

**ADOPTED REGULATION OF THE
STATE BOARD OF HEALTH**

LCB File No. R024-14

Effective October 24, 2014

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: §§1-5, 7-25, 30, 33, 39, 44, 46, 47, 61, 62, 64, 69, 73, 82-84 and 91, NRS 450B.120; §6, NRS 450B.120 and 450B.900; §§26-29, NRS 450B.120 and 450B.160; §§31, 32 and 80, NRS 450B.120 and 450B.180; §§34 and 35, NRS 450B.120, 450B.180, 450B.1905, 450B.191 and 450B.195; §§36 and 77, NRS 450B.120 and 450B.195; §37, NRS 450B.120, 450B.1915 and 450B.197; §38, NRS 450B.120, 450B.130 and 450B.230; §§40-42, NRS 450B.120 and 450B.155; §§43 and 45, NRS 450B.120, 450B.180, 450B.1915, 450B.197, 453.375 and 454.213; §§48-50, NRS 450B.120 and 450B.1975; §§51-57, 68, 71 and 72, NRS 450B.120 and 450B.200; §§58-60, 63, 65-67 and 70, NRS 450B.120 and 450B.130; §§74-76 and 79, NRS 450B.120, 450B.160 and 450B.200; §78, NRS 439.150, 439.200, 450B.120, 450B.155 and 450B.200; §81, NRS 450B.120, 450B.155, 450B.160, 450B.1905, 450B.191 and 450B.195; §§85 and 87-89, NRS 450B.120 and 450B.237; §86, NRS 450B.120, 450B.237 and 450B.238; §90, NRS 449.697, 450B.490, 450B.530 and 450B.550.

A REGULATION relating to emergency medical services; providing for the issuance of an endorsement as a critical care paramedic; providing for the assessment of administrative penalties; revising the categorization of providers of emergency care to consist of emergency medical responders, emergency medical technicians, advanced emergency medical technicians and paramedics; revising various provisions relating to standards and training for providers of emergency care; revising provisions relating to the preparation, inspection and use of ambulances, air ambulances and vehicles not used for the transportation of patients; revising provisions relating to emergency medical dispatchers; revising provisions relating to ambulance or air ambulance services; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires the State Board of Health to promulgate such regulations as it determines are necessary to administer the provisions of chapter 450B of NRS which concerns emergency medical services. (NRS 450B.120) Additionally, Senate Bill No. 100 of the 2013 Legislative Session amended existing law to revise the terms used for the three types of emergency medical technicians for consistency with certain national standards. (Chapter 226, Statutes of Nevada 2013, p. 935)

Sections 8, 10-17, 19, 20, 26-28, 30-38, 40, 42-45, 47-51, 76, 78, 80-83 and 85-88 of this regulation revise various provisions to reflect the use of certain national standards and to revise the terms used for providers of emergency care. **Sections 51-57 and 79** of this regulation revise various provisions relating to the issuance of permits to ambulance and air ambulance services. **Section 52** requires an applicant for a permit to operate a service to identify the level of service to be provided under the permit. **Sections 58-71, 74 and 84** of this regulation revise various provisions relating to the operation of and standards for ambulances, air ambulances and other vehicles not used by a service to transport patients. **Section 72** of this regulation allows the Division of Public and Behavioral Health of the Department of Health and Human Services to recover investigative costs from a person against whom a substantiated complaint is filed. **Section 90** of this regulation provides for the acceptance and honoring of a Physician Order for Life-Sustaining Treatment form by a person who administers emergency medical services.

Section 1. Chapter 450B of NAC is hereby amended by adding thereto the provisions set forth as sections 2 to 6, inclusive, of this regulation.

Sec. 2. *“Emergency medical services registered nurse” means a registered nurse who holds a valid certificate of completion of training as an attendant pursuant to subsections 7 and 8 of NRS 450B.160.*

Sec. 3. *“Endorsement” means an endorsement issued for additional training beyond an initial certification for an emergency medical dispatcher, emergency medical responder, emergency medical technician, advanced emergency medical technician, paramedic, critical care paramedic or instructor that meets a national standard requested or recognized in a service protocol.*

Sec. 4. 1. *To receive an endorsement as a critical care paramedic in emergency medical services, an applicant must provide proof of the successful completion of a course in training equivalent to the national standard set forth by the National Highway Traffic Safety Administration of the United States Department of Transportation for a critical care paramedic or an equivalent standard approved by the Administrator of the Division.*

2. A person endorsed as a critical care paramedic in emergency medical services may only practice within that role pursuant to a service protocol approved by the Division.

Sec. 5. 1. An endorsement as a critical care paramedic in emergency medical services expires on the date of expiration appearing on the certificate of the paramedic who receives the endorsement.

2. The endorsement is renewable if the holder of the endorsement verifies participation as a critical care paramedic for at least 48 hours of emergency medical training beyond the scope of practice of a paramedic equivalent to the national standard set forth by the National Highway Traffic Safety Administration of the United States Department of Transportation for a critical care paramedic or an equivalent standard approved by the Administrator of the Division.

Sec. 6. 1. The Division may assess an administrative penalty in the amount of \$50 per person per day against a service which allows a person to perform the duties of an attendant on an ambulance, air ambulance or agency's vehicle without a valid certificate issued by the Division. The Division may temporarily deny an application for a certificate submitted by a person who performed the duties of an attendant without a valid certificate for a period not to exceed 30 days.

2. The Division may assess an administrative penalty in the amount of \$500 per day against a service which operates a unit without a permit issued by the Division.

3. If, upon inspection, the Division determines that a unit operated by a service has violated the provisions of this chapter or chapter 450B of NRS, the Division may:

(a) Prohibit the service from operating the unit until a reinspection which finds no violations has been completed and the service has paid a fee for the reinspection in the amount of \$100; or

(b) Require the service to submit a written statement within 3 working days after the inspection indicating that all violations have been corrected and requesting a reinspection of the unit.

Sec. 7. NAC 450B.010 is hereby amended to read as follows:

450B.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in:

1. NAC 450B.013 to 450B.280, inclusive ~~{;}~~, *and sections 2 and 3 of this regulation;* and
2. NRS 450B.025, 450B.030, 450B.040 and 450B.060 to 450B.110, inclusive,

↪ have the meanings ascribed to them in those sections.

Sec. 8. NAC 450B.013 is hereby amended to read as follows:

450B.013 “Advanced emergency care” means care which includes ~~{, in addition to}~~ the activities of intermediate emergency care ~~{, advanced invasive procedures for cardiopulmonary emergencies, the administration of additional medications for acute and chronic medical conditions, the recognition of arrhythmia and therapeutic intervention under}~~ *and is provided:*

1. Under the ~~{supervision}~~ direction of a physician or a registered nurse supervised by a physician ~~{}~~ through direct communication to the hospital where the physician is based or, in the absence of direct communication, by means of a protocol issued to the registered nurse by the physician; and

2. Pursuant to a national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for paramedics or an equivalent standard approved by the Administrator of the Division.

Sec. 9. NAC 450B.015 is hereby amended to read as follows:

450B.015 “Agency’s vehicle” means a vehicle operated by a service ~~for fire fighting agency~~ under a permit issued pursuant to this chapter, which is staffed and equipped to respond to a medical emergency ~~and~~ *and which is not used for the transportation of patients.*

Sec. 10. NAC 450B.061 is hereby amended to read as follows:

450B.061 “Basic emergency care” means care which ~~includes assessing life-threatening and nonlife-threatening medical conditions, establishing and maintaining a patient’s airway and ventilation, rendering cardiopulmonary resuscitation, controlling bleeding, treating shock and poisoning, dressing and bandaging wounds, splinting fractures, giving emergency obstetrical assistance and caring for newborn infants and executing appropriate rescue and extrication procedures.~~ *is provided:*

1. Under the direction of a physician or registered nurse supervised by a physician through direct communication to the hospital where the physician is based or, in the absence of direct communication, by means of a protocol issued to the registered nurse by the physician; and

2. Pursuant to a national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for emergency medical technicians or an equivalent standard approved by the Administrator of the Division.

Sec. 11. NAC 450B.070 is hereby amended to read as follows:

450B.070 “Certificate” means the certificate issued by the ~~Health~~ Division under this chapter to a person certifying him or her to be qualified as ~~a first~~ *an emergency medical dispatcher, an emergency medical responder, an emergency medical technician, an ~~intermediate~~ advanced emergency medical technician, ~~an advanced emergency medical technician~~ a paramedic* or an instructor in a program of training in emergency medical services.

Sec. 12. NAC 450B.090 is hereby amended to read as follows:

450B.090 “Driver” means a qualified person, as determined by the Department of Motor Vehicles, who:

1. Is responsible for the operation of an ambulance over the streets, roads and highways within this state; and
2. Possesses evidence that the person has successfully completed *training pursuant to* a national standard ~~course~~ for the operation of an emergency vehicle or an equivalent ~~course~~ *standard* approved by the ~~Health~~ Division.

Sec. 13. NAC 450B.105 is hereby amended to read as follows:

450B.105 “Emergency care” means basic, intermediate or advanced medical care given to a patient in an emergency . ~~and before the patient arrives at a hospital.~~ *The term includes treatment or evaluation that is provided when no transportation to a medical facility is determined to be necessary.*

Sec. 14. NAC 450B.115 is hereby amended to read as follows:

450B.115 ~~First~~ *“Emergency medical responder”* means a person who has successfully completed ~~the national standard course~~ *training* for ~~first~~ *emergency medical responders* ~~pursuant to a national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for~~

emergency medical responders or an equivalent standard approved by the Administrator of the Division.

