THE FULL TEXT OF THE PROPOSED RULE IS:

64J-1.001 Definitions.

In addition to the definitions provided in Sections 395.401, 395.4001, 401.107, and 401.23, F.S., the following definitions apply to these rules:

~~(1) Abbreviated Injury Score (AIS-90) – as defined in Rule 64J-2.001, F.A.C.~~

(1)~~(2)~~ Application – means a completed application form, as specified by the department, together with all documentation required by these rules and the required fee.

~~(3) Burn – means a tissue injury resulting from excessive exposure to thermal, chemical, electrical or radioactive agents.~~

(2)~~(4)~~ “Certificate of Public Convenience and Necessity (COPCN)” means a written statement or document, issued by the governing board of a county, granting permission for an applicant or licensee to provide services authorized by a license issued under Chapter 401, Part III, F.S., for the benefit of the population of that county or the benefit of the population of some geographic area of that county. No COPCN from one county may interfere with the prerogatives asserted by another county regarding COPCN.

(3)~~(5)~~ Certification Examination – means the National Registry of Emergency Medical Technicians (NREMT) Emergency Medical Technician (EMT) certification examination for EMT. For paramedic, effective January 1, 2016, it means the NREMT paramedic assessment examination. Effective January 1, 2017 it means the NREMT paramedic certification examination. ~~an examination developed or adopted by the department to be used for the purpose of testing the ability to practice as a Florida licensed emergency medical technician or paramedic.~~

~~(6) Chief – means the chief of the department’s Bureau of EMS.~~

(4)~~(7)~~ Controlled s ~~S~~ubstances – means those drugs listed in Chapter 893, F.S., and the “designer drugs” referred to in Section 893.035, F.S.

(5)~~(8)~~ Convicted or c ~~C~~onviction – means a determination of guilt of a felony in any court of competent jurisdiction which is the result of trial, of the entry of a plea of guilty or a plea of nolo contendere, regardless of whether adjudication is withheld.

(6)~~(9)~~ Department – means the Florida Department of Health (DOH), Bureau of Emergency Medical Oversight ~~Services~~, 4052 Bald Cypress Way, Bin A22 ~~C18~~, Tallahassee, Florida 32399-1738.

(7) Electronic Patient Care Record - means an incident level electronic record in accordance with the format specified in the Emergency Medical Services Tracking and Reporting System (EMSTARS) Data Dictionary Version 1.4 or in Version 3.

(8)~~(10)~~ Emergency Medical Services Provider or EMS provider – means any entity licensed in the state of Florida to provide air, or ground ambulance, whether basic life support (BLS) provider or an advanced life support (ALS) provider, and whether a non-transportation or a transportation service.

(9)~~(11)~~ Glasgow Coma Scale Score – as defined in Rule 64J-2.001, F.A.C.

~~(12) ICD-9-CM – as defined in Rule 64J-2.001, F.A.C.~~

~~(13) Injury Severity Score (ISS) – as defined in Rule 64J-2.001, F.A.C.~~

(10)~~(14)~~ Neonatal Ambulance – means an ALS vehicle permitted solely for Neonatal Transport.

(11)~~(15)~~ Neonatal Transport – means critical care interfacility transport of any neonate from a hospital licensed under Chapter 395, F.S., to a hospital licensed under Chapter 395, F.S., to deliver Level II or Level III neonatal intensive care services as defined in Rule 59C-1.042, F.A.C.

(12)~~(16)~~ Neonate – means an infant less than 28 days of life or 5 kg in weight.

(13)~~(17)~~ “Out-of-state trained ~~emergency medical technician~~ EMT or paramedic means a person with a current certification or registration as an EMT ~~emergency medical technician~~ or paramedic from any state or territory of the United States, other than Florida, that was conditioned upon that person being a trained EMT ~~emergency medical technician~~ or paramedic.

(14)~~(18)~~ Patient Care Record – means an electronic or written ~~the~~ record used by each EMS provider to document patient care, treatment and transport activities that at a minimum includes the information required under paragraphs 64J-1.003(5)(a), (b), and Rule 64J-1.014, ~~subsections 64J-2.002(5), 64J-2.004(5), (6) and (7), 64J-2.005(4),~~ F.A.C.

~~(19) Pediatric Trauma Patient – as defined in Rule 64J-2.001, F.A.C.~~

(15)~~(20)~~ “Skills Practice” means the practice of psychomotor skills and techniques by a student in the skill laboratory and clinical environment until the EMT student is proficient in basic life support techniques and a paramedic student is proficient in advanced life support techniques. The skills laboratory shall precede the clinical environment for each skill and technique.

(16)~~(21)~~ “Trained EMT ~~emergency medical technician~~ or paramedic” means an EMT ~~emergency medical technician~~ or paramedic who has successfully completed the United States Department of Transportation EMT ~~emergency medical technician~~ or the paramedic training curriculum (which training may have occurred in any state or territory of the United States, including Florida), which is incorporated by reference and is available for purchase from the Government Printing Office by telephoning (202) 512-1800.

(17)~~(22)~~ Training Program – means an educational institution having one designated program director, one designated medical director, and single budget entity; for the purposes of providing EMT or paramedic education programs, as approved by the department.

(18)~~(23)~~ “Training Program Medical Records”– means the medical records of the student.

(19)~~(24)~~ “Training Program Records” must include records of student participation and attendance in class, skills laboratory, hospital clinical, and field training; the hospital and field training records must include patient care reports completed by the student and preceptor evaluations of the student. Student records may be kept by hard copy or electronically and must be maintained for a minimum of five years.

(20)~~(25)~~ Transfer or transport – Air, land or water vehicle transportation, by vehicles not exempted under Section 401.33, F.S., of sick or injured persons requiring or likely to require medical attention during such transportation.

(21)~~(26)~~ Trauma – as defined in Rule 64J-2.001, F.A.C.

~~(27) Trauma Alert – as defined in Rule 64J-2.001, F.A.C.~~

(22)~~(28)~~ Trauma Alert Patient – as defined in Rule 64J-2.001, F.A.C.

(23)~~(29)~~ Trauma Patient – as defined in Rule 64J-2.001, F.A.C.

~~(30) Trauma Registry – as defined in Rule 64J-2.001, F.A.C.~~

(24)~~(31)~~ Trauma Transport Protocols (TTPs) – as defined in Rule 64J-2.001, F.A.C.

*Rulemaking Authority ~~381.0011(13),~~ 395.401, 395.4025(13), 395.405, 401.121, 401.35 FS. Law Implemented 381.0011, 395.4001, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 395.405, 401.121, 401.211, 401.23, 401.25, 401.35, 401.435 FS. History–New 4-26-84, Amended 3-11-85, Formerly 10D-66.485, Amended 11-2-86, 4-12-88, 8-3-88, 8-7-89, 6-6-90, 12-10-92, 11-30-93, 10-2-94, 1-26-97, Formerly 10D-66.0485, Amended 8-4-98, 7-14-99, 2-20-00, 11-3-02, 6-9-05, 10-24-05, 4-22-07, Formerly 64E-2.001, Amended 1-12-09, 11-5-09, 2-16-10, 5-27-10,\_\_\_\_\_\_\_\_\_.*

64J-1.002 Basic Life Support Service License - Ground.

(1) To obtain a license or renewal each applicant shall submit an application to the department on DH Form 631, 08/15 ~~04/09~~, Ground Ambulance Service Provider License Application. This form is incorporated by reference and is available from the department at\_\_\_\_\_\_\_, and at,\_\_\_\_\_\_\_~~as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com~~.

(2) The department shall issue a license to any applicant who:

(a) Furnished evidence of insurance coverage for ~~claims arising out of injury or death of persons and damage to the property of others resulting from any cause for which the owner of said business or service would be liable.~~ e ~~E~~ach motor vehicle, which shall be insured for the sum of at least $100,000 for injuries to or death of any one person arising out of any one accident; the sum of at least $300,000 for injuries to or death of more than one person in any one accident; and, for the sum of at least $50,000 for damage to property arising from any one accident. Government operated service vehicles shall be insured for the sum of at least $100,000 for any claim or judgment and the sum of $200,000 total for all claims or judgments arising out of the same occurrence. Every insurance policy or contract for such insurance shall provide for the payment and satisfaction of any financial judgment entered against the operator and present insured, or any person driving the insured vehicle. All such insurance policies shall provide for 30-day cancellation notice to the department.

(b) Obtained a COPCN ~~Certificate of Public Convenience and Necessity (COPCN)~~.

(3) No change.

