (III) A record of class and practice participation along with and evidence of competencies attained throughout the education program;
 - (IV) Copies of examinations and assessments of the student development and attainment of competencies;
 - (V) Sufficient information to document each student's satisfactory completion of all didactic, practical skills, laboratory, clinical, and field requirements.
 - (VI) Copies of proof of malpractice insurance on each student enrolled in the program with minimal coverage of \$1,000,000.00

which will extend for the entire duration of the education program; and

(VII) The records maintained by the institution shall be complete whether or not a student is successful in completing the prescribed course of instruction.

(ii) Each student academic records shall include:

(I) A descriptive synopsis of the current curriculum; and

(II) A statement of course objectives, copies of course outlines, class and laboratory schedules, clinical and field internship experience schedules, and teaching plans.

7. Student Admission. In addition to requirements for admission to all EMT education programs, applicants for admission to EMT Advanced Education programs shall meet requirements as follows:

(i) Hold a current Tennessee EMT license prior to admission; or

(ii) Have successfully completed the EMT education program within 120 days of beginning an Advanced EMT education program and have successfully completed a nationally approved EMT competency written and practical examination.

(5) Emergency Medical Technician-Paramedic Education Programs.

(a) All paramedic education programs shall make application for accreditation with CAAHE within two years of receiving board approval and shall be accredited by CAAHE within four years of program approval by the Board.

(b) Additional admission requirements for paramedic education programs.

1. To be eligible for admission an applicant shall be currently licensed as an Advanced Emergency Medical Technician in the State of Tennessee.

2. An applicant shall take the academic assessment examination deemed appropriate by the educational institution to determine academic eligibility. The applicant shall meet requirements for reading, writing and math at or above the 12th grade level for eligibility into the program.

3. Advanced EMT knowledge. The applicant having successfully completed an Advanced EMT license exam greater than one year prior to the start of Paramedic classes must successfully complete an Advanced EMT assessment written examination approved by the board.

4. An applicant shall be interviewed and evaluated. Each area evaluated in the interview shall be rated with a score of 1-5 depending on the quality of achievement, with 5 being the highest score and 1 being the lowest. Applicants selected shall receive an overall rating of 2.5 and above.

5. The applicant shall be interviewed by a committee of at least four (4) individuals and a representative from the Division of Emergency Medical Services. Committee members shall be selected from the following: an EMS educator, a registered nurse, a physician, a Paramedic, and/or an ambulance service director.

6. The following criteria shall be used for evaluation:

(i) EMS related experience;

- (ii) Level of maturity and motivation;
- (iii) Level of knowledge;
- (iv) Communication ability; and
- (v) Poise.

Authority: T.C.A. § 68-140-304.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: Feb. 2, 2012

Signature: Lucille F. Bond

Name of Officer: Lucille F. Bond

Assistant General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on: 2/3/12

Notary Public Signature: Theodora P. Wilkins

My commission expires on: 11/3/15



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Tre Hargett

Tre Hargett
Secretary of State

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