

Rulemaking Hearing Rules
of the
Tennessee Department of Health
Bureau of Health Licensure and Regulation
Division of Emergency Medical Services

Chapter 1200-12-1
General Rules

Table of Contents
Amendments of Rules

Chapter 1200-12-1-.16 Emergency Medical First Responders

Paragraph (2) of Rule 1200-12-1-.16 Emergency Medical First Responders is amended by deleting the present language of paragraph (2) in its entirety and substituting the following language so that as amended the paragraph shall read:

- (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).
 - 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.

Subparagraph (c) of paragraph (6) of Rule 1200-12-1-.16 Emergency Medical First Responders is amended by deleting the present language of the subparagraph in its entirety, and substituting the following language, so that as amended the subparagraph shall read:

- (c) Applicant's score of 70 percent or higher must be obtained on the written examination.
1. Applicants who fail to pass the written examination shall be eligible to reapply for examination for a period up to one year from the original course ending date.
 2. Fees for examination and certification must be submitted if authorized pursuant to Rule 1200-12-1-.06.

Subparagraph (d) of paragraph (6) of Rule 1200-12-1-.16 Emergency Medical First Responders is amended by deleting the present language of the subparagraph in its entirety, and substituting the following language, so that as amended the subparagraph shall read:

- (d) First Responder certification 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 the examination as established in paragraph (6)(c); 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.

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

The rulemaking hearing rules set out herein were properly filed in the Department of State on the 16th day of November, 2005, and will become effective on the 30th day of January, 2006.