(4) Every provider, except those exempted in paragraph 64J-1.006(1)(a), F.A.C., shall ensure that each EMS vehicle permitted by the department, when available for call, shall be equipped and maintained as approved by the medical director of the service in the vehicle minimum equipment list. The vehicle minimum equipment list shall include, at a minimum, one each of the items listed in Table I and shall be provided to the department upon request.

|  |  |
| --- | --- |
| TABLE I  GROUND VEHICLE  BLS MEDICAL EQUIPMENT AND SUPPLIES | |
| ITEM | QTY. |
| 1. through 17. No change. |  |
| 18. Portable suction device ~~,~~ ~~electric or gas~~ |  |
| ~~powered, with wide bore tubing and tips~~ |  |
| ~~which meet the minimum standards as~~ |  |
| ~~published by the GSA in KKK-A 1822E~~ |  |
| ~~specifications~~. |  |
| 19. through 36. No change |  |

Rulemaking Authority ~~381.0011~~, 395.405, 401.121, 401.25, 401.35 FS. Law Implemented 381.0011, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 401.23, 401.24, 401.25, 401.252, 401.26, 401.27, 401.281, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.49, Amended 4-12-88, 8-3-88, 12-10-92, 10-2-94, 1-26-97, Formerly 10D-66.049, Amended 8-4-98, 1-3-99, 11-19-01, 12-18-06, Formerly 64E-2.002, Amended 9-2-09,\_\_\_\_\_\_\_\_.

64J-1.003 Advanced Life Support Service License – Ground.

(1) To obtain a license or renewal each applicant for an ALS license shall submit to the department DH Form 631, 08/15 ~~04/09~~, Ground Ambulance Service Provider License Application (see 64J-1.002(1). ~~, which is incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com.~~

(2) through (3) No change

(4) Each ALS permitted vehicle when available for call, shall be equipped and maintained as approved by the medical director of the service. ~~in the vehicle minimum equipment list.~~ The vehicle ~~minimum~~ equipment list shall include, at a minimum, one each of the items listed in Tables I and II, and shall be provided to the department upon request, except those exempted in paragraph 64J-1.006(1)(a), F.A.C. Substitutions are allowed with signed approval from the medical director and written notification to the department.

(5)(a) through (c) No change.

(6) ALS Nontransport:

(a) Unless otherwise specifically exempted, each advanced life support nontransport vehicle, when personnel are providing advanced life support treatment or care, must be staffed with a certified paramedic or licensed physician.

(b) A permitted advanced life support nontransport vehicle may operate as a basic life support emergency vehicle when the vehicle is not staffed by a certified paramedic or licensed physician and only in lieu of placing the unit completely out of service. When such advanced life support nontransport vehicle is operating under this section, the vehicle must be staffed with at least one person who must be an EMT ~~emergency medical technician~~, and shall carry portable oxygen, airway adjuncts, supplies and equipment as determined by the medical director of the licensed service.

1. through 2. No change.

(c) through (e) No change.

(7) Advanced life support non-transport vehicles, staffed pursuant to paragraph 64J-1.003(6)(c), F.A.C., are not required to carry the equipment and supplies identified in Table I or II. Such vehicles when personnel are providing advanced life support treatment or care, or when responding to calls in an ALS capacity shall at a minimum carry portable oxygen, defibrillation equipment, airway management supplies and equipment, and medications and fluids authorized by the medical director of the licensed service.

|  |  |
| --- | --- |
| TABLE II  GROUND VEHICLE  ALS EQUIPMENT AND MEDICATIONS | |
| ~~MEDICATION~~ | ~~WT/VOL~~ |
| Medications and fluids: as approved and required by the medical director of the service.  ~~1. Atropine Sulfate.~~ |  |
| ~~2. Dextrose, 50 percent.~~ |  |
| ~~3. Epinephrine HCL.~~ | ~~1:1,000~~ |
| ~~4. Epinephrine HCL.~~ | ~~1:10,000~~ |
| ~~5. Ventricular dysrhythmic.~~ |  |
| ~~6. Benzodiazepine sedative/anticonvulsant.~~ |  |
| ~~7. Naloxone (Narcan).~~ |  |
| ~~8. Nitroglycerin.~~ | ~~0.4 mg.~~ |
| ~~9. Inhalant beta adrenergic agent with nebulizer apparatus, as approved by the medical~~ |  |
| ~~director.~~ |  |
| ~~I.V. SOLUTIONS~~ |  |
| ~~1. Lactated Ringers or Normal Saline.~~ |  |
| EQUIPMENT |  |
| (a) through (v). No change. |  |

*Rulemaking Authority ~~381.0011~~, 395.405, 401.121, 401.265, 401.35 FS. Law Implemented 381.0011, 381.025, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 395.405, 401.23, 401.24, 401.25, 401.26, 401.265, 401.27, 401.281, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.50, Amended 4-12-88, 8-3-88, 8-7-89, 12-10-92, 11-30-93, 1-26-97, Formerly 10D-66.050, Amended 8-4-98, 1-3-99, 7-14-99, 2-20-00, 9-3-00, 4-15-01, 11-19-01, 6-3-02, 12-18-06, Formerly 64E-2.003, Amended 9-2-09, \_\_\_\_\_\_\_\_.*

64J-1.004 Medical Direction.

(1) Each ALS, BLS or air ambulance provider shall maintain on file for inspection and copying by the department its current contract for a medical director by which it procures the services of ~~employs or independently contracts with~~ a physician qualified pursuant to this section to be its medical director.

~~(2) There is no standard format for a medical director’s contract, however, in drafting such an instrument, the following provisions may be addressed:~~

~~(a) Name and relationship of the contracting parties.~~

~~(b) A list of contracted services inclusive of medical direction, administrative responsibilities, professional membership, basic and advanced life support review responsibilities, and reporting requirements.~~

~~(c) Monetary consideration inclusive of fees, expenses, reimbursement, fringe benefits, clerical assistance and office space.~~

~~(d) Termination clause.~~

~~(e) Renewal clause.~~

~~(f) Provision for liability coverage.~~

~~(g) Effective dates of the contract.~~

(2) ~~(3)~~ Qualifications:

(a) through (b) No change.

~~(c) A medical director shall be board certified and active in a broad-based clinical medical specialty with demonstrated experience in prehospital care and hold an ACLS certificate or equivalent as determined in Chapter 64J-1.022, F.A.C. Prehospital care experience shall be documented by the provider.~~

~~(d) A medical director shall demonstrate and have available for review by the department documentation of active participation in a regional or statewide physician group involved in prehospital care.~~

(3)~~(4)~~ The d~~D~~uties and r~~R~~esponsibilities of the licensed EMS provider m~~M~~edical d~~D~~irector include: ~~.~~

(a) through (b) No change.

(c) With the exception of BLS medical directors each ALS or air ambulance service medical director shall possess proof of current registration as a medical director, either individually or through a hospital, with the U.S. Department of Justice, Drug Enforcement Administration (DEA), to provide controlled substances to an EMS provider. DEA registration shall include each address at which controlled substances are stored. Proof of such registration shall be maintained on file with each ALS or air ambulance provider and shall be readily available for inspection.

(d) through (g) No change.

(h) An EMT employed by a licensed ALS provider is authorized to start a non-medicated IV under the following conditions:

1. A non-medicated IV is initiated only in accordance with department approved protocols of the licensed ALS provider’s medical director. These protocols must include a requirement that the non-medicated IV be initiated in the presence of a Florida certified paramedic (of the same licensed provider) who directs the EMT to initiate the IV.

2. If the licensed ALS provider elects to utilize EMTs in this capacity, the licensed EMS provider shall ensure that the medical director provides IV Therapy training. ~~at least equivalent to that required by the 1999 U.S. D.O.T. EMT-Intermediate National Standard Curriculum relating to IV therapy which is incorporated by reference and available from the Superintendent of Documents, Post Office Box 371954, Pittsburg, PA 15250-7954~~. The licensed EMS provider shall document successful completion of such training in each EMTs training file and make documentation available to the department upon request.

(i) Ensure that all EMTs and paramedics are trained in the use of the trauma triage ~~scorecard~~ methodologies adopted by department rules. ~~as provided in Rule 64J-2.004, F.A.C., for adult trauma patients and Rule 64J-2.005, F.A.C., for pediatric trauma patients.~~

(j) through (k) No change.

(4) ~~(l)~~ Medical d~~D~~irectors of a training program shall:

(a)~~1.~~ Be responsible for the instruction of the Department of Transportation (DOT) approved training program for EMTs and paramedics.

(b)~~2.~~ Have substantial knowledge of the qualifications, training, protocols, and quality assurance programs for the training facility.

(c)~~3.~~ Maintain current instructor level training in Advanced Cardiac Life Support (ACLS), or equivalent, or Advanced Trauma Life Support (ATLS), maintain provider or instructor level training in International Trauma Life Support (ITLS), Prehospital Trauma Life Support (PHTLS), or Advanced Trauma Life Support (ATLS); and Advanced Pediatric Life Support (APLS), Pediatric Advanced Life Support (PALS), Pediatric Education for Prehospital Professionals (PEPP), or Emergency Pediatric Care (EPC).