Sec. 15. NAC 450B.125 is hereby amended to read as follows:

450B.125 ~~["Health]~~ "Division" means the ~~Health]~~ Division *of Public and Behavioral Health* of the Department of Health and Human Services.

Sec. 16. NAC 450B.147 is hereby amended to read as follows:

450B.147 "Instructor" means a person who has successfully completed ~~["a national standard course]~~ *training* for instructors *pursuant to a national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for instructors* or an equivalent ~~["course]~~ *standard* approved by the ~~Health]~~ *Administrator of the* Division.

Sec. 17. NAC 450B.148 is hereby amended to read as follows:

450B.148 "Intermediate emergency care" means care which includes ~~["in addition to]~~ the activities of basic emergency care ~~["invasive procedures and the administration of certain medications for acute life-threatening conditions under]~~ *and is provided:*

1. *Under* the ~~["supervision]~~ *direction* of a physician or a registered nurse supervised by a physician ~~["]~~ *either through direct communication to the hospital where the physician is based or, in the absence of direct communication, by means of a protocol issued to the registered nurse by the physician; and*

2. *Pursuant to a national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for advanced emergency medical technicians or an equivalent standard approved by the Administrator of the Division.*

Sec. 18. NAC 450B.150 is hereby amended to read as follows:

450B.150 “License” means the license issued by, or on behalf of, the ~~Health~~ Division to a person certifying him or her as qualified to perform the duties of a driver, attendant ~~or~~ *or* air attendant ~~for volunteer~~ pursuant to this chapter.

Sec. 19. NAC 450B.177 is hereby amended to read as follows:

450B.177 “National standard ” ~~course~~ means a program of training in procedures and skills for emergency medical care as prepared and authorized by the National Highway Traffic Safety Administration of the United States Department of Transportation ~~or~~, *National Association of Emergency Medical Service Educators, Federal Aviation Administration or American Heart Association, as appropriate.*

Sec. 20. NAC 450B.180 is hereby amended to read as follows:

450B.180 “Patient” means any person who is sick, injured, wounded, or otherwise incapacitated or helpless and who is carried in an ambulance or air ambulance or is cared for ~~at the scene of an emergency~~ by ~~a basic, intermediate or~~ *an emergency medical dispatcher, emergency medical responder, emergency medical technician,* advanced emergency medical technician ~~or~~, *paramedic or registered nurse.*

Sec. 21. NAC 450B.219 is hereby amended to read as follows:

450B.219 “Report of emergency care” means the record of the care given to a person at the scene of an emergency and the transportation or transfer of any patient *to Nevada from a location within another state,* within Nevada or from Nevada to a location in another state.

Sec. 22. NAC 450B.230 is hereby amended to read as follows:

450B.230 “Service” means an *organization which provides* ambulance or air ambulance service ~~or~~ *or which provides units upon request or to provide coverage for a special event,*

including, without limitation, a fire-fighting agency issued a permit by the Division or a volunteer service, whether or not the service is conducted pursuant to a business license issued by a local government.

Sec. 23. NAC 450B.260 is hereby amended to read as follows:

450B.260 “Unit” means an *agency’s vehicle, an ambulance* ~~;~~ *or an air ambulance* . ~~for fire-fighting agency’s vehicle.~~

Sec. 24. NAC 450B.280 is hereby amended to read as follows:

450B.280 “Volunteer service” means a service approved by the ~~Health~~ Division for the operation of any ambulance *or air ambulance*, or other motor vehicle *which is not used for the transportation of patients*, for the purpose of *responding to emergencies or* transporting sick or injured persons or dead bodies without compensation other than reimbursements to defray the actual expenses of providing the service. A “volunteer service” may be wholly or partly subsidized and may be operated under the auspices of a governmental or public agency or an industrial or nonprofit corporation.

Sec. 25. NAC 450B.310 is hereby amended to read as follows:

450B.310 Unless exempted by subsection 6 of NRS 450B.160 or NRS 450B.830, no person may act in the capacity of an attendant of a service ~~for a fire-fighting agency, including a volunteer service or agency,~~ unless the person possesses a currently valid card evidencing that he or she holds a license issued by the ~~Health~~ Division and authorizing him or her to act in that capacity.

Sec. 26. NAC 450B.320 is hereby amended to read as follows:

450B.320 1. The ~~Health~~ Division may not issue a license to an applicant unless all the information required by NAC 450B.330 is contained in the application and the ~~Health~~ Division is satisfied that the applicant meets the following criteria:

(a) Is 18 years of age or older as of the date of the application.

(b) If applying to become an attendant:

(1) Holds a ~~class 3~~ *Class A, Class B or Class C* driver's license or its equivalent issued in this state; or

(2) Is employed in Nevada, makes his or her residence in ~~a contiguous~~ *another* state and is required by reason of residence to maintain a driver's license issued by that state, *and that license is* equivalent to a ~~class 3~~ *Class A, Class B or Class C driver's* license in this state.

(c) Is able to read, speak and understand the English language.

(d) Has been found by a licensed physician, *physician assistant or nurse practitioner* within the 6 months immediately preceding the date on which the application is submitted to be of sound physical and mental health and free of physical defects or diseases which may impair the applicant's ability to drive or attend an ambulance, air ambulance or ~~agency's vehicle~~ *other motor vehicle not used for the transportation of patients* and that determination is verified by the physician, *physician assistant or nurse practitioner* on a form approved by the ~~Health~~ Division for that purpose.

(e) Has not been convicted of ~~any~~ :

(1) Murder, voluntary manslaughter or mayhem;

(2) Assault or battery with intent to kill or to commit sexual assault or mayhem;

(3) Sexual assault, statutory sexual seduction, incest, lewdness or indecent exposure, or any other sexually related crime;

(4) Abuse or neglect of a child or contributory delinquency;

(5) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS, within the 7 years immediately preceding the date of application;

(6) Abuse, neglect, exploitation or isolation of older persons or vulnerable persons, including, without limitation, a violation of any provision of NRS 200.5091 to 200.50995, inclusive, or a law of any other jurisdiction that prohibits the same or similar conduct;

(7) Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the 7 years immediately preceding the date of application;

(8) Any other felony involving the use or threatened use of force or violence against the victim or the use of a firearm or other deadly weapon, within the 7 years immediately preceding the date of application; or

(9) Any felony or misdemeanor for committing an act which, in the judgment of the [Health] Division, indicates that the applicant may not be able to function properly as a licensee or to care for patients for whom he or she would become responsible.

(f) Possesses a certificate evidencing successful completion of a program of training with testing for competency in the procedures for emergency care which is equivalent to the national standard ~~[course]~~ *or an equivalent standard approved by the Administrator of the Division* for a ~~[basic, intermediate or]~~ *driver, emergency medical technician*, advanced emergency medical technician ~~[]~~ *or paramedic.*

(g) Submits evidence satisfactory to the [Health] Division of verification of the applicant's skills.

2. In addition, an applicant for a license as an air attendant must:

(a) Meet all the prerequisites for an attendant set forth in NAC 450B.310 to 450B.350, inclusive.

(b) Possess the following:

(1) A certificate as an ~~intermediate emergency medical technician or as an~~ advanced emergency medical technician *or as a paramedic* which was issued pursuant to chapter 450B of NRS; or

(2) A license as a registered nurse issued pursuant to chapter 632 of NRS ~~H~~ *and a certificate of completion of training as an attendant pursuant to subsections 7 and 8 of NRS 450B.160.*

(c) Provide to the ~~Health~~ Division documentation verifying successful completion of a course of training approved by the medical director of the service employing the applicant. The course must include:

- (1) Special considerations in attending a patient in an air ambulance;
- (2) Aircraft safety and orientation;
- (3) Altitude physiology and principles of atmospheric physics;
- (4) Familiarization with systems for air-to-ground communications;
- (5) Familiarization with the system of emergency medical services in the service area;
- (6) Survival procedures in an air ambulance crash;
- (7) Response procedures to accidents involving hazardous materials;
- (8) Use of modalities for in-flight treatment;
- (9) Infection control;
- (10) Oxygen therapy in relation to altitude;

(11) Patient assessment in the airborne environment; and

(12) Vital sign determination in the airborne environment.

3. In addition to the qualifications listed in subsections 1 and 2, ~~an advanced emergency medical technician~~ *a paramedic* or ~~a~~ *an emergency medical services* registered nurse providing advanced life support care in an air ambulance must ~~possess a valid certification~~ *provide evidence* of completion of a course in :

(a) Advanced ~~Cardiac~~ *Cardiovascular* Life Support issued by the American Heart Association or an equivalent course approved by the ~~Health~~ Division ~~;~~ ;

(b) *Pediatric Advanced Life Support issued by the American Heart Association or an equivalent course approved by the Division; and*

(c) *International trauma life support or an equivalent course approved by the Division.*

4. *If the Division rejects an application for a license, the Division shall send a notification to the applicant in writing in the manner prescribed by NAC 450B.710 stating that the application is rejected and setting forth the reason for the rejection and the right to appeal to the Division in the manner prescribed by NAC 439.300 to 439.395, inclusive.*

Sec. 27. NAC 450B.330 is hereby amended to read as follows:

450B.330 1. An application for a license must be made upon the form prepared and prescribed by the ~~Health~~ Division. The ~~Health~~ Division shall, within 30 days after receipt of an application, have an investigation made of the applicant and the information contained on the application. Upon completion of the investigation, the ~~Health~~ Division shall issue the license for which the application was made or notify the applicant in writing, in the manner prescribed in NAC 450B.710, that the application is rejected, setting forth the reasons for the rejection and the

right to appeal to the ~~Health~~ Division in the manner prescribed in NAC 439.300 to 439.395, inclusive.

