

Notice of  
Rulemaking Hearing

Tennessee Department of Health  
Division of Emergency Medical Services

There will be a hearing before the Tennessee Emergency Medical Services Board to consider the promulgation of amendments of rules pursuant to T.C.A. §§ 4-5-202, 4-5-204, 68-140-502, 68-140-504 and 68-140-508. The hearing will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Department of Health's Conference Center's Mockingbird Room on the First Floor of the Heritage Place Metrocenter Building located at, 227 French Landing Drive Nashville, Tennessee at 9:00 a.m., Central Standard Time, on the 19<sup>th</sup> day of November, 2007.

Any individuals with disabilities who wish to participate in these proceedings or review these filings should contact the Department of Health, Division of Emergency Medical Services to discuss any auxiliary aids or services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date or the date the party plans to review such filings, to allow time for the Division of Emergency Medical Services to determine how it may reasonably provide such aid or service. Initial contact may be made with Richard F. Land, Director of Ambulance Service Licensure and Regulation, Division of Emergency Medical Services, 227 French Landing Drive, Suite 303, Heritage Place Metrocenter, Nashville, TN 37243, telephone 615-532-5989.

For a copy of the entire text of the notice of rulemaking, contact Richard F. Land, Director of Ambulance Service Licensure and Regulation, Division of Emergency Medical Services, 227 French Landing Drive, Suite 303, Heritage Place Metrocenter, Nashville, TN 37243, telephone 615-532-5989.

Substance of Proposed Rules

Amendments of Rule

Rule 1200-12-1-.16 Emergency Medical First Responder shall be amended by deleting the present language of rule in its entirety, substituting instead the following language, so that as amended the rule shall read:

- (1) Definitions- The terms used in this rule shall be defined as follows:
  - (a) First Responder - means a person who has completed required training and who participates in an organized program of mobile pre-hospital emergency medical care.
  - (b) First Responder Certification - means successful participation and completion of the First Responder Course and certifying examinations.
  - (c) First Responder Course - means instruction in basic knowledge and skills necessary to provide emergency medical care to the sick and injured

to individuals who may respond before licensed Basic or Advanced Life Support units arrive.

- (d) First Responder Service - shall mean a service providing capabilities for mobile pre-hospital emergency medical care using emergency medical response vehicles.

(2) Operation of First Responder Services. A licensed ambulance service classified as a primary provider shall coordinate first response services within its service area. If the primary provider is a contracted ambulance service, the county or local government may designate a representative who shall coordinate first responder services within the service area of its jurisdiction. First responder services shall meet the following standards for participation in the community EMS system. To participate in the community EMS system, each First Responder Service shall:

- (a) Be a state-chartered or legally recognized organization or service sanctioned to perform emergency management, public safety, fire fighting, rescue, ambulance, or medical functions.
- (b) Provide a member on each response who is certified as a First Responder, Emergency Medical Technician, or EMT- Paramedic in Tennessee.

1. Personnel may provide the following additional procedures with devices and supplies consigned under medical direction:

- (i) First Responders and Emergency Medical Technicians trained in an appropriate program authorized by the Division may perform defibrillation in a pulseless, nonbreathing patient with an automated mode device.
- (ii) Emergency Medical Technicians-I.V. and EMT-Paramedics may administer:
  - (I) Intravenous fluids with appropriate administration devices.
  - (II) Airway retention with Board approved airway procedures.
- (iii) EMT-Paramedics and advanced life support personnel trained and authorized in accordance with these rules may perform skills or procedures as adopted in Rule 1200-12-1-.04(3).
- (iv) First Responders and Emergency Medical Technicians participating in a recognized first responder organization within the community EMS system may, upon completion of the approved training, periodic review training, and concurrent quality assurance of the local EMS system

Medical Director, utilize a dual-lumen airway device (such as the Combitube or Pharyngeal Tracheal Lumen airway) that has been approved by the EMS Board.