(d)~~4.~~ Act as a liaison between training centers, local EMS providers and hospitals.

(e)~~5.~~ Participate in state and local quality assurance and data collections programs.

(f)~~6.~~ ~~The EMS training center shall by contract, require such medical director to~~ B~~b~~e available 4 hours per month for classroom teaching or review of student performance, and participate in direct contact time with EMS field level providers for a minimum of 10 hours per year. Notwithstanding the number of training centers or EMS providers served by the medical director, direct contact time shall be a minimum of 10 hours per year per medical director, not per training center.

(g)~~7.~~ ~~The training program shall~~ P~~p~~rovide written documentation to the d~~D~~epartment that confirms the m~~M~~edical

d ~~D~~irector has reviewed and approved all policies, procedures, and methods used for the orientation of instructors and preceptors.

(h)~~8.~~ ~~The training program shall~~ P~~p~~rovide written documentation to the d~~D~~epartment that confirms the m~~M~~edical

d ~~D~~irector has reviewed and approved all student testing procedures, evaluators and assessment tools used for each comprehensive final written (cognitive) and practical examination (psychomotor skills) for EMT and paramedic students. The m~~M~~edical d~~D~~irector shall review each student’s performance on the comprehensive final written (cognitive) and practical examination (psychomotor skills) before certifying a student has successfully completed all phases ~~phase~~ of the educational program and EMTs are proficient in BLS ~~basic life support~~ techniques and paramedics are proficient in ALS ~~advanced life support~~ techniques.

(5) The medical director of a licensed EMS provider may authorize paramedics under his or her supervision to perform immunizations pursuant to a written agreement with a County Health Department in the county in which the immunizations are to be performed. Should the medical director elect to utilize paramedics in this capacity, he or she shall verify on DH Form 1256, Certification of Training, December 2008, which is incorporated by reference and available from the department, that each paramedic authorized to administer immunizations has received sufficient ~~completed~~ training and experience to administer immunizations. ~~consistent with that of other staff giving immunizations in the County Health Department as required by the Director of that County Health Department.~~

*Rulemaking Authority ~~381.0011,~~ 395.405, 401.265, 401.272, 401.35, 499.05 FS. Law Implemented 401.23, 401.24, 401.25, 401.26, 401.265, 401.27, 401.281, 401.2915, 401.30, 401.34, 401.35, 401.41, 401.411, 499.005 FS. History–New 8-7-89, Amended 6-6-90, 12-10-92, 1-26-97, Formerly 10D-66.0505, Amended 8-4-98, 1-3-99, 2-20-00, 4-15-01, 11-19-01, 10-24-05, 12-18-06, Formerly 64E-2.004, Amended 5-27-10,\_\_\_\_\_\_\_\_\_\_.*

64J-1.005 Air Ambulances.

(1) Each applicant for an air ambulance license shall pay the required fee as specified in Section 401.34(1)(j), F.S., and submit an application to the department on DH Form 1575, 08/15 ~~04/09~~, Air Ambulance Service License Application which is incorporated by reference and available from the department~~,~~ at [www.floridahealth.gov](http://www.floridahealth.gov/) ~~as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com.~~ The air ambulance license shall automatically expire 2 years from the date of issuance.

(2) Each air ambulance applicant or provider, pursuant to subsection 64J-1.014(1), F.A.C., shall maintain on site and make available to the department at license application, license application renewal, change of insurance carrier or policy renewal, and documentation of the following minimum insurance coverage:

(a) No change.

(b) In lieu of the insurance required in paragraph (2)(a), the provider or applicant may furnish a certificate of self-insurance establishing that the provider or applicant has a self-insurance plan to provide coverage identical to what is required in paragraph (2)(a) and that the plan has been approved by the Florida Office of Insurance Regulation of the Financial Services Commission ~~Department of Insurance~~.

(3) No change.

(4) Each provider shall maintain in each paramedic’s employment file documentation of successful completion of an initial air crew member ~~(ACM)~~ education program ~~that was~~ based on the 2004 Guidelines for Air Medical Crew Education published by the Association of Air Medical Services ~~conducted in accordance with the 1988 United States (U.S.) Department of Transportation (DOT) Air Medical Crew-Advanced National Standard Curriculum (NSC)~~, which is incorporated by reference and is available for purchase from AAMS; 909 N. Washington Street ~~526 King Street~~, Suite 410 ~~415~~, Alexandria, VA 22314; ~~(703)836-8732~~ or available online at <http://aams.org/?p=877> Each provider shall ensure and shall document in its employee records that each EMT and paramedic which it employs holds a current certification from the department.

(5) through (7) No change.

(8) Each prehospital rotary wing air ambulance when available for call shall meet the structural requirements listed in Table III, and shall be equipped as approved by the medical director of the service in the aircraft minimum equipment list. The aircraft minimum equipment list shall include, at a minimum, one each of the items listed in Table IV and shall be provided to the department upon request.

|  |  |
| --- | --- |
| TABLE III  AIR AMBULANCE  Structural, Equipment and Supply Requirements | |
| ITEM |  |
| Aircraft Requirements |  |
| 1. through 8. No change. |  |
| Medical Equipment Requirements |  |
| 1. through 7. No change. |  |
| 8. Portable suction device unit with wide bore tubing and tips, |  |
| ~~electric or gas powered, which meets the minimum~~ |  |
| ~~standards as published by the General Services~~ |  |
| ~~Administration (GSA) in KKK-A-1822C~~ |  |
| ~~specifications~~. |  |
| 9. No change. |  |
|  |  |
| TABLE IV  Prehospital Rotary Wing Air Ambulances | |
| ITEM |  |
| Equipment |  |
| 1. through 39. No change. |  |
|  |  |
| ~~MEDICATION~~ | ~~WT./VOL.~~ |
| Medications and fluids: as required by the medical director of the service. |  |
| ~~1. Atropine sulfate.~~ |  |
| ~~2. Dextrose 50 percent.~~ |  |
| ~~3. Epinephrine HCL.~~ | ~~1:1,000~~ |
| ~~4. Epinephrine HCL.~~ | ~~1:10,000~~ |
| ~~5. Ventricular dysrhythmic.~~ |  |
| ~~6. Sodium Bicarbonate.~~ | ~~50 mEq. or 44.6. mEg.~~ |
| ~~7. Naloxone (Narcan).~~ | ~~1 mg./m1. 2 mg. amp.~~ |
| ~~8. Nitroglycerin.~~ | ~~0.4 mg.~~ |
| ~~9. Benzodiazepine~~ |  |
| ~~sedative/anticonvulsant.~~ |  |
| ~~10. Inhalant beta adrenergic~~ |  |
| ~~agent of choice with~~ |  |
| ~~nebulizer apparatus, as~~ |  |
| ~~approved by the medical~~ |  |
| ~~director.~~ |  |
| ~~\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_~~ |  |
| ~~I.V. Solutions~~ |  |
| ~~\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_~~ |  |
| ~~1. Lactated Ringers or~~ |  |
| ~~Normal Saline.~~ |  |

*Rulemaking Authority ~~381.0011,~~ 401.25, 401.251, 401.265, 401.35 FS. Law Implemented 381.0011, 395.405, 401.23, 401.24, 401.25, 401.251, 401.252, 401.26, 401.27, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.51, Amended 4-12-88, 8-3-88, 8-7-89, 12-10-92, 11-30-93, 10-2-94, 1-26-97, Formerly 10D-66.051, Amended 1-3-99, 9-3-00, 5-15-01, 12-18-06, Formerly 64E-2.005, Amended 9-2-09,\_\_\_\_\_.*

64J-1.006 Neonatal Transports.

(1) A Neonatal Ambulance shall meet the requirements listed in Table V, subsection ~~paragraphs 64J-1.006(1)(c) and (d) and~~ ~~subsections 64J-1.006(2) and~~ (3), of this section ~~F.A.C.,~~ and shall be exempt from meeting the equipment and medical supply requirements listed in Rule 64J-1.002, F.A.C., Table I and in Rule 64J-1.003, F.A.C., Table II.

(2) through (4) No change.

|  |
| --- |
| TABLE V  No Change |

(5) through (6) No change.

*Rulemaking Authority ~~381.0011,~~ 383.19, 395.405, 401.251(6), 401.252, 401.35 FS. Law Implemented 381.001, 383.15, 395.405, 401.24, 401.25, 401.251, 401.252, 401.26, 401.265, 401.27, 401.30, 401.31, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History–New 11-30-93, Amended 1-26-97, Formerly 10D-66.0525, Amended 8-4-98, 9-3-00, 12-18-06, Formerly 64E-2.006, Amended 2-16-10,\_\_\_\_\_\_.*

64J-1.007 Vehicle Permits.