2. On an initial application for a license, the applicant must submit the following:

(a) His or her complete name;

(b) His or her date of birth;

(c) His or her social security number;

(d) The address of his or her current residence;

(e) The name and address of the applicant's employer and the employer immediately preceding his or her current employment if the previous employment related to providing emergency medical services;

(f) A description of the last two jobs he or she held immediately before the application is made if those jobs related to providing emergency medical services;

(g) A statement of whether the applicant, within the 5 years immediately preceding the date of the application, has been convicted of, or forfeited bail for, a traffic violation other than a parking violation and, if so, when, where and under what circumstances the violation occurred;

(h) A statement of whether the applicant has been convicted of a felony or a misdemeanor other than a traffic violation and, if so, when and where the conviction occurred and a description of the offense;

(i) A description of the applicant's training and experience relating to the transportation and care of patients;

(j) A statement of whether the applicant has previously been licensed as a driver, attendant, attendant-driver or air attendant in a service ~~of a fire-fighting agency or volunteer service or agency~~ and, if so, where and by what authority that license was issued;

(k) A statement of whether such a license has ever expired or been revoked or suspended and, if so, for what cause;

(l) A statement indicating compliance with the provisions of NRS 450B.183; and

(m) The appropriate fee prescribed in NAC 450B.700.

3. An applicant for an initial license as an attendant must file with the ~~Health~~ Division, in addition to the information and fee specified in subsection 2, a valid certificate designating him or her as an emergency medical technician, ~~intermediate emergency medical technician or~~ advanced emergency medical technician ~~+~~ *or paramedic*.

4. An application for renewal of a license must:

(a) Be made on an abbreviated form of application prescribed by the ~~Health~~ Division;

(b) Include information relating to any conviction of the applicant for any felony or misdemeanor occurring after the submission of the application for the initial license; and

(c) Include the appropriate fee prescribed in NAC 450B.700.

5. The ~~Health~~ Division shall not renew a license if:

(a) An applicant fails to comply with the provisions of subsection 4; or

(b) In the judgment of the ~~Health~~ Division, the applicant is not able to function properly as an attendant or to provide care for patients for whom he or she would become responsible.

Sec. 28. NAC 450B.340 is hereby amended to read as follows:

450B.340 1. Upon the request of a holder of a permit to operate a service, the ~~Health~~ Division may issue a provisional license as an attendant to an applicant who has not completed the required training for licensure.

2. A provisional license as an attendant is valid for the period necessary for the applicant to comply with the requirements prescribed in this chapter for a regular license as an attendant, but

not more than 6 months. Upon completion of the training for the attendant, the operator of the service must submit to the ~~Health~~ Division the information required in subsection 1 of NAC 450B.320 and NAC 450B.330.

3. A person who holds a provisional license as an attendant issued under this section may serve in a training capacity if, during any period in which the person:

(a) Is at the scene of an emergency, he or she is accompanied by an attendant who is licensed at or above the level of licensure of the attendant as ~~a basic, intermediate or~~ *an emergency medical technician*, advanced emergency medical technician ~~+~~ or *paramedic; or*

(b) Transports a patient to a medical facility, he or she is accompanied by at least two attendants, one of whom is licensed at or above the level of licensure of the attendant as ~~a basic, intermediate or~~ *an emergency medical technician*, advanced emergency medical technician ~~+~~ or *paramedic*.

Sec. 29. NAC 450B.350 is hereby amended to read as follows:

450B.350 1. The license of an attendant is not assignable or transferable.

2. A license expires on the date of expiration appearing on the license. The date of expiration for a license must be the same as the date of expiration specified on the licensee's certificate as an emergency medical technician. The ~~Health~~ Division may designate the same year of expiration for the licenses of all attendants in a particular service . ~~for fire-fighting agency+~~

3. An attendant must renew his or her license on or before its expiration date.

4. The ~~Health~~ Division shall renew an attendant's license if the ~~Health~~ Division is satisfied that, in addition to complying with the other requirements for a renewal, the applicant

has complied with the requirements, limitations, terms and conditions applicable to obtaining an initial license.

5. A service ~~{or fire-fighting agency}~~ shall ensure that each of its attendants holds a valid license.

6. An official entry made upon any license must not be defaced, removed or obliterated. If any such defacement, removal or obliteration occurs on any portion of a license, the license is void.

Sec. 30. NAC 450B.355 is hereby amended to read as follows:

450B.355 1. To be certified as ~~{a first}~~ *an emergency medical* responder, an applicant must:

- (a) Be 16 years of age or older;
- (b) Have successfully completed the national standard ~~{course}~~ for ~~{first}~~ *emergency medical* responders ~~{or an equivalent curriculum}~~ *developed by the National Highway Traffic Safety Administration of the United States Department of Transportation and* approved by the ~~{Health}~~ Division;
- (c) Maintain a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the ~~{Health}~~ Division;
- (d) Submit a statement indicating he or she has complied with the provisions of NRS 450B.183; and
- (e) Submit the appropriate form and the fee prescribed in NAC 450B.700.

2. The applicant shall submit verification to the ~~{Health}~~ Division, signed by the person responsible for conducting the training, that the applicant has successfully completed the ~~{course or curriculum}~~ *national standard* specified in paragraph (b) of subsection 1.

3. Upon certification, ~~{a-first}~~ *an emergency medical* responder may ~~;~~
~~—(a) Provide services in rescue, first aid and cardiopulmonary resuscitation; and~~
~~—(b) Use an automatic or semiautomatic defibrillator to defibrillate a patient.}~~ *function within the scope of practice identified by the National Highway Traffic Safety Administration of the United States Department of Transportation in its publication designated “National EMS Scope of Practice Model” dated February 2007, which is hereby adopted by reference. A copy of the publication is available, free of charge, at the Internet address <http://www.ems.gov/education/EMSScope.pdf>.*

4. An initial certificate as ~~{a-first}~~ *an emergency medical* responder is valid for not more than 2 years as determined by the ~~{Health}~~ Division and expires on the date appearing on the face of the certificate.

Sec. 31. NAC 450B.360 is hereby amended to read as follows:

450B.360 1. To be certified as an emergency medical technician, *advanced emergency medical technician or paramedic*, an applicant must:

- (a) Submit an application to the ~~{Health}~~ Division on a form prepared by it;
- (b) ~~{Be 18 years of age or older;}~~
- ~~—(c) Successfully complete the national standard course for emergency medical technicians developed by the United States Department of Transportation and approved by the Health Division;~~
- ~~—(d) Be able to demonstrate proficiency in the oral and written expression of the English language;~~
- ~~—(e) Pass a written examination that is prepared and administered by the Health Division or approved by it;~~

~~—(f) Submit evidence satisfactory to the Health Division of verification of his or her skills;~~

~~—(g)~~ Maintain a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the ~~Health~~ Division;

~~(h)~~ (c) Submit a statement indicating compliance with the provisions of NRS 450B.183;
and

~~(i)~~ (d) Submit the ~~appropriate form and the~~ fee prescribed in NAC 450B.700.

2. ~~[The applicant must submit with the application verification that he or she has successfully completed the national standard course for emergency medical technicians developed by the United States Department of Transportation and approved by the Health Division. The verification must be signed by the physician of record who was responsible for the training.]~~ *An emergency medical technician, advanced emergency medical technician or paramedic who is registered by the National Registry of Emergency Medical Technicians or its successor organization shall be deemed to have satisfied the requirements of paragraph (b) of subsection 1.*

3. *In addition to the requirements of subsection 1, to be certified as a paramedic, the applicant must maintain:*

(a) A certificate to provide Advanced Cardiovascular Life Support issued by the American Heart Association or an equivalent certificate approved by the Division;

(b) A certificate to provide Pediatric Advanced Life Support issued by the American Heart Association or an equivalent certificate approved by the Division; and

(c) A certificate to provide international trauma life support or an equivalent certificate approved by the Division.

Sec. 32. NAC 450B.363 is hereby amended to read as follows:

450B.363 1. The ~~Health~~ Division may issue a certificate as an emergency medical technician , *advanced emergency medical technician or paramedic* to an applicant trained in another state if:

(a) The applicant:

- (1) Is a resident of Nevada;
- (2) Will be a resident of Nevada within 6 months after applying for certification; or
- (3) Is a resident of ~~an~~ *another* state ~~contiguous to Nevada~~ and is employed by ~~an~~ *active volunteer with* a service ~~fire-fighting agency~~ *that has been issued a permit* in Nevada.

(b) The applicant submits the appropriate form and the fee prescribed in NAC 450B.700.