2. Such procedures shall be consistent with protocols or standing orders as established by the ambulance service medical director.
  3. Services shall provide at least six (6) hours of annual in-service training to all EMS First Responder personnel, in a plan and with instructors approved by the medical director.
- (c) Provide services twenty-four (24) hours a day, seven (7) days a week, and notify the primary service and dispatching agent of any time period in which the service is not available or staffed for emergency medical response.
- (d) Provide minimum equipment and supplies and such other equipment and supplies as shall be mutually adopted under the agreement with the primary ambulance service and medical director. The following minimum equipment shall be provided:
1. Emergency Medical Care (Jump) Kit containing:
    - (i) Dressings and bandaging supplies, with adhesive tape, bandaids, sterile 4" gauze pads, sterile ABD pads, 3" or wider gauze roller bandages, bandage shears, occlusive dressing materials, at least four triangular bandages, and burn sheets.
    - (ii) Patient assessment and protective supplies including a flashlight, disposable gloves, antibacterial wipes or solution with tissues, trash bags, an adult blood pressure cuff with manometer and a stethoscope.
  2. Resuscitative devices including oral airways in at least five sizes; a pocket mask; suction device capable of 12 inches vacuum with suction tips for oropharyngeal suction; and, an oxygen administration unit, capable of 2 to 15 liters per minute flow rate with a minimum 150 liter supply.
  3. Splints for upper and lower extremities.
  4. Patient handling equipment including a blanket and appropriate semi-rigid extrication collars.
- (e) Develop and maintain a memorandum of understanding or agreement of coordination within the service area with the primary provider of emergency ambulance services. If the primary provider is a contracted ambulance service, said agreement shall be developed and maintained

with the designated representative of the county or local government. Such agreement will provide for policies and procedures for the following:

1. Personnel and staffing, including a roster of response personnel and approved procedures for such personnel, and the crew component operational for emergency medical response.
  2. Designation of vehicles to be operated as prehospital emergency response vehicles, including unit identifiers and station or location from which vehicles will be operated.
  3. Nature of calls for which first response services will be dispatched, and dispatch and notification procedures that assure resources are simultaneously dispatched and that ambulance dispatch is not deferred or delayed.
  4. Radio communications and procedures between medical response vehicles and emergency ambulance services.
  5. On-scene coordination, scene control and responsibilities of the individuals in attendance by level of training.
  6. Medical direction and protocols and/or standing orders under the authority of the ambulance service medical director.
  7. Exchange and recovery of required minimum equipment and supplies and additional items adopted for local use.
  8. Exchange of patient information, records and reports, and quality assurance procedures.
  9. Terms of the agreement including effective dates and provisions for termination or amendment.
- (f) First response services shall maintain professional liability insurance providing indemnity to emergency care personnel and the organization. Each first response service shall maintain the minimum liability coverage which are set forth in T.C.A. § 29-20-403.

- (3) First Responder Training Programs:
- (a) Shall utilize texts and curriculums approved by the Board.
  - (b) Class size shall not exceed twenty-five (25) students per instructor.
  - (c) Course must be conducted by an instructor authorized by the Division.
  - (d) Shall obtain course approval from the division.
  - (e) Shall provide an attendance policy acceptable to the division.
  - (e) Shall maintain accurate attendance records.
  - (f) Must maintain student records, such as exams, attendance records and skills verification for 5 years.
  - (g) Must provide documentation of a student's successful completion of course, attendance, and verification of skills competency to the

division.

- (h) Must provide adequate classroom space with adequate lighting, ventilation.
  - (i) Must provide adequate lab space for skills practice.
  - (j) Must assure adequate audio visual instructional aids and supplies are available.
  - (k) Must provide adequate equipment for skills training.
- (4) First Responder Certification requirements:
- (a) Must be at least seventeen (17) years of age
  - (b) Must be able to read, write and speak the English language
  - (c) Must be currently certified in Basic Cardiopulmonary Resuscitation
  - (d) Must meet all attendance requirements of training program.
  - (e) Must successfully complete an approved First Responder Course
  - (f) Must successfully complete written examinations within one (1) year of completion of First Responder course
    - 1. Achieve a passing score on a Board approved written examination with a minimum score as established by the Board.
    - 2. Applicants who fail to pass the examination shall be eligible to reapply for examination.
  - (g) Must submit an Application for certification form as provided by the Division of Emergency Medical Services.
  - (h) Must remit the appropriate certification and application fees, as determined under rule 1200-12-1-.06.
  - (i) Certification shall be issued for a period not to exceed two years.
- (5) First Responder renewal certification:
- (a) Certifications may be renewed upon filing an application, possession of a current Cardiopulmonary Resuscitation card verifying successful completion of a basic life support course which includes automatic external defibrillation for health care professionals, and verification of one of the following:
    - 1. Successful completion of refresher training course of at least sixteen (16) hours meeting the refresher course curriculum

approved by the board; or

2. Satisfactory completion of an approved renewal examination.;  
or

3. Completion of ten (10) continuing education hours in the following areas:

(i) Preparatory: one (1) hour consisting of:

(I) EMS systems

(II) Well being of the first responder

(III) Legal and ethical issues

(IV) Human body

(V) Lifting and moving patients

(ii) Airway: two (2) hours

(iii) Patient assessment: two (2) hours

(iv) Circulation: one (1) hour

(v) Illness and injury: two (2) hours

(I) Medical: one (1) hour

(II) Trauma: one (1) hour

(vi) Children and childbirth: one (1) hour

(vii) Rescue and EMS operations: one (1) hour.

(b) Those persons who fail to timely renew certification as provided by law are subject to the following:

1. Late renewal within sixty (60) days or less from the expiration of certification will require payment of a twenty-five dollar (\$25.00) reinstatement fee, and in addition to CPR certification, either by the approved written examination or the required refresher course

2. Reinstatement of certification sought to be renewed more than sixty (60) days after expiration of certification but less than two years will require payment of a twenty-five (\$25.00) reinstatement fee and in addition to CPR certification, successful completion of both the refresher course and the approved written examination

- (c) Out-of-State requirements for certification: Any First Responder who holds a current certification in another state and who has completed an approved US Department of Transportation First Responder Course may apply for Tennessee First Responder certification by complying with the following:
  - 1. Conform to all certification requirements for Tennessee First Responder; and,
  - 2. successful completion of any EMS Board approved written and practical examinations; and,
  - 3. submit the appropriate application forms and fees, if applicable, to the Division of Emergency Medical Services.
  
- (6) Official response shall be performed only as assigned upon the specific policy guidelines of the coordinating dispatch agency responsible for dispatching emergency ambulances and/or an emergency (911) communications district. No emergency medical first responder or emergency medical response vehicle shall be authorized to make an unofficial response on the basis of information obtained by monitoring a radio frequency of a law enforcement, ambulance service, fire department, rescue squad, or public safety agency.

Authority: §§ 4-5-202; 4-5-204, 68-140-504, 68-140-506, 68-140-508, and 68-140-517.

Rule 1200-12-1-.12 Authorization of Emergency Medical Services Educators is amended by changing the caption and by adding the following language as a new paragraph (6) so that as amended, the rule shall read:

- (6) First Responder Course Coordinators/Instructor shall mean an individual responsible for the overall coordination of the First Responder Program. The individual shall act as a liaison between the sponsoring agency, students, the local medical community and the Division of Emergency Medical Services. The individual is also responsible for the delivery of didactic material, demonstration of the psychomotor skills, and verification of skill proficiency.
  - (a) The minimal qualifications for First Responder Instructor / Coordinator shall be:
    - 1. Currently licensed as a Tennessee EMT-Basic or Paramedic without history of revocation, denial, or suspension of licensure



and nominated by a sponsoring EMS Agency.

2. Must be certified as a Cardiopulmonary Resuscitation Instructor.
3. Pre-Hospital Experience: Minimum of one year practicing in the pre-hospital environment in Tennessee.
4. Letter of recommendation from sponsoring EMS agency.

(b) Authorization Renewal shall be contingent upon:

1. Maintaining current Tennessee licensure as an Emergency Medical Technician-Basic or Paramedic without disciplinary action.
2. Maintain Current CPR instructor endorsement
3. A letter of recommendation for reauthorization from sponsoring EMS Agency.
4. A letter of recommendation for reauthorization from Regional EMS Consultant.
5. Completion of an EMS Board approved Instructor Course
6. Attendance at an annual First Responder Instructor Update as mandated by the Division of Emergency Medical Services.

(7) Individuals with Instructor Authorization may coordinate and instruct at a lower level of authorization but not above their level of authorization.

Authority: T.C.A. §§ 4-5-202,68-140-504, 68-140-505, and 68-140-508

The notice of rulemaking set out herein was properly filed in the Department of State on the 29th day of September, 2007. (FS 09-53-07; DBID 743)