(1) Each application for a ground vehicle permit or air ambulance permit shall be on DH Form 1510, 10/15, ~~04/09,~~ Application for Vehicle Permit(s) and Air Ambulance Permits(s). ~~Each application for an aircraft permit shall be on DH Form 1576, 04/09, Application for Air Ambulance Permit.~~ This form ~~These forms~~ is ~~are~~ incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., ~~or~~ at [www.flhealth.gov](http://www.flhealth.gov/). and at\_\_\_\_\_\_\_. ~~http://www.fl-ems.com.~~ All applications shall be accompanied by the required fee as specified in Section 401.34(1)(c), (e) ~~(k)~~, F.S.

(2) through (3) No change.

(4) All licensed providers applying for an initial air ambulance aircraft permit ~~after January 1, 2005,~~ shall submit to the department a valid airworthiness certificate (unrestricted), issued by the Federal Aviation Administration, for each permitted aircraft, prior to issuance of the initial permit. Aircraft replacements are subject to the initial application process.

~~(5) For purposes of Section 401.26(1):~~

~~(a) Water vehicles with a total capacity of two persons or less are neither transport vehicles nor advanced life support transport vehicles.~~

~~(b) Water vehicles with a total capacity of three or more persons are neither transport vehicles nor advanced life support transport vehicles, if:~~

~~1. Staffed and equipped per the Licensee Medical Director’s protocols consistent with the certification requirements of Chapter 401, F.S.; and~~

~~2. Reported to the department with sufficient information to identify the water vehicle and to document compliance with subparagraph 1., above. Such report shall be updated with each license renewal.~~

~~(c) A transport vehicle or advanced life support transport vehicle that has explicit staffing, equipment and permitting requirements under Chapter 401, F.S., and other rules of the department cannot fall under paragraph (a) or (b), above.~~

*Rulemaking Authority ~~381.0011,~~ 401.23, 401.26, 401.35 FS. Law Implemented 381.001, 381.0205, 401.23, 401.24, 401.25, 401.251, 401.26, 401.27, 401.30, 401.31, 401.34, 401.35, 401.41, 401.411, 401.414 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.53, Amended 4-12-88, 12-10-92, 11-30-93, 1-26-97, Formerly 10D-66.053, Amended 1-3-99, 12-18-06, 10-16-07, Formerly 64E-2.007, Amended 9-2-09, \_\_\_\_\_\_\_.*

64J-1.008 Emergency Medical Technician.

(1) Qualifications and Procedures for Certification pursuant to Section 401.27, F.S. To be qualified for EMT certification, an individual must:

(a)1. Successfully complete an initial EMT training program conducted in accordance with the January 2009 U.S. DOT EMT National EMS Education Standards ~~EMT 1994 U.S. DOT EMT-Basic National Standard Curriculum~~, which are ~~is~~ incorporated by reference and ~~is~~ available at www.ems.gov/educationstandards.htm ~~for purchase from the Government Printing Office by telephoning (202) 512-1800, or writing to the Government Printing Office, Superintendent of Documents, Post Office Box 371954, Pittsburg, PA 15250-7954,~~ or

2. If out of state or military trained in accordance with either the 1994 U.S. DOT EMT-Basic National Standard Curriculum or the January 2009 U.S. DOT EMT National EMS Education Standards, currently hold a valid EMT certification from the National Registry of Emergency Medical Technicians or another U.S. state or territory which has the certifying authority to submit to the department DH Form 1583, 8/15 ~~12/08~~, Application for EMT/ ~~Examination for Emergency Medical Technician (EMT) &~~ Paramedic Certification, which is incorporated by reference and available from the department, as defined by subsection 64J-1.001(6) ~~(9)~~, F.A.C., or at [http://www.FLhealthsource.com](http://www.flhealthsource.com/).

(b)1. For those applicants subject to sub paragraph (1) (a) 2., a~~A~~pply for and then pass the Florida EMT certification examination within two years of filing on DH Form 1583, 8/15 ~~12/08~~, Application for EMT/ ~~Examination for Emergency Medical Technician (EMT) &~~ Paramedic Certification to take the exam; or, ~~and~~

2. For those applicants subject to sub paragraph (1)(a)1., file the completed application form described in sub paragraph (1) (b) 1. to apply for certification and pass or otherwise have passed the Florida required EMT Certification Examination within two years of completing the initial training program referenced in sub paragraph (1)(a)1.

~~(c) Possess a high school diploma or a General Education Development (GED) diploma.~~

(c) Honorably discharged veterans and active duty military may apply through the department’s Veterans Application for Licensure Online Response System (VALOR) to seek expedited certification.

(2) Renewal Certification – To maintain an active certificate the EMT shall pay the recertification fee and affirm continued compliance with all applicable requirements contained in paragraph 64J-1.008(2)(a), (b) or (c), F.A.C., complete the applicable certification renewal notice, Certificate Renewal Notice DH-MQA 1212, 7/09, which is incorporated by reference and mailed by the department, or apply for renewal online at www.flhealthsource.com, where the form may also be obtained; and within 2 years prior to the expiration date of his or her EMT certification complete one of the following:

(a) Complete 30 hours of EMT refresher training based on the January 2009 ~~1996~~ U.S. DOT EMT-~~Basic National Standard Refresher Curriculum~~ National EMS Education Standards, to include adult and pediatric education with a minimum of two hours in pediatric emergencies, ~~an additional 2 hours of HIV AIDS refresher training, in accordance with Section 381.0034, F.S.; and~~ maintain a current CPR card as described in ~~paragraph (1) (c) above;~~ ~~provided in~~ Section 401.27(4)(e)2., F.S.~~, and Rule 64J-1.022, F.A.C.,~~ CPR shall be included in the 30 hours of refresher training, provided that the CPR training is taken with a continuing education provider recognized by the department pursuant to Section 401.2715, F.S. The January 2009 ~~1996~~ U.S. DOT EMT National EMS Education Standards ~~-Basic National Standard Refresher Curriculum~~ shall be the criteria for department approval of refresher training courses. They are incorporated herein by reference and are available at [www.ems.gov/educationstandards.htm](http://www.ems.gov/educationstandards.htm). The department shall accept either the affirmation of a licensed EMS provider’s medical director,~~;~~ ~~or~~ a certificate of completion of refresher training from a department approved Florida training program, or a department approved continuing education provider as proof of compliance with the above requirements. ~~The 1996 U.S. DOT EMT-Basic National Standard Refresher Curriculum is incorporated by reference and available for purchase from the Government Printing Office by telephoning (202) 512-1800 or writing to the Government Printing Office, Superintendent of Documents, Post Office Box 371954, Pittsburg, PA 15250-7954.~~

(b) Successfully pass an ~~the~~ EMT certification examination required by the department during the current certification cycle~~; and complete 2 hours of HIV AIDS refresher training, in accordance with Section 381.0034, F.S.;~~ and maintain a current CPR BLS card for the professional rescuer. ~~Prior to taking the examination, a candidate must request approval to sit for the examination. Such approval is requested by submitting DH Form 1583, 12/08, Application for Examination for Emergency Medical Technician (EMT) & Paramedic Certification to the department.~~

(c) Satisfactorily complete the first semester of the paramedic training course at a department approved Florida training center pursuant to Section 401.2701, F.S., within the current 2-year certification cycle~~. Complete 2 hours of HIV AIDS refresher training in accordance with Section 381.0034, F.S.,~~ and ~~also~~ maintain a current CPR card for the professional rescuer.

(d) An individual must provide to the department, upon request, proof of compliance with the requirements in this section.

(3) No change.

~~(4) Individuals who document their possession of the following in their application shall be deemed to satisfy subsection 64J-1.012(3), F.A.C., for certification as an EMT only while these criteria are applicable:~~

~~(a) Status as a member of the United States military;~~

~~(b) Valid EMT certification from the National Registry of Emergency Medical Technicians; and~~

~~(c) Assignment to Florida as part of a training program to operate as an EMT.~~

*Rulemaking Authority ~~381.0011,~~ 381.0034, 381.0035, 401.23, 401.27, 401.35 FS. Law Implemented 381.001, 401.23, 401.27, 401.34, 401.35, 401.41, 401.411, 401.414, 456.024 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.56, Amended 11-2-86, 4-12-88, 8-3-88, 12-10-92, 11-30-93, 12-10-95, 1-26-97, Formerly 10D-66.056, Amended 8-4-98, 1-3-99, 9-3-00, 4-15-01, 6-3-02, 11-3-02, 10-24-05, 1-11-06, 1-23-07, 10-16-07, Formerly 64E-2.008, Amended 11-22-09, 5-27-10, \_\_\_\_\_.*

64J-1.009 Paramedic.