(c) The applicant:

- (1) Has successfully completed training in a course approved by the appropriate authority in the other state, which course was at least equivalent to the national standard ~~course~~ *prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard* for emergency medical technicians, *advanced emergency medical technicians or paramedics, as appropriate, or an equivalent standard approved by the Administrator of the Division* and holds a valid certificate as an emergency medical technician , *advanced emergency medical technician or paramedic or equivalent, as appropriate*, issued by an authorized agency in the other state; or

(2) Holds a valid certificate as an emergency medical technician issued by the National Registry for Emergency Medical Technicians.

(d) *The applicant maintains a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the Division.*

(e) The applicant submits a statement indicating compliance with the provisions of NRS 450B.183.

(f) If the applicant is applying for a certificate as a paramedic, the applicant maintains:

(1) A certificate to provide Advanced Cardiovascular Life Support issued by the American Heart Association or an equivalent certificate approved by the Division;

(2) A certificate to provide Pediatric Advanced Life Support issued by the American Heart Association or an equivalent certificate approved by the Division; and

(3) A certificate to provide international trauma life support or an equivalent certificate approved by the Division.

(g) The applicant's certification or registration in the other state has not been revoked, terminated or suspended pursuant to any disciplinary proceeding.

~~(e)~~ *(h) The ~~Health~~ Division receives verification of the applicant's certificate as an emergency medical technician , **advanced emergency medical technician or paramedic or equivalent, as appropriate**, from the issuing agency of the other state on a form provided by the ~~Health~~ Division.*

2. The ~~Health~~ Division may require the applicant to:

(a) Demonstrate his or her practical skills.

(b) Pass a written examination ~~administered~~ **approved** by the ~~Health~~ Division ~~in accordance with the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation.~~

3. A certificate as an emergency medical technician , **advanced emergency medical technician or paramedic** issued pursuant to this section must be renewed in accordance with the provisions of NAC ~~450B.366.~~ **450B.380.**

Sec. 33. NAC 450B.366 is hereby amended to read as follows:

450B.366 1. A certificate as ~~{a first}~~ *an emergency medical* responder ~~{for an emergency medical technician}~~ expires on the date of expiration appearing on the certificate and, after the initial period, expires biennially. The ~~{Health}~~ Division shall designate the date of expiration of each certificate.

2. Such a certificate may be renewed if:

(a) The ~~{Health}~~ Division determines that the holder of the certificate has, before the date of expiration, successfully completed:

(1) A course in continuing training which is equivalent to the national standard *prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a* refresher course for ~~{first}~~ *emergency medical* responders ~~{for emergency medical technicians}~~ and ~~{is}~~ approved by the ~~{Health}~~ Division; or

(2) Any other program of continuing education approved by the ~~{Health}~~ Division. Such a program may not be approved unless the requirement for attendance for that program ~~{for a:}~~
~~———(I) First responder}~~ is at least 20 hours for renewal of certification.

~~{(II) Emergency medical technician is at least 30 hours for renewal of certification.}~~

(b) The holder submits, before the date the certificate expires, an application evidencing that he or she has met the requirements as set forth in paragraph (a).

Sec. 34. NAC 450B.375 is hereby amended to read as follows:

450B.375 1. If an ~~{intermediate}~~ emergency medical technician, *advanced emergency medical technician or paramedic* is unable to renew his or her certificate when required, he or she must, if he or she wishes to renew the certificate, submit a request for a late renewal on a form provided by the ~~{Health}~~ Division.

2. Upon approval by the ~~Health~~ Division of a request for a late renewal, the applicant must submit evidence satisfactory to the ~~Health~~ Division of:

(a) Successfully meeting all of the requirements for the renewal of a certificate as an emergency medical technician ~~+~~, *advanced emergency medical technician or paramedic, as appropriate;*

(b) Verification of his or her skills;

(c) ~~Receiving a score of not less than 80 percent on~~ *Passing* a written examination ~~administered~~ *approved* by the ~~Health~~ Division ~~+~~ *and* *in accordance with the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation;*

(d) *Submission of a statement indicating compliance with the provisions of NRS 450B.183;*
and

(e) Payment of the appropriate fee prescribed in NAC 450B.700.

3. Except as otherwise provided in subsection 4, a late renewal may be authorized for the remainder of the new period of certification.

4. The ~~Health~~ Division shall deny an application for late renewal if more than 3 years have elapsed from the date of the expiration of the certificate.

Sec. 35. NAC 450B.380 is hereby amended to read as follows:

450B.380 1. A certificate as an ~~intermediate~~ emergency medical technician, *advanced emergency medical technician or paramedic* expires on the date of expiration appearing on the certificate and, after the initial period, expires biennially. The ~~Health~~ Division shall designate the date of expiration of each certificate.

2. To maintain certification, a certified ~~intermediate~~ emergency medical technician , *advanced emergency medical technician or paramedic* must, ~~every~~ *within the* 12 months ~~+~~ *before expiration of his or her certificate*, complete at least one verification of his or her skills conducted by:

- (a) The medical director of the service ; ~~for fire fighting agency;~~ or
- (b) A qualified instructor approved by the ~~Health~~ Division.

3. In verifying the skills of an ~~intermediate~~ emergency medical technician, *advanced emergency medical technician or paramedic*, the medical director or qualified instructor shall determine whether the ~~intermediate~~ emergency medical technician , *advanced emergency medical technician or paramedic* retains his or her skills in:

- (a) Each technique for which certification has been issued ~~+~~ and *any applicable local protocols; and*
- (b) The administration of approved medications,

↪ and enter that determination on a form provided by the ~~Health~~ Division.

4. To renew his or her certificate, an ~~intermediate~~ emergency medical technician , *advanced emergency medical technician or paramedic* must:

- (a) Meet the requirements for renewal of the certificate as an emergency medical technician ~~+~~ , *advanced emergency medical technician or paramedic, as appropriate;*
- (b) *Successfully complete a course in continuing training which is equivalent to the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a refresher course for emergency medical technicians, advanced emergency medical technicians or paramedics, as appropriate, is approved by the Division and has a requirement of attendance of not less than:*

(1) Thirty hours for the renewal of certification as an emergency medical technician or advanced emergency medical technician; or

(2) Forty hours for the renewal of certification as a paramedic;

(c) Submit a statement indicating compliance with the provisions of NRS 450B.183;

(d) Maintain a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the Division;

(e) If renewing a certificate as a paramedic, maintain:

(1) A certificate to provide Advanced Cardiovascular Life Support issued by the American Heart Association or an equivalent certificate approved by the Division;

(2) A certificate to provide Pediatric Advanced Life Support issued by the American Heart Association or an equivalent certificate approved by the Division; and

(3) A certificate to provide international trauma life support or an equivalent certificate approved by the Division;

(f) Before the certificate expires, submit an application evidencing that he or she has met the requirements of this section; and

~~(e)~~ *(g) Pay the appropriate fee prescribed in NAC 450B.700.*

Sec. 36. NAC 450B.440 is hereby amended to read as follows:

450B.440 A program of training in the State of Nevada for ~~advanced emergency medical technicians~~ *paramedics* must be at least equivalent to the national standard ~~course~~ *prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard* for ~~emergency medical technicians-paramedic~~ *paramedics*. The program must be supervised by a physician but may be coordinated by a registered nurse *with an endorsement as an instructor* or ~~an advanced emergency medical~~

~~technician~~ *paramedic* with an endorsement as an instructor. The faculty must be composed of appropriate professional, academic and technical instructors. The program must be approved by the ~~Health~~ Division and be:

1. Licensed by the Commission on Postsecondary Education to conduct a program of training in emergency medical services; or
2. Conducted by a community college or a university, accredited by the Department of Education, in conjunction with a hospital licensed by the ~~Health~~ Division.

Sec. 37. NAC 450B.447 is hereby amended to read as follows:

450B.447 1. An *emergency medical technician*, advanced emergency medical technician *or paramedic* who is licensed may, in addition to ~~the~~ *his or her other* authorized activities : ~~of an intermediate emergency medical technician;~~

(a) During training received in a clinical *facility* setting, ~~administer medications and perform any other authorized activity under the direct supervision of~~ *in an ambulance or on the scene of an emergency, perform skills within the scope of an advanced emergency medical technician or paramedic under the direction of a physician or a registered nurse supervised by a physician, preceptor or member of the clinical staff when approved by* a physician or a registered nurse supervised by a physician.

(b) ~~Perform cardiopulmonary resuscitation and defibrillation using a manual defibrillator.~~
~~(c) Monitor and treat cardiac arrhythmias.~~
~~(d)~~ Under the direct supervision of a physician or a registered nurse supervised by a physician, or under such prescribed conditions as are set forth by the medical director pursuant to written protocols of the service , ~~for fire-fighting agency,~~ perform such procedures and administer such medications as are approved by the board and recommended by the medical

director of the service ~~{or fire fighting agency}~~ in accordance with written protocols approved by the ~~{Health}~~ Division . ~~{, which may include, but are not limited to:~~

- ~~— (1) Administering intravenous solutions other than blood or blood products.~~
- ~~— (2) Performing gastric suction.~~
- ~~— (3) Performing needle cricothyroidotomy.~~
- ~~— (4) Performing a needle aspiration of the chest.~~
- ~~— (5) Drawing blood specimens for medical analysis.~~
- ~~— (6) Administering additional medications for acute and chronic conditions.]~~

2. Any ~~{oral}~~ **verbal** order from a physician or registered nurse acting on the authority of a physician to the **emergency medical technician**, advanced emergency medical technician **or paramedic** to perform one of the procedures must originate from an emergency room department of a hospital or any other site designated by the ~~{Health}~~ Division and must be ~~{recorded on magnetic tape or digital disc.}~~ **provided to the Department of Transportation for the purpose of recording and maintaining the verbal order within a database maintained by the Department.**

3. Each tape or digital recording of a physician's ~~{oral}~~ **verbal** orders to an **emergency medical technician**, advanced emergency medical technician **or paramedic** concerning the procedures must be retained by the hospital or the facility issuing the medical directions, or the regional dispatch center, for at least 90 days after the recording is made.

4. The **emergency medical technician**, advanced emergency medical technician **or paramedic** shall enter the physician's ~~{oral}~~ **verbal** order on the report of emergency care. The entry must be countersigned by the physician receiving the patient unless the **emergency medical technician**, advanced emergency medical technician **or paramedic** performed the procedure pursuant to a written order of the physician or a written protocol of the hospital.

Sec. 38. NAC 450B.450 is hereby amended to read as follows:

450B.450 1. Any hospital ~~{,}~~ *or* service ~~{or fire fighting agency}~~ which meets the minimum requirements established by the board in NAC 450B.461 to 450B.481, inclusive, may use licensed attendants who are ~~{advanced emergency medical technicians}~~ *paramedics* to provide emergency care to the sick and injured:

(a) At the scene of an emergency and during transport to a hospital;

(b) During transfer of a patient from a hospital to another medical facility or other location;

and

(c) While in an emergency department of a hospital until responsibility for care is assumed by the regular staff of the hospital.

2. Any service ~~{or fire fighting agency}~~ using ~~{advanced emergency medical technicians}~~ *paramedics* must provide the supplies and equipment ~~{listed in}~~ *pursuant to* a written ~~{inventory}~~ *protocol* prepared for that purpose . ~~{by the Health Division and approved by the board.}~~

3. When an ambulance providing advanced emergency care is in operation, it must be staffed by:

(a) Two licensed attendants who are advanced emergency medical technicians;

(b) One licensed attendant who is an advanced emergency medical technician and one licensed attendant who is a certified emergency medical technician;

(c) ~~{A}~~ *An emergency medical services* registered nurse and a licensed attendant who is ~~{a}~~ certified *as an* emergency medical technician ~~{,}~~ *advanced emergency medical technician* or *paramedic*;

(d) Two licensed attendants, one of whom is ~~{an advanced emergency medical technician and one of whom is an intermediate emergency medical technician.}~~ *a paramedic; or*

(e) A registered nurse and two licensed attendants, if each of the attendants is certified as an emergency medical technician, advanced emergency medical technician or paramedic.

4. When an air ambulance ~~{providing advanced emergency care}~~ is in operation, it must be staffed by at least one ~~{physician or}~~ *emergency medical services* registered nurse.

~~{5. When an agency vehicle providing advanced emergency care is in operation to provide care at the scene of an emergency, it must be staffed by at least one licensed attendant who is an advanced emergency medical technician.}~~ *When an air ambulance is in operation to provide care at the scene of an emergency, it must be staffed by at least one emergency medical services registered nurse and one paramedic.*

Sec. 39. NAC 450B.455 is hereby amended to read as follows:

450B.455 ~~{The}~~ *An* attendant ~~{who is an advanced emergency medical technician or a registered nurse}~~ shall ~~{note on the ambulance's report of emergency}~~ *document all* care ~~{:~~
~~—1. Any procedure initiated under a written standing order; and~~
~~—2. The reason for any lack of voice communication by radio.}~~ *provided at each level of contact with a patient and submit this documentation in a manner prescribed by the Division.*

Sec. 40. NAC 450B.456 is hereby amended to read as follows:

450B.456 1. To be certified as an emergency medical dispatcher, an applicant must:

- (a) Be 18 years of age or older; and
- (b) Successfully complete *training pursuant to* a national standard ~~{course}~~ for emergency medical dispatchers or an equivalent ~~{curriculum}~~ *standard* approved by the ~~{Health}~~ Division.

2. The applicant shall submit proof to the ~~Health~~ Division, signed by the person responsible for ~~conducting~~ the training, that the applicant has successfully completed the course or curriculum specified in paragraph (b) of subsection 1.

Sec. 41. NAC 450B.457 is hereby amended to read as follows:

450B.457 1. The ~~Health~~ Division may issue a certificate as an emergency medical dispatcher to an applicant who is trained in another state if:

(a) The applicant:

- (1) Is a resident of Nevada;
- (2) Will be a resident of Nevada within 6 months after applying for a certificate; or
- (3) Is a resident of ~~an~~ *another* state ~~that is contiguous to Nevada~~ and is employed by an agency that is responsible for emergency medical dispatch ~~with~~ *within* the State of Nevada;

(b) The applicant:

- (1) Successfully completes a course of training that is approved by the ~~Health~~ Division and is at least equivalent to the national standard ~~course~~ for emergency medical dispatchers; and

(2) Holds a certificate as an emergency medical dispatcher that is issued by an authorized agency in the other state.

(c) The applicant's certification or registration in the other state has not been revoked, terminated or suspended pursuant to any disciplinary proceeding.

(d) The ~~Health~~ Division receives verification of the applicant's certificate as an emergency medical dispatcher from the issuing agency of the other state on a form provided by the ~~Health~~ Division.

(e) The applicant submits the appropriate form and the fee prescribed in NAC 450B.700.

2. The ~~Health~~ Division may require the applicant to pass an evaluation or examination of his or her competency administered by the ~~Health~~ Division.

Sec. 42. NAC 450B.458 is hereby amended to read as follows:

450B.458 1. A certificate as an emergency medical dispatcher expires on the date of expiration appearing on the certificate and, after the initial period, expires biennially. The ~~Health~~ Division shall designate the date of expiration of each certificate.

2. Such a certificate may be renewed if:

(a) The ~~Health~~ Division determines that the holder of the certificate has, before the date of expiration, successfully completed:

(1) A course of continuing training that is at least equivalent to the national standard *prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard as a* refresher course for emergency medical dispatchers and is approved by the ~~Health~~ Division; or

(2) Any other program of continuing education that is approved by the ~~Health~~ Division. Such a program must not be approved unless the requirement for attendance for that program for an emergency medical dispatcher is at least 8 hours.

(b) The holder submits, within the 3 months immediately preceding the date the certificate expires, an application indicating compliance with the requirements set forth in paragraph (a).

Sec. 43. NAC 450B.461 is hereby amended to read as follows:

450B.461 1. No ~~advanced emergency medical technician~~ *paramedic* may administer any controlled substance as defined in *the preliminary* chapter ~~453~~ of NRS to a patient while serving as an attendant in a service ~~for fire-fighting agency~~ unless the controlled substance is

named on the inventory of medication issued by the medical director of the service ~~{or fire-fighting agency}~~ and:

(a) An order is given to the ~~{advanced emergency medical technician}~~ *paramedic* by a physician or a registered nurse supervised by a physician; or

(b) The ~~{advanced emergency medical technician}~~ *paramedic* is authorized to administer the controlled substance pursuant to a written protocol that is approved by the ~~{Health}~~ *medical director of the service and on file with the* Division.

2. No ~~{intermediate}~~ *advanced* emergency medical technician or ~~{advanced emergency medical technician}~~ *paramedic* may administer any dangerous drug while serving as an attendant in a service ~~{or fire-fighting agency}~~ unless the dangerous drug is named on the inventory of medication issued by the medical director of the service ~~{or fire-fighting agency}~~ and:

(a) An order is given to the ~~{intermediate}~~ *advanced* emergency medical technician or ~~{advanced emergency medical technician}~~ *paramedic* by a physician or a registered nurse supervised by a physician; or

(b) The ~~{intermediate}~~ *advanced* emergency medical technician or ~~{advanced emergency medical technician}~~ *paramedic* is authorized to administer the drug pursuant to a written protocol that is approved by the ~~{Health}~~ Division.

3. ~~{A basic}~~ *An* emergency medical technician shall not administer or assist in administering any dangerous drug.

4. As used in this section, “dangerous drug” has the meaning ascribed to it in NRS 454.201.

Sec. 44. NAC 450B.465 is hereby amended to read as follows:

450B.465 1. Each dangerous drug and controlled substance used by a service ~~{or fire-fighting agency}~~ must be stored:

(a) In its original container, and each original container must bear a securely attached label which is legibly marked; and

(b) Under appropriately controlled climatic conditions.

2. In addition to the requirements set forth in subsection 1, each controlled substance must be:

(a) Stored in a locked cabinet in the ambulance, air ambulance or agency's vehicle; or

(b) Under the direct physical control of ~~{an advanced emergency medical technician}~~ *a paramedic* or a registered nurse.