(1) Qualifications and Procedures for Certification pursuant to Section 401.27, F.S. To be qualified for paramedic certification, an individual must:

(a)1. Successfully complete an initial paramedic training program that was conducted in accordance with the January 2009 ~~1998~~ U.S. DOT Paramedic National EMS Education Standards ~~EMT-Paramedic (EMT-P) National Standard Curriculum, (NSC),~~ which are ~~is~~ incorporated by reference and ~~is~~ available at [www.ems.gov/educationstandards.htm](http://www.ems.gov/educationstandards.htm) ~~for purchase from the Government Printing Office by telephoning (202) 512-1800~~, or

2. If out of state or military trained in accordance with the 1998 U.S. DOT EMT-Paramedic (EMT-P) NSC, or the January 2009 U.S. DOT Paramedic National EMS Education Standards, currently hold a valid paramedic certification from the National Registry of Emergency Medical Technicians or be currently certified in another U.S. state or territory which has the certifying authority to submit to the department DH Form 1583, 8/15 ~~12/08~~, Application for EMT/ ~~Examination for Emergency Medical Technician (EMT) &~~ Paramedic Certification (see 64J-1.008 F.A.C.).

(b) 1. For those applicants subject to sub paragraph (1) (a) 2., a~~A~~pply for and then pass the Florida paramedic certification examination within two years of filing on DH Form 1583, 8/15 ~~12/08~~, Application for EMT/ ~~Examination for Emergency Medical Technician (EMT) &~~ Paramedic Certification to take the exam; or, ~~and~~

2. For those applicants subject to sub paragraph (1) (a) 1., file the completed application form described in sub paragraph (1) (b) 1. to apply for certification and pass or otherwise have passed the Florida required paramedic certification examination within two years of completing the initial training program referenced in sub paragraph (1) (a) 1.

~~(c) Possess a high school diploma or a General Education Development (GED) diploma.~~

(c) Honorably discharged veterans and active duty military may apply through the department’s Veterans Application for Licensure Online Response System (VALOR) to seek expedited certification.

(2) Renewal Certification – To maintain an active certificate the paramedic shall pay the recertification fee and affirm continued compliance with all applicable requirements contained in paragraph 64J-1.009(2)(a) or (b), F.A.C., complete the applicable certification renewal notice, Certificate Renewal Notice DH-MQA 1212, 7/09, which is incorporated by reference and mailed by the department, or apply for renewal online at www.flhealthsource.com, where the form may also be obtained, and within 2 years prior to the expiration date of his or her paramedic certification complete one of the following:

(a) Complete 30 hours of paramedic refresher training based on the January 2009 ~~1998~~ U.S. DOT Paramedic National EMS Education Standards ~~D.O.T. EMT-Paramedic NSC~~, to include adult and pediatric education with a minimum of two hours in pediatric emergencies, ~~an additional 2 hours of HIV AIDS refresher training in accordance with Section 381.0034, F.S.,~~ ~~and also~~ maintain a current Advanced Cardiac Life Support (ACLS) card as provided in Section 401.27(4)(e)2., F.S., and Rule 64J-1.022, F.A.C. ACLS shall be included in the 30 hours of refresher training, provided that the ACLS training includes the continuing education criteria recognized by the department pursuant to Section 401.2715, F.S. The department shall accept either the affirmation of a licensed EMS provider’s medical director,~~; or~~ a certificate of completion of refresher training from a department approved Florida training program, or a department approved continuing education provider as proof of compliance with the above requirements~~.;~~

(b) Successfully pass a ~~the~~ paramedic certification examination required by the department during the current certification cycle~~; complete 2 hours of HIV/AIDS refresher training in accordance with Section 381.0034, F.S.;~~ and ~~also~~ maintain a current ACLS card. ~~Prior to taking the examination, a candidate must request approval to sit for the examination. Such approval is requested by submitting DH Form 1583, 12/08, Application for Examination for Emergency Medical Technician (EMT) & Paramedic Certification to the department.~~

(3) through (4) No change.

*Rulemaking Authority ~~381.0011,~~ 381.0034, 381.0035, 401.27, 401.35 FS. Law Implemented 381.001, 401.23, 401.27, 401.34, 401.35, 401.41, 401.411, 401.414, 456.024 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.57, Amended 4-12-88, 8-3-88, 12-10-92, 11-30-93, 12-10-95, 1-26-97, Formerly 10D-66.057, Amended 8-4-98, 1-3-99, 9-3-00, 4-15-01, 6-3-02, 11-3-02, 10-24-05, 1-23-07, 10-16-07, Formerly 64E-2.009, Amended 11-22-09, 5-27-10,\_\_\_\_\_.*

64J-1.010 Voluntary Inactive Certification.

An EMT or paramedic who is currently certified can place their certificate on inactive status by sending a written request to the department and paying a fee of $50. Any EMT or paramedic whose certificate has been placed on inactive status shall not function as an EMT or paramedic until such time as he or she has completed the following requirements for reactivating the certificate:

(1) A certificate holder whose certificate has been on inactive status for 12 months or less can activate his or her certificate by submitting a written request to the department for activation and receiving written approval. The certificate holder must p~~P~~ay a late renewal fee of $50.

(a) through (b) No change.

(2) An EMT whose certificate has been on inactive status for more than 1 year can activate his or her certificate by completing the following:

(a) 30 hours of EMT refresher training which shall meet the requirements of section 64J-1.008 (2) (a) F.A.C. ~~be based on the 1996 U.S. DOT EMT-Basic National Standard Refresher Curriculum~~ ~~and 2 hours of human immunodeficiency virus and acquired immune deficiency syndrome (HIV AIDS) training.~~ ~~The 1996 U.S. DOT EMT~~ -~~Basic National Standard~~ ~~Refresher Curriculum~~ ~~is incorporated by reference in Rule 64J-1.008, F.A.C.~~

The training:

1. Shall have been completed after the EMT certificate was placed on inactive status and have been completed no more than 2 years prior to the date of receipt of the request for return to active status; and

2. Shall have been completed at a department approved EMT training program or have been approved by the medical director of a licensed EMS provider.

(b) Hold a current CPR card pursuant to Section 401.27(4)(e)1., F.S., and Rule 64J-1.022, F.A.C.~~, or equivalent pursuant to Rule 64E-2.038, F.A.C.~~

(c) No change

(d) Pass the EMT certification examination required by the department. Should the applicant fail the examination, he or she must meet requirements for initial certification.

(e) After completion of the above requirements, submit the ~~to the department:~~

~~1. The~~ required fee and affirmation of all applicable requirements contained in subsection 64J-1.010(2), F.A.C. to the department.

~~2. DH Form 1583,12/08, Application for, Examination for Emergency Medical Technician (EMT) & Paramedic Certification.~~

(3) A paramedic whose certificate has been on inactive status for more than 1 year can activate his or her certificate by completing the following:

(a) 30 hours of paramedic refresher training which shall meet the requirements of 64J-1.009 (2) (a) F.A.C. ~~be based on the 1998~~ ~~U.S. DOT EMT-Paramedic-NSC, which is incorporated by reference in Rule 64J-1.009, F.A.C., and 2 hours of human immunodeficiency virus and acquired immune deficiency syndrome (HIV AIDS) training.~~

The training:

1. Shall have been completed after the paramedic certificate was placed on inactive status and have been completed no more than 2 years prior to the date of receipt of the request for return to active status; and

2. Shall have been completed at a department approved paramedic training program or have been approved by the medical director of a licensed EMS provider.

(b) Hold a current ACLS card. ~~pursuant to Section 401.27(4)(e)2., F.S., and Rule 64J-1.022, F.A.C.~~ ~~, or equivalent pursuant to Rule 64J-1.022, F.A.C~~.

(c) No change.

(d) Pass the paramedic certification examination required by the department. Should the applicant fail the examination, he or she must meet the requirements for initial certification.

(e) After completion of the above requirements, submit the ~~to the department:~~

~~1. The~~ required fee and affirmation of all applicable requirements contained in subsection 64J-1.010(3), F.A.C. to the department.

~~2. DH Form 1583, 12/08, Application Examination for Emergency Medical Technician (EMT) & Paramedic Certification.~~

*Rulemaking Authority 401.27, 401.35 FS. Law Implemented 401.27, 401.34, 401.35 FS. History–New 8-4-98, Amended 1-3-99, 9-3-00, 4-21-02, 6-3-02, 11-3-02, 10-24-05, 1-23-07, 10-16-07, Formerly 64E-2.0094, Amended 11-22-09, \_\_\_\_\_\_.*

64J-1.012 Examinations.

~~(1) Grade Notification – The department shall notify each candidate of the examination results. The department may post scores electronically on the internet in lieu of mailing the scores to the candidate. The date of receipt is the date the examination scores are posted electronically (official score release date).~~

~~(2) Post-Examination Review.~~

~~(a) A candidate who failed the examination shall notify the department or designee, in writing, that he or she desires a post-examination review within 21 days of the official score release date and include the required review fee of $50 payable by cashier’s check or money order to the department or designee. Upon receipt of payment, the department or designee shall notify the candidate of a review appointment.~~

~~(b) Each candidate, who has taken and failed the examination, shall have the right to post-examination review of those examination questions answered incorrectly and the correct answers to those examination questions only.~~

~~(c) The candidate’s attorney may be present at the review.~~

~~(d) Examination reviews shall be conducted in the presence of a representative of the department or designee and scheduled at a location designated by the department or designee. The review shall be conducted between 8:00 a.m. and 5:00 p.m., Monday through Friday, excluding official state holidays. A candidate shall attend only one review per examination administration. If the candidate is scheduled for an examination review date and fails to appear, the review fee shall be forfeited.~~

~~(e) The candidate shall be allowed one-half the time allowed for the original administration of the examination to review the examination materials provided. Neither the candidate nor the attorney shall be allowed to bring any material for documenting or recording any test material into the review session.~~

~~(f) A representative of the department or designee shall remain with the candidate throughout the review process. The representative shall inform the candidate that the representative cannot defend the examination, attempt to answer or refute any question during the review.~~

~~(g) The candidate shall be instructed that he or she is exercising his or her right of review.~~

~~(h) Any candidate who fails the examination and attends an examination review, pursuant to this section, shall not be eligible for reexamination for at least 30 days after the examination review.~~

(1)~~(3)~~ Examination Requirements

(a) The Florida EMT certification examination is the National Registry of Emergency Medical Technicians (NREMT) EMT certification examination.

(b) Effective January 1, 2016, the Florida paramedic certification examination is the National Registry of Emergency Medical Technicians (NREMT) Paramedic assessment examination. Effective January 1, 2017 the Florida paramedic certification examination will be NREMT certification examination. The Florida developed paramedic examination will not be administered after January 1, 2016, regardless of whether a candidate is sitting for the certification exam for the first time, sitting for reexamination after one or more failures, or for any other purpose.

(c) The pass-fail results for the NREMT EMT and Paramedic certification examinations are determined and provided to the examinee by the NREMT.

~~The following grades are the minimum scores required to pass the below-listed examinations:~~

~~(a) Paramedic Certification Examination, 80 percent or higher.~~

~~(b) EMT-Basic Examination, 70 percent or higher.~~

~~(4) To be scheduled for a reexamination the requestor shall submit DH Form 1583, 12/08, Application for Examination for Emergency Medical Technician (EMT) & Paramedic Certification.~~

~~(5) An EMT candidate must document successful completion of 24 hours of department-approved refresher training based on the 1994 U.S. DOT EMT-Basic National Standard Curriculum prior to being scheduled for another attempt at the examination after three failures. An EMT applicant who has failed the examination six times is disqualified from certification and must successfully complete a full EMT training program, pursuant to paragraph 64J-1.008(1)(a), F.A.C., prior to being considered for subsequent examination and certification.~~

~~(6) A paramedic candidate must document successful completion of 48 hours of department-approved refresher training based on the 1998 U.S. DOT EMT-Paramedic National Standard Curriculum prior to being scheduled for another attempt at the certification examination after three failures. A paramedic applicant who has failed the examination six times is disqualified from certification and must successfully complete a full paramedic education program, pursuant to paragraph 64J-1.009(1)(a), F.A.C., prior to being considered for subsequent examination and certification.~~

~~(7) Persons with documented learning disabilities in the areas of reading decoding or reading comprehension or some form of documented disability or cognitive processing deficit specifically in the reading area which would negatively impact on the candidate’s performance on the written or computer based examination may be eligible for special accommodations with the certification examination. The person requesting the accommodation must provide documentation of the diagnosis before any decision shall be made by the department or designee for accommodation in the administration of the paramedic examination.~~

~~(a) Individuals who qualify for special accommodation on the written or computer based examination due to a documented learning disability as described above shall be required to take the standard format of the examination, but shall receive additional time in which to complete the examination based on the department’s or designee’s assessment of the severity of the learning disability.~~

~~(b) Other types of accommodations to meet the needs of applicant’s disabilities shall be granted with appropriate documentation of disability as determined by the department or designee.~~

*Rulemaking Authority ~~381.0011,~~ 401.27, 401.35 FS. Law Implemented 381.001, 401.27, 401.35 FS. History–New 4-26-84, Amended 3-11-85, Formerly 10D-66.575, Amended 4-12-88, 12-10-92, 12-10-95, 1-26-97, Formerly 10D-66.0575, Amended 8-4-98, 6-3-02, 11-3-02, 10-25-04, 10-24-05, Formerly 64E-2.010, Amended 11-22-09, \_\_\_\_\_\_\_.*

64J-1.014 Records and Reports

(1) Each EMS provider shall be responsible for supervising, preparing, filing and maintaining records and for submitting reports to the department as requested. All records shall be handled in such a manner as to ensure reasonable safety from water and fire damage and to be safeguarded from unauthorized use. Any records maintained by the provider as required by these rules shall be accessible to authorized representatives of the department and shall be retained for a period of at least 5 years except as otherwise specified in this rule. Each EMS provider shall maintain the following administrative records:

(a) through (c) No change.

(2) The transporting vehicle personnel shall at a minimum provide an abbreviated patient record to the receiving hospital personnel at the time the patient is transferred that contains all known pertinent incident information as defined in Rule 64J-1.014(3), F.A.C. Documentation of known information in an abbreviated patient care record shall not delay response to requests for emergency medical assistance.

~~(2) Each EMS provider shall ensure that an accurate and complete patient care record was prepared for each instance in which a patient was transported to a hospital. The transporting EMS provider shall have the complete and accurate patient care record as defined in subsection 64J-1.001(18), F.A.C., and required in Rule 64J-1.014, F.A.C., available upon request within 24 hours of the time the vehicle was originally dispatched in response to the request for emergency medical assistance.~~

(3) The abbreviated ~~accurate and complete~~ patient care record shall include all known information listed below ~~and the known information defined under subsection 64J-1.001 (18), F.A.C.;~~:

(a) through (n) No change

(4) Non-transporting vehicle personnel shall provide an abbreviated patient care record or verbal report with known information pertinent to the patient’s identification, patient assessment and care provided to the patient to the transporting vehicle personnel at the time the responsibility of the patient is transferred to the transporting service.

~~(5) Transporting vehicle personnel shall provide recorded information to the receiving hospital personnel at the time the patient is transferred that contains all known pertinent incident, patient identification and patient care information.~~

(5)~~(6)~~ Each EMS provider shall maintain a copy of the patient care record as defined in subsection 64J-1.001(14) ~~(18)~~, F.A.C., for a period of at least 5 years. This copy is considered to be the copy of record, shall contain an original signature by the lead crew member or an identification number assigned to the lead crew member and is certifiable as a true copy.

(6)~~(7)~~ Each licensed EMS provider is responsible for quality review for completeness and accuracy of their own patient care records.

(7)~~(8)~~ Medication errors and reactions en route shall be reported to the physician who ordered the medication, the receiving physician, and the ALS medical director.

(8)~~(9)~~ Each provider shall maintain a written plan, available for review by the department, for the proper handling, storage, and disposal of biohazardous wastes in accordance with Chapter 64E-16, F.A.C.

(9)~~(10)~~ Each provider shall return his license to the department within 15 calendar days after a change of name or ownership of the service or upon permanently ceasing to provide service.

(10)~~(11)~~ Each air ambulance provider shall maintain documentation describing the service rendered to the patient and cost as part of the patient’s record in accordance with Section 401.251(4)(c), F.S.

(11)~~(12)~~ A fixed wing air ambulance provider shall have an air medical crew member document the cabin altitude hourly. The cabin pressure shall be documented on the patient care record.

(12) Each EMS provider may document and submit to the department an electronic patient care record in accordance with the format and time frame specified in the Emergency Medical Services Tracking and Reporting System (EMSTARS) Data Dictionary Version 1.4.1, (September 1, 2009) at <http://www.floridaemstars.com/docs/FloridaEMSDataDictionary_V_1_4.pdf>, and Florida Prehospital Emergency Medical Services Tracking & Reporting System Program Manual, Version 2 (February 2, 2016)), until Decemember 31, 2016 or EMSTARS Data Dictionary Version 3, (October 16, 2015) at <http://www.floridaemstars.com/docs/flemstarsdatadictionaryvers301.pdf>, concurrently or after December 31, 2016. Both versions are incorporated by reference and available from the department at, \_\_\_\_\_\_\_\_\_\_\_.

(13) If the provider fails to submit electronic patient care records in accordance with the format and time frame specified in the EMSTARS Version 1.4 or Version 3, the provider must document and submit to the department, the information contained on DH Form 1304, May 02, “EMS Aggregate Prehospital Report and Provider Profile Information Form”, which is incorporated by reference and available from the department as defined and required in DHP 150-445, May 02, “Florida Department of Health, Bureau of Emergency Medical Oversight Instruction Manual for the: EMS Aggregate Pre-hospital and Provider Profile Information Form (DH 1304)”, which is incorporated by reference and available from the department.