3. When a controlled substance is not being used, it must be secured, together with the record for that controlled substance, in a manner approved by the medical director of the service .
~~{or fire fighting agency.}~~

Sec. 45. NAC 450B.471 is hereby amended to read as follows:

450B.471 1. Each time ~~{an advanced emergency medical technician}~~ *a paramedic* or registered nurse administers a controlled substance or an ~~{intermediate emergency medical technician,}~~ advanced emergency medical technician , *paramedic* or registered nurse administers a dangerous drug, an entry must be made on the report of emergency care. The entry must contain:

(a) The name of the medication administered;

(b) The dose of the medication administered;

(c) The route of administration;

(d) The date and time of administration;

(e) The name of the physician ordering the medication ~~{;}~~ *if the medication is ordered outside of a standing protocol;*

(f) The signature , *electronic signature* or initials of the person who administered the medication and the emergency medical services number of that person; *and*

(g) If a registered nurse administered the medication, the emergency medical services number or license number of that nurse . ~~}; and~~

~~—(h) The signature of the receiving physician or, if operating pursuant to written standing orders, the name of the medical director of the service or fire fighting agency.}~~

2. If the entire amount of a unit dose of a controlled substance is not used when it is administered to a patient, the unused portion of that unit dose must be discarded. The discarding of the unused portion of the unit dose must be:

(a) Verified by a witness ~~};~~ who *is a licensed attendant of the service or an employee of the hospital to which the patient was transported and who* shall sign *or electronically sign* a statement indicating the unused portion was discarded; and

(b) Noted in the record for controlled substances.

3. If any error is made in administering a medication or the patient has an unusual reaction to a medication, the ~~{intermediate emergency medical technician,}~~ advanced emergency medical technician , *paramedic* or registered nurse who administered the medication shall immediately report the error or reaction to the receiving physician, and when applicable, to the physician who ordered the medication. The error or adverse reaction must be entered on the report of emergency care.

Sec. 46. NAC 450B.475 is hereby amended to read as follows:

450B.475 1. Controlled substances used by a service ~~{or fire fighting agency}~~ must be supplied as follows:

(a) The medical director of the service ~~{or fire fighting agency}~~ shall designate one or more commercial or hospital pharmacies for the issuance and resupply of controlled substances.

(b) The initial issue of controlled substances must be made by a prescription signed by the medical director.

(c) The resupply of controlled substances must be made by a prescription signed by the ordering physician, receiving physician or medical director.

(d) If a container of a controlled substance becomes damaged or contaminated ~~+~~
~~—(1) The~~, *the* medical director shall verify the damage or contamination and sign a prescription for the replacement of the controlled substance . ~~+~~ ~~and~~

~~—(2) The damaged or contaminated container must be presented to the appropriate designated pharmacy for destruction.~~

~~—(e) If a container of a controlled substance becomes outdated it must be returned to the appropriate designated pharmacy for replacement.~~

2. The handling and use of any controlled substance or dangerous drug by an emergency medical service must comply with the provisions of chapters 453 and 454 of NRS.

3. Each controlled substance and dangerous drug must be maintained in unit dose containers unless directed otherwise by the medical director of the service . ~~{or fire fighting agency}~~

4. Each service which is issued a permit by the Division must have a procedure for controlled substances and dangerous drugs to address any discrepancies in compliance with the regulations of the State Board of Pharmacy.

Sec. 47. NAC 450B.481 is hereby amended to read as follows:

450B.481 1. A record of usage must accompany the controlled substances used by a service . ~~{or fire fighting agency}~~

2. Each time a controlled substance is administered to a patient, an entry must be made in the record. The entry must include the:

- (a) Date and time the medication was administered;
- (b) ~~{Name}~~ *Incident number, patient number or name* of the patient to whom the medication was administered;
- (c) Dose of medication administered;
- (d) Amount of medication wasted, if any;
- (e) Name of the ordering physician ~~{}~~ *if the medication was ordered outside of a standing protocol*; and
- (f) Signature of the ~~{advanced-emergency-medical-technician}~~ *paramedic* or registered nurse who administered the medication.

3. Each time the responsibility for the controlled substances changes from one crew to another, an entry must be made in the record. The entry must include the date and time of the transfer, the current inventory upon transfer and the initials of each ~~{advanced-emergency-medical-technician}~~ *paramedic* or registered nurse of the receiving crew.

4. When the controlled substances are removed from service and stored, an entry must be made in the record indicating the date, time and current inventory at the time of transfer. The entry must also include the initials of each ~~{advanced-emergency-medical-technician}~~ *paramedic* or registered nurse verifying the level of inventory of the controlled substances. When the controlled substances are returned to service, the initials of each ~~{advanced-emergency-medical-technician}~~ *paramedic* or registered nurse on the receiving crew and the name of another ~~{advanced-emergency-medical-technician}~~ *paramedic* or registered nurse must be entered in the record to verify the level of inventory of the controlled substances.

5. Each service ~~{or fire-fighting agency}~~ shall conduct an inventory of all controlled substances monthly. The inventory must be verified by an entry in the record of controlled substances. The medical director of the service ~~{or fire-fighting agency}~~ or a person designated by the medical director who is authorized to possess a controlled substance shall verify the monthly inventory at least once every year and make an entry in the record of controlled substances verifying the inventory or noting any discrepancy.

6. ~~{If any discrepancy is noted, the affected}~~ *The medical director of a service shall oversee the removal of a* controlled substance ~~{must be removed}~~ from service ~~{until the discrepancy is resolved.}~~ *when a replacement for the controlled substance is added to the list of controlled substances approved for use by standing protocol.*

Sec. 48. NAC 450B.493 is hereby amended to read as follows:

450B.493 1. To receive an endorsement to administer immunizations, dispense medications and prepare and respond to certain public health needs, an applicant must:

(a) Provide verification of current certification as an ~~{intermediate}~~ *advanced* emergency medical technician or ~~{advanced emergency medical technician}~~ *paramedic* which is issued pursuant to this chapter and chapter 450B of NRS;

(b) Provide proof of the successful completion of a training program for ~~{the influenza}~~ *a* vaccine approved by the ~~{Health}~~ Division; and

(c) Demonstrate ~~{, under the direct supervision of a person who is licensed as a physician or physician assistant pursuant to chapter 630 of NRS or as an advanced practitioner of nursing pursuant to chapter 632 of NRS, the administration of an injection of normal saline to a patient or volunteer.}~~ *the ability to administer a vaccination as part of the process for verifying the skills*

of the advanced emergency medical technician or paramedic for renewal of his or her certificate pursuant to NAC 450B.380.

2. An applicant is not required to pay a fee to receive an endorsement pursuant to this section.

Sec. 49. NAC 450B.496 is hereby amended to read as follows:

450B.496 1. A person who receives an endorsement pursuant to NAC 450B.493 may participate in:

(a) A public vaccination clinic or training exercise sponsored by a local public health authority if:

(1) A list of the emergency medical technicians with an endorsement who are participating in the clinic or training exercise is approved by the ~~Health~~ Division *or a validation of the endorsement of each emergency medical technician is received by the local public health authority* before the clinic or training exercise begins; and

(2) The person who holds the endorsement is under the direct supervision of the local health officer, or his or her designee, of the jurisdiction in which the immunization is administered.

(b) A public vaccination clinic in response to any emergency if:

(1) A list of the *advanced* emergency medical technicians *or paramedics* with an endorsement who are participating in the clinic is provided to the ~~Health~~ Division within 48 hours after the event begins; and

(2) The person who holds the endorsement is under the direct supervision of the local health officer, or his or her designee, of the jurisdiction in which the immunization is administered.

2. As used in this section, “emergency” has the meaning ascribed to it in NRS 450B.1975.

Sec. 50. NAC 450B.497 is hereby amended to read as follows:

450B.497 1. An endorsement issued pursuant to NAC 450B.493 expires on the date of expiration of the person’s certificate as an ~~intermediate emergency medical technician or~~ advanced emergency medical technician *or paramedic* or on the date the certificate is suspended or revoked.

2. To renew such an endorsement, the person who holds the endorsement must, before the endorsement expires:

(a) Submit an application and meet the requirements to renew his or her certificate as an ~~intermediate emergency medical technician or~~ advanced emergency medical technician *or paramedic* pursuant to NAC 450B.380 ; ~~for 450B.420, as applicable;~~

(b) Demonstrate ~~under the direct supervision of a person who is licensed as a physician or physician assistant pursuant to chapter 630 of NRS or as an advanced practitioner of nursing pursuant to chapter 632 of NRS, the administration of an injection of normal saline to a patient or volunteer, or demonstrate, under the direct supervision of the local health officer or his or her designee, the administration of an injection of actual influenza vaccine;~~ *the ability to administer a vaccination as part of the process for verifying the skills of the advanced emergency medical technician or paramedic for renewal of his or her certificate pursuant to NAC 450B.380;* and

(c) Submit an application to renew his or her endorsement to administer immunizations evidencing that he or she has met the requirements of this section.

3. The ~~Health~~ Division shall not renew an endorsement to administer immunizations unless the ~~Health~~ Division also renews the applicant’s certificate as an ~~intermediate emergency medical technician or~~ advanced emergency medical technician ~~or~~ *or paramedic*.

4. An applicant is not required to pay a fee to renew an endorsement pursuant to this section.

Sec. 51. NAC 450B.505 is hereby amended to read as follows:

450B.505 1. Each service ~~{or fire-fighting agency}~~ providing emergency care must:

(a) Apply for and receive a permit from the ~~{Health}~~ Division; and

(b) Have a medical director who is responsible for developing, carrying out and evaluating standards for the provision of emergency care by the service. ~~{or fire-fighting agency.}~~

2. The medical director of a service ~~{or fire-fighting agency}~~ shall:

(a) Establish medical standards which:

(1) Are consistent with ~~{standards}~~ *the national standard which is prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation as a national standard for the level of service for which a permit is issued to the service or an equivalent standard approved by the Administrator of the Division and which are approved by the board;*

(2) Are equal to or more restrictive than the ~~{standards of}~~ *national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation or an equivalent standard approved by the Administrator of the Division and adopted by* the state emergency medical system; and

(3) Must be ~~{approved}~~ *reviewed and maintained on file* by the ~~{Health}~~ Division or a physician active in providing emergency care who is designated by the ~~{Health}~~ Division to review and make recommendations to the ~~{Health}~~ Division.