(a) Reports shall be submitted in accordance with the format and time frame specified in DHP 150-445. Reports received after the due date(s) specified in DHP 150-445 or not in the format specified in DHP 150-445, may not be included in reports published by the department.

(b) ~~The non-transporting unit is responsible for providing critical treatment and intervention information as defined in DHP 150-445 to the transporting unit at the time that the responsibility for the patient’s care is transferred to the transporting unit.~~ The transporting unit is required to include counts of all known critical treatments and interventions that were administered or attempted to be administered to the patient prior to their arrival as defined and required in DHP 150-445 as part of their required quarterly submission of DH Form 1304 to the department.

(14) A patient care record as defined in 64J-1.001(14) or an electronic patient care record containing the same information shall be made available by the EMS provider to the receiving hospital upon request within 48 hours of the time the vehicle is originally dispatched in response to the request for emergency medical assistance.

*Rulemaking Authority 381.0011, 395.405, 401.30, 401.35 FS. Law Implemented 381.001, 381.0205, 395.401-.405, 401.23, 401.25, 401.27, 401.30, 401.35, 401.411 FS. History–New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.60, Amended 11-2-86, 4-12-88, 8-3-88, 12-10-92, 11-30-93, 12-10-95, 1-26-97, Formerly 10D-66.060, Amended 7-14-99, 2-20-00, 4-15-01, 11-3-02, 10-24-05, Formerly 64E-2.01, Amended \_\_\_\_.*

64J-1.019 Emergency Treatment of Insect Stings.

*Rule making Authority 381.88(3) FS. Law Implemented 381.88 FS. History–New 9-3-00, Amended 4-15-01, Formerly 64E-2.035, Repealed\_\_\_\_\_.*

64J-1.020 Training Programs.

(1) Qualifications and procedures for EMT and paramedic training programs in addition to those contained in Section 401.2701, F.S., are as follows:

(a) through (e) No change.

(2) To be approved as an EMT Training Program, an entity shall submit a completed DH Form 1698, 8/15, ~~December 2008,~~ Application for Approval of an Emergency Medical Services (EMS) Training Program, which is incorporated by reference and available from the department, and at [www.floridahealth.gov](http://www.floridahealth.gov/). ~~as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com~~.

(3) To be approved as a Paramedic Training Program, an entity shall submit a completed DH Form 1698, 8/15, ~~December 2008,~~ Application for Approval of an Emergency Medical Services (EMS) Training Program.~~,~~ ~~which is incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com.~~

(4) No change.

(5) Approved training programs that wish to offer EMT or Paramedic training programs after their approval expiration date must apply to the department. An entity shall submit a completed DH Form 1698, 8/15, ~~December 2008,~~ Application for Approval of an Emergency Medical Services (EMS) Training Program. ~~,~~ ~~which is available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at http://www.fl-ems.com.~~ The application must be received by the department not less than 90 days before the training program ~~programs~~ approval expiration date and no earlier than 180 days prior to the approval expiration date.

(6) EMT ~~Emergency Medical Technician (EMT)~~ training program course length shall be a minimum of 250 hours. EMT students shall not have less than five (5) patient contacts resulting in the student accompanying the patient to the hospital. Student to Instructor ratios shall not exceed 6:1 during the skills laboratory phase of the program.

(7) Paramedic training program course length shall be a minimum of 1100 hours. ~~that includes the recommended hours listed in the United States Department of Transportation, National Highway Traffic Safety Administration’s, 1998 EMT-Paramedic National Standard Curriculum for classroom, skills laboratory, hospital clinical, and field internship~~.

(8) Florida approved EMT and paramedic ~~Emergency Medical Technician~~ t~~T~~raining p~~P~~rograms must have, at a minimum, the equipment and supplies listed in DH Form 1698,8/15, Application for Approval of an Emergency Medical Services (EMS) Training Program. ~~Table I.~~

~~(9) Florida approved paramedic Training Programs must have at a minimum the equipment and supplies listed in Table I and Table II.~~

(9)~~(10)~~ All equipment and supplies must be appropriate to the objective being taught, in good working order, and available in sufficient quantity for the students enrolled. There must be sufficient equipment so that not more than six students are required to learn on a single piece of equipment at any one time.

~~TABLE I~~

~~EMERGENCY MEDICAL TECHNICIAN BASIC TRAINING PROGRAM~~

~~REQUIRED EQUIPMENT AND SUPPLIES~~

~~AIRWAY~~

~~Oral pharyngeal airways (Adult, Child, & Infant)~~

~~Nasal pharyngeal airways (Adult, Child, & Infant)~~

~~Bag valve mask (Adult, Child, & Infant)~~

~~Pocket mask with one way valve (Adult)~~

~~SUCTION~~

~~Portable suction unit Connecting tubing (Battery Powered & Manual)~~

~~Soft tip suction catheters (Sizes 6 - 18 French)~~

~~Rigid suction tip~~

~~Meconium Aspirator~~

~~Bulb syringe~~

~~Oxygen (O2) and Supplies~~

~~O~~~~2~~ ~~tank with wrench~~

~~Regulator with high flow port~~

~~Demand valve \*\*~~

~~Bite sticks~~

~~High concentration mask (Adult, Child, & Infant)~~

~~Simple face mask (Adult, Child, & Infant)~~

~~Nasal cannulas (Adult, Child, & Infant)~~

~~Venturi mask (Adult)~~

~~O~~~~2~~ ~~tubing~~

~~Nebulizer~~

~~DIAGNOSTIC EQUIPMENT~~

~~Blood pressure cuffs (Thigh, Large Adult, Adult, Child, and Infant)~~

~~Stethoscopes (Adult & Pediatric)~~

~~Teaching stethoscopes~~

~~Thermometer~~

~~Penlights~~

~~INFECTION CONTROL~~

~~Gloves (latex, non-latex, & powder free) (All Sizes)~~

~~Disinfectant~~

~~Biohazard trash bags~~

~~Sharps container\*\*~~

~~Personal protective equipment (Gown, Eye & Face Shields)~~

~~PHARMACEUTICALS~~

~~Insta glucose~~

~~Epi Pen trainer~~

~~Activated charcoal~~

~~Placebo inhalers~~

~~Nitroglycerin (May be simulated)~~

~~MEDICAL TRAINING EQUIPMENT~~

~~AED trainer with pads\*\* (Adult & Child)~~

~~CPR manikins (Adult, Child & Infant)~~

~~Airway manikins \*\* (Adult, Child & Infant)~~

~~Childbirth manikins\*\*~~

~~Full body basic life support manikins (Adult & Child)~~

~~Moulage kit \*\*~~

~~IMMOBILIZATION AND EXTRICATION~~

~~Non-wood long spine board with straps (Adult & Pediatric)~~

~~Short board (Adult & Pediatric)~~

~~Vest style immobilization device with straps (Adults)~~

~~C-collars (Adult Child & Pediatric)~~

~~Head immobilizers (Adult & Pediatric)~~

~~Basket stretcher\*\*~~

~~Scoop stretcher\*\*~~

~~Car seat\*\* (Child & Infant)~~

~~Flexible stretcher \*\*~~

~~Patient restraints~~

~~SPLINTS~~

~~Traction splints (two out of the three) (Adult & Pediatric)~~

~~Vacuum (Assorted sizes)~~

~~Air (Assorted sizes)~~

~~Padded board splints (Assorted sizes)~~

~~PATIENT TRANSPORT EQUIPMENT~~

~~Stretcher with straps (Must be capable of multi level positioning)~~

~~Stair chair with straps~~

~~BANDAGES AND DRESSINGS~~

~~Elastic bandage~~

~~Roller gauze~~

~~Non-sterile or sterile sponges~~

~~Abdominal pads~~

~~Multi trauma dressing~~

~~Non-adherent dressing~~

~~Petroleum gauze~~

~~Triangular bandages~~

~~Eye pads~~

~~Band-aids~~

~~Tape (Assorted sizes)~~

~~Cold packs~~

~~Burn sheets (May be simulated)~~

~~OB kits~~

~~Tongue depressors~~

~~MISCELLANEOUS~~

~~Trauma shears~~

~~Ring cutter with extra blades~~

~~Emergency/Survival blanket~~

~~Jump bag~~

~~Helmets (Open & Full face)~~

~~Football Helmet and Shoulder Pads \*\*~~

~~Items marked with a double asterisk are not required to be present at all sites during active classes. The program must demonstrate that these items are available from other sites within the program or by written contract with another agency.~~

~~PARAMEDIC TRAINING PROGRAM EQUIPMENT AND SUPPLIES~~

~~In addition to equipment and supplies required for EMT Training Programs~~

~~AIRWAY~~

~~Esophageal intubation detector (Two out of three)~~

~~Colorimetric CO2 detector (Adult & Pediatric)~~

~~Bulb type intubation detector (Adult)~~

~~Syringe type intubation Detector (Adult)~~

~~Endotracheal tubes (Sizes 2.5-8)~~

~~Naso-gastric tubes (Assorted sizes)~~

~~Commercial manufactured tube holder (Adult & Pediatric)~~

~~Laryngoscope handles with batteries (Adult & Pediatric)~~

~~Laryngoscope with Macintosh and miller blades (Complete set of each)~~

~~Replacement laryngoscope light bulbs~~

~~Stylettes (Assorted sizes)~~

~~Lighted stylettes (Adult)~~

~~Cricothyrotomy kit\*\*~~

~~Pneumothorax kit\*\*~~

~~Superglotic airways~~

~~OXYGEN AND SUPPLIES~~

~~Continuous Positive Airway Pressure (CPAP) with Circuits and Mask \*\* (Adult)~~

~~Automatic Ventilator with Circuits Mask and Peep Valve\*\* (Adult & Pediatric)~~

~~DIAGNOSTIC EQUIPMENT~~

~~Glucometer with lancets and test strips~~

~~CARDIOLOGY SUPPLIES~~

~~Cardiac monitor capable of defibrillation with cables~~

~~Cardiac monitor capable of defibrillation, 12 lead EKG, and pacing, with cables. and wave form end title carbon~~

~~dioxide detector capable of printing.~~

~~Battery support system with spare batteries~~

~~EKG paper~~

~~Rhythm generator capable of generating 3 or 4 lead displays~~

~~Rhythm generator capable of generating 12 lead rhythms~~

~~IV AND PHARMACEUTICALS SUPPLIES~~

~~IV catheters (Sizes 22 – 14 gauges)~~

~~Butterfly needles (Assorted Sizes)~~

~~Blood collection tubes~~

~~Vacutainer device with luer adapter~~

~~Syringes (Sizes 3-20cc)~~

~~Hypodermic needles (Sizes 25-18 gauge)~~

~~Intraosseous Needles~~

~~Practice medication ampoules, vials, and premeasured syringes~~

~~Macrodrips IV sets~~

~~Microdrips IV sets~~

~~IV extension sets~~

~~3 way stop cocks~~

~~Buretrol solution set~~

~~IV fluids~~

~~IV start kits~~

~~ADVANCED LIFE SUPPORT PHARMACOLOGICAL DRUGS~~

~~(May be commercially packaged or simulated)~~

~~Atropine~~

~~Dextrose~~

~~Furosemide~~

~~Magnesium~~

~~Nalaxone~~

~~Sodium Bicarbonate~~

~~Epinephrine 1:10000~~

~~Epinephrine 1:1000~~

~~Lidocaine~~

~~Amiodarone~~

~~Dopamine~~

~~Vasopressin~~

~~Procinamide~~

~~Adenosine~~

~~Digoxin~~

~~Verapamil~~

~~Cardizem~~

~~Morphine Sulfate~~

~~Nitroglycerin~~

~~Aspirin~~

~~Lidocaine drip~~

~~Dopamine drip~~

~~MEDICAL TRAINING EQUIPMENT~~

~~IV trainer (Adult)~~

~~Cricothyrotomy manikins\*\* (Adult)~~

~~Intraosseous trainer\*\* (Pediatric)~~

~~IM and Sub-Q injection trainer\*\* (Adult & Pediatric)~~

~~Pneumothorax trainer\*\* (Adult)~~

~~Full body advanced life support manikins\*\* (Adult, Child, & Infant)~~

~~Consumable parts for all trainers \*\* (Adult, Child, & Infant)~~

~~MISCELLANEOUS ITEMS~~

~~Triage tags~~

~~Two-way communication radios or walkie-talkie~~

~~Length-Base resuscitation device~~

~~\*\*Items marked with a double asterisk are not required to be present at all sites during active classes. The program must demonstrate that these items are available from other sites within the program or by written contract with another agency.~~

*Rulemaking Authority 401.27, 401.2715 FS. Law Implemented 401.27, 401.2715 FS. History–New 9-3-00, Amended 4-15-01, 4-21-02, 11-3-02, 12-18-06, 10-16-07, Formerly 64E-2.036, Amended 8-12-10, \_\_\_\_\_\_\_\_.*

Substantial re wording of Rule 64J-1.0201 follows. See Florida Administrative Code for present text.

64J-1.0201 EMS Instructor Qualifications

(1) To be eligible for approval as an EMS Training Program, an applicant must ensure, with supporting documentation, that each instructor has met the standards listed below for their instructor position(s) as listed in the school’s Emergency Medical Services Training Program’s DH Form 1698, 8/15, Application for Approval of an Emergency Medical Services (EMS) Training Program (See section 64J-1.020).

(2) Those persons teaching in a state approved EMS Training Program shall, at a minimum, meet the following criteria:

(a) Except for those persons teaching only in an EMT training program, shall have successfully completed an associate’s degree from an institution whose accreditation is recognized by the United States Department of Education.

(b) For Paramedic Training Programs, be certified as a Florida paramedic in good standing with the department, with at least four years of field level provider experience in a pre-hospital setting with an Advanced Life Support EMS provider.

(c) For Emergency Medical Technician Training Programs, be certified as a Florida EMT or paramedic in good standing with the department and have at least three years of field provider experience with an ALS provider.

(d) Have successfully completed, at a minimum, a 40-hour instructional methodology course.

(e) Those persons teaching in a state approved EMS Training Program prior to the effective date of this rule are exempt from these instructor qualifications while employed in the position held as of the rule effective date.

(f) These EMS instructor qualifications do not apply to clinical or field preceptors.

(3) Subject matter experts are exempt from the requirements of this rule. However, they shall provide no more than five percent of the total hours of instruction in the didactic or laboratory portions of the program’s contact hours. The state approved EMS Training Programs shall maintain a curriculum vitae and a copy of the appropriate professional credentials for each subject matter expert utilized in their program.

(4) Physicians licensed under Chapter 458 or 459, F.S. are exempt from all EMS instructor qualifications.

(5) Those persons who serve as a Program Director of a state approved EMS Training Program shall, at a minimum, meet the following criteria:

(a) Shall have successfully completed a bachelor’s degree from an institution whose accreditation is recognized by the United States Department of Education.

(b) Be certified as a Florida paramedic in good standing with the department, with at least four years of field level provider experience in the pre-hospital setting with an Advanced Life Support EMS provider.

(c) Have a minimum of two years teaching experience in EMS education.

(d) Have successfully completed, at a minimum, a 40-hour instructional methodology course.

(e) Those persons serving as a program director in a state approved EMS Training Program prior to the effective date of this rule are exempt from the program director qualifications while employed in the position held as of the effective date of the rule.

(f) Program Directors hired from out of state must be licensed or certified as a paramedic in their previous state; must be in good standing with that state and will have 12 months from their date of hire to obtain their Florida paramedic certification.

(g) Interim program director:

1. Must at a minimum meet the requirements of an instructor as required in rule 64J-1.0201 (2), and

2. May serve for a maximum of twelve months in the absence of a permanent program director.

*Rulemaking Authority 401.27(2), 401.35(1)(b), 401.35(1)(h) FS. Law Implemented 401.27, 401.27(4)(a)1., 401.27(4)(a)2., 401.2701(1)(a)5.a. FS. History–New 12-31-09, Amended\_\_\_\_\_\_.*

64J-1.0202 EMS Recertification Training Programs.

(1) Commencing with the effective date of this rule and expiring December 1 of even numbered years thereafter, entities not licensed as an emergency medical services provider or a department approved Florida training program shall be approved to conduct EMT or paramedic recertification training providing they meet the requirements contained in Section 401.2715, F.S., and this section. To be approved as an EMS Recertification Training Program, each applicant shall:

(a) through (b) No change.

(c) Submit the following for each course offering:

1. Behavioral objectives:

a. Describe expected learner outcomes in terms that can be evaluated, are obtainable and are relevant to the January 2009 ~~1996~~ U.S. DOT EMT National EMS Education Standards -~~Basic National Standard Refresher Curriculum~~ referenced in Rule 64J-1.008, F.A.C., and to the January 2009 ~~1998~~ U.S. DOT Paramedic National EMS Education Standards ~~EMT-Paramedic (EMT-P) National Standard Curriculum~~ referenced in Rule 64J-1.009, F.A.C.

b. Determine teaching methodology and plan for evaluation.

2. through 7. No change.

(2) through (5) No change.

*Rulemaking Authority 401.27, 401.2715 FS. Law Implemented 401.27, 401.2715 FS. History–New 5-27-10, Amended\_\_\_\_.*