(b) Direct the emergency care provided by any licensed attendant who is actively employed by ~~{or a volunteer with}~~ the service. ~~{or fire-fighting agency.}~~

3. The appointment of a medical director must be approved by the ~~{Health}~~ Division or a physician with experience in emergency care who is designated by the ~~{Health}~~ Division to approve those appointments. The medical director must:

- (a) Be a physician;
- (b) Have experience in and current knowledge of the emergency care of patients who are acutely ill or injured;
- (c) Have knowledge of and access to local plans for responding to emergencies;
- (d) Be familiar with the operations of a base hospital, including communication with, and direction of, personnel who provide emergency care;
- (e) Be actively involved in the training of personnel who provide emergency care;
- (f) Be actively involved in the audit, review and critique of emergency care provided by personnel;
- (g) Have knowledge of administrative and legislative processes affecting local, regional and state systems that provide emergency medical services;
- (h) Have knowledge of laws and regulations affecting local, regional and state systems that provide emergency medical services; and
- (i) Have knowledge of procedures and treatment for ~~{advanced-cardiac}~~ *adult, pediatric* and trauma ~~{life support.}~~ *resuscitation.*

4. *The medical director of a service which is licensed by another state who meets the requirements of that state to serve as a medical director shall be deemed to satisfy the requirements of subsection 3 if he or she submits proof to the Division that he or she has satisfied the requirements of that state.*

5. A medical director of a service ~~{or fire fighting agency}~~ may:

(a) In consultation with appropriate specialists and consistent with the ~~{protocols of regional and statewide systems;}~~ *national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation or an equivalent standard approved by the Administrator of the Division*, establish medical protocols and policies for the service ; ~~{or fire-fighting agency;}~~

(b) Recommend to the ~~{Health}~~ Division the revocation of licensure of personnel who provide emergency care;

(c) Approve educational requirements *that meet the requirements of the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation or an equivalent standard approved by the Administrator of the Division* and proficiency levels for instructors and personnel of the service ; ~~{or fire-fighting agency;}~~

(d) Approve educational programs within the service that are consistent with ~~{accepted local, regional and state medical practice;}~~ *the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation or an equivalent standard approved by the Administrator of the Division;*

(e) Suspend ~~{an emergency medical technician}~~ *a licensed attendant* within that service ~~{or fire-fighting agency}~~ pending review and evaluation by the ~~{Health}~~ Division;

(f) Establish medical standards for dispatch procedures to ensure that the appropriate response units are dispatched to the scene of a medical emergency ~~{when requested;}~~ *and appropriate emergency medical dispatch care is provided before the arrival of the dispatched response units;*

(g) Establish criteria and procedures to be used when a patient refuses transportation;

(h) Establish medical criteria for the level of care and type of transportation to be used for emergency care;

(i) *Establish medical criteria for the level of care provided for a situation in which a person on the scene is treated and released;*

(j) Establish standing orders and procedures and the criteria under which the providers of emergency care may operate before initiating contact with a physician at a base station; and

~~{6.}~~ (k) Conduct an audit to ensure the quality of the medical system of the service ~~for fire-fighting agency~~ in conjunction with the activities of the designated base hospital or health facility.

~~{5.}~~ 6. The medical director of the service ~~for fire-fighting agency~~ may delegate his or her duties to any other qualified physician. *If the medical director of the service wishes to delegate his or her duties pursuant to this subsection, he or she shall provide written notification to the Division before delegating his or her duties.*

~~{6.}~~ 7. If a medical director of a service ~~for fire-fighting agency~~ wishes to resign, he or she:

(a) Shall provide written notification of such intentions to the ~~{Health}~~ Division and the service ~~for fire-fighting agency~~ not less than 30 days before the effective date of the resignation; and

(b) May provide recommendations for an interim replacement.

~~{7.}~~ 8. If the medical director of a service ~~for fire-fighting agency~~ is unable to carry out his or her responsibilities, he or she shall designate an alternate physician to assume the duties of the medical director.

Sec. 52. NAC 450B.510 is hereby amended to read as follows:

450B.510 1. Within 30 days after receipt of an application to operate a service , ~~{or a fire-fighting agency, including a voluntary service or agency,}~~ the ~~{Health}~~ Division shall:

(a) Have an investigation made of the applicant, his or her proposed service ~~{or agency}~~ and the information contained in the application; and

(b) Upon completion of the investigation, issue a permit authorizing him or her to operate the service ~~{or agency}~~ or a written rejection of the application on any ground set forth in NAC 450B.520, setting forth the reasons for the rejections and notifying the applicant of the right to appeal pursuant to NAC 439.300 to 439.395, inclusive.

2. An applicant for a permit to operate a service ~~{or a fire fighting agency}~~ must submit the following information:

(a) The name and address of the owner of each unit ~~{or vehicle}~~ to be used in providing the service.

(b) A description of each ~~{vehicle}~~ *unit* to be used in providing the service, including the manufacturer, model, year, serial number, color and identifying marks of those ~~{vehicles.}~~ *units*.

(c) The base location of each unit . ~~{or vehicle.}~~

(d) A list of the names of attendants staffing each ~~{vehicle.}~~ *unit*.

(e) A schedule of the proposed fees to be charged patients for:

(1) Response and transportation;

(2) Administering medication, oxygen or other such treatment;

(3) Using an electrocardiograph monitor or defibrillator; and

(4) Any other supplies, equipment and procedures provided by the service . ~~{or fire-fighting agency.}~~

(f) Except as otherwise provided in paragraph (h), the name, address and one set of fingerprints of the person designated by the applicant to manage the operations of the service ~~for fire-fighting agency~~ providing emergency care.

(g) The name, address and one set of fingerprints of the applicant.

(h) In the case of a service, if the applicant is a corporation, partnership or sole proprietor engaged in the business to provide ambulance services of any type:

(1) The names and addresses of all the corporate directors and officers or the partners or the sole proprietor and the managing agents and all their businesses. Each person so listed is, for the purposes of this section, an applicant.

(2) A statement of the applicant's financial worth.

(i) If the application is for a permit to operate a volunteer service, proof of the applicant's volunteer status verified by the local board of county commissioners.

(j) ~~In the case of a fire-fighting agency, if the applicant does not operate a service, a list of services which will take control of a patient at the scene of a medical emergency and provide transportation for the patient.~~ *The level of service to be provided under the permit. An applicant may apply to provide a level of service of basic, intermediate or advanced emergency care.*

3. The ~~Health~~ Division shall not issue an original permit to operate a service ~~for a fire-fighting agency~~ unless:

(a) All the information required by subsection 2 is contained in the application;

(b) The ~~Health~~ Division is satisfied that all of the applicant's attendants who will operate or serve any ~~vehicle~~ *unit* or aircraft pursuant to the permit are licensed or in the process of being licensed in the appropriate category; and

(c) The service ~~for fire-fighting agency~~ has appointed a medical director as required by NAC 450B.505.

4. The same requirements, limitations, terms and conditions applicable to the issuance of an initial permit apply to the renewal of a permit.

Sec. 53. NAC 450B.515 is hereby amended to read as follows:

450B.515 The fee for an initial application for a permit, in the amount set forth in NAC 450B.700, *or the number of a purchase order issued by a governmental entity in the amount of the fee*, must accompany the application when submitted to the ~~Health~~ Division. The fee for a renewal of a permit, in the amount set forth in NAC 450B.700, *or the number of a purchase order issued by a governmental entity in the amount of the fee*, must accompany any application for a renewal of a permit. These fees are not refundable.

Sec. 54. NAC 450B.520 is hereby amended to read as follows:

450B.520 The ~~Health~~ Division may disapprove an application for a permit or an application for the renewal of a permit to operate a service ~~for fire-fighting agency~~ for one or more of the following reasons, regardless of the category of the proposed service or agency or its level of emergency care:

1. The applicant for a permit to operate an ambulance, air ambulance or agency's vehicle had previously held a business license or any other permit or license to operate such a service and that permit or license was revoked.

2. The applicant for a permit to operate an ambulance, air ambulance or agency's vehicle has a criminal record which might reasonably indicate that there is reasonable cause to believe that the applicant might not operate the service ~~for fire-fighting agency~~ in a manner that would

promote the health and general welfare of persons within this state who may need to use the service.

3. The applicant for a permit to operate an ambulance, air ambulance or agency's vehicle does not have the equipment, licensed attendants or medical director required by this chapter.

4. The applicant for a permit to operate an air ambulance does not meet the Federal Aviation ~~[Rules]~~ *Administration rules* for certification under ~~[CFR]~~ *14 C.F.R.* Part 91 or *14 C.F.R.* Part 135, or both, as published in the Federal Register, January 1, 1985.

Sec. 55. NAC 450B.526 is hereby amended to read as follows:

450B.526 The ~~[Health]~~ Division shall prescribe forms for an operator's use in applying for ~~[an endorsement]~~ *a permit* to operate a service ~~[or fire-fighting agency]~~ at the level of *service of basic*, intermediate or advanced emergency care. The following information must be included in the application:

1. The name and address of the applicant's service . ~~[or fire-fighting agency]~~
2. The name and signature of the medical director of the service . ~~[or fire-fighting agency]~~
3. A copy of the written agreement between the service ~~[or fire-fighting agency]~~ and a hospital, signed by an authorized representative of the hospital, pursuant to which the hospital agrees to:

(a) Provide 24-hour communication between a physician and a provider of emergency care for the service ; ~~[or fire-fighting agency;]~~ and

(b) Require each physician who provides medical instructions to the provider of emergency care to know:

(1) The procedures and protocols for treatment established by the medical director of the service ; ~~[or fire-fighting agency;]~~

(2) The emergency care required for treating an acutely ill or injured patient;

(3) The ability of the providers of emergency care to provide that care; and

(4) The policies of any local or regional emergency medical service for providing emergency care and the protocols for referring a patient with trauma, as defined in NAC 450B.798, to the hospital.

4. A copy of the protocols of the service ~~{or fire-fighting agency}~~ for each level of emergency care provided by the service ~~{or fire-fighting agency}~~ that are approved by the medical director of the service ~~{or fire-fighting agency}~~ and the ~~{Health}~~ Division.

5. A list of equipment and supplies, including specific medications and intravenous fluids, proposed for use.

6. A description of the systems to be used for:

(a) Keeping records; and

(b) An audit of the performance of the service ~~{or fire-fighting agency}~~ by the medical director.

7. A copy of the requirements of the service ~~{or fire-fighting agency}~~ for testing each level of licensure, including the requirements for knowledge of the protocols of the service ~~{or fire-fighting agency}~~ for verification of the skills of each attendant for the specified level of licensure, if those requirements are different from the requirements of the ~~{Health}~~ Division for testing the attendant.

Sec. 56. NAC 450B.529 is hereby amended to read as follows:

450B.529 After receiving an application for ~~{an endorsement}~~ *a permit* to operate a service ~~{or fire-fighting agency}~~ at the level of *service of basic*, intermediate or advanced *emergency*

care, or ~~both,~~ *any combination thereof*, the ~~Health~~ Division shall, within 30 days after the receipt:

1. Have an investigation made of the applicant's proposed operations and the information contained in the application; and
2. Upon completion of the investigation, issue ~~an endorsement~~ *a permit* authorizing the requested level of operations or a written rejection of the application on any ground prescribed in this chapter, setting forth the reasons for the rejection and notifying the applicant of the right to appeal pursuant to NAC 439.300 to 439.395, inclusive.

Sec. 57. NAC 450B.532 is hereby amended to read as follows:

450B.532 ~~1.—The operator of a service or fire fighting agency must apply for a renewal of his or her endorsement in conjunction with the application for renewal of his or her permit.~~

~~—2.~~ The ~~Health~~ Division may require a review of the applicant's operations or a submission of updated information as a condition of renewal of the ~~endorsement.~~ *permit to operate at a level of service of basic, intermediate or advanced emergency care, or any combination thereof.*

Sec. 58. NAC 450B.550 is hereby amended to read as follows:

450B.550 1. Each ambulance placed in service after August 1, 1991, must contain at least 300 cubic feet (8.5 cubic meters) of space and meet the following requirements:

- (a) Have at least 60 inches (152 centimeters) of headroom above the level of the primary gurney.
- (b) Provide a combined total of at least 35 cubic feet (1 cubic meter) of enclosed cabinets for storage, compartments and shelves conveniently located for medical supplies and equipment and installed systems as applicable for the level of service intended.

(c) Provide 40 candlepower of interior lighting at the patient's level in the patient's compartment. The lighting must be located so that no glare is directed to the driver's compartment or line of vision while the vehicle is in motion. The lighting must be shielded with a shatterproof covering which does not reduce the illumination.

(d) Have a bulkhead partition separating the patient's compartment and the driver's compartment, with a sliding transparent panel in the bulkhead or a system of intercommunication for the driver and attendant.

(e) Provide an adequate seat, equipped with a backrest and a safety belt secured to the floor or bulkhead at the head of the space for the gurney, from which position the attendant may observe the patient and the instruments which indicate the patient's condition during transport.

(f) Contain a squad bench at least 22 inches (56 centimeters) wide and 72 inches (183 centimeters) long, with a padded top which is covered in material impervious to moisture, is easily sanitized and may be hinged at the sidewall for access to storage.

(g) Have the squad bench equipped with at least three safety belts for use when transporting patients who are ambulatory or able to sit up.

(h) Provide a clear walkway of not less than 18 inches (46 centimeters) between the gurney and the squad bench and at least 25 inches (64 centimeters) of kneeling space along the side of the primary gurney to allow the attendant to administer care to a patient.

(i) Provide a system of heating and air-conditioning in both the driver's and patient's compartments which is adequate to maintain comfortable levels of temperature and clean air inside these compartments.

(j) Have shatterproof glass wherever glass is used in the interior of the patient's compartment.

(k) Be designed so that the interior of the patient's compartment is free of any exposed sharp edges or projections. All the interior finish of the patient's compartment must be of material that is impervious to soap and water, disinfectant and mildew, and the finish must be fire resistant.

(l) Have at least one wheeled gurney or stretcher with three or more straps with which to secure the patient. The head of the gurney must be equipped with restraints for the upper torso that are placed over the shoulders of the patient.

(m) Have gurney fasteners which are secured to the floor or sidewall of the patient's compartment. They must be capable of quick release, adjustable and stable.

(n) Have all the medical equipment and supplies in the patient's compartment placed in closed storage or otherwise secured.

(o) Have a source of power adequate to operate simultaneously all systems for heating, air-conditioning, radio communications, interior lighting and devices for audible or visual warnings while the vehicle is in motion.

(p) Have built-in suction apparatus for use in maintaining the patient's airway.

(q) Have built-in equipment for supplying and administering oxygen with a minimum of 122 cubic feet (3.5 cubic meters) of storage area for oxygen.

2. The equipment for extrication and the rescue litters must be stored in a secure manner in the patient's compartment or in the outer walls of the vehicle.

3. Automotive equipment, such as spare tires and tire chains, may be:

(a) Placed in the patient's compartment if the equipment is in an area of closed storage which is easily accessible without removal of the patient; or

(b) Stored in the outer wall if the equipment is protected from the weather and is easily accessible.

4. An ambulance must have space for storing medical supplies and equipment applicable to the level of service ~~{of endorsement.}~~ *authorized by the permit of the service that operates the ambulance.*

5. In lieu of having the design and equipment required by subsections 1, 2 and 3, an ambulance may be configured to meet the standards established by the United States Department of Transportation in its specifications designated Docket ~~{KKK-A-1822-D dated November 1, 1994.}~~ *KKK-A-1822F dated August 1, 2007*, which are hereby adopted by reference. A copy of those specifications may be obtained free of charge from General Services Administration, Federal Supply Service Bureau, Specifications Section, Suite 8100, 470 East L'Enfant Plaza, S.W., Washington D.C. 20407.

6. Any ambulance which was in service on or before August 1, 1991, is not subject to the requirements set forth in subsections 1, 2 and 3.

Sec. 59. NAC 450B.560 is hereby amended to read as follows:

450B.560 Each ambulance, *air ambulance* or agency's vehicle must, during any period in which the ambulance, *air ambulance* or agency's vehicle is used to provide emergency medical care, carry the equipment and supplies specified for the ambulance, *air ambulance* or agency's vehicle set forth in a written inventory that is ~~{prepared by}~~ *filed with* the ~~{Health}~~ Division ~~{and approved by the board.}~~ *by the service and included in the written protocols used by the service.*

Sec. 60. NAC 450B.562 is hereby amended to read as follows:

450B.562 To be operated as an air ambulance ~~{~~
~~—1.—An}~~, *an* aircraft, whether a fixed- or rotary-wing type, must comply with all Federal Aviation ~~{Rules}~~ *Administration rules* as they pertain to maintenance inspections, flight and

duty time, contained in 14 ~~CFR~~ *C.F.R.* Part 135, entitled “Operating Requirements: Commuter and On Demand Operations and Rules Governing Persons On Board Such Aircraft.”

~~{2. An aircraft of a fixed-wing type must be certified by the manufacturer of the aircraft for night and all-weather instrument flight, including flight during known icing conditions.}~~

Sec. 61. NAC 450B.566 is hereby amended to read as follows:

450B.566 1. An air ambulance service using helicopters shall make available training in the proper marking and securing of a safe area for landing to emergency medical personnel ~~{or}~~, *fire agency personnel and* law enforcement personnel used at the landing site.

2. A landing site used for the transport of a patient by an air ambulance service using a helicopter must have:

- (a) Ground clearance appropriate to the specifications and requirements of the aircraft; and
- (b) Sufficient lighting to define the landing site.

Sec. 62. NAC 450B.568 is hereby amended to read as follows:

450B.568 A patient must not be transferred by air ambulance *from one hospital to another* unless such transfer has been determined necessary by a physician, *physician assistant or nurse practitioner under direct supervision of a physician* at the medical facility requesting the transfer of the patient ~~{}~~ *and the transfer has been confirmed and accepted by the medical facility receiving the transfer of the patient.*

Sec. 63. NAC 450B.570 is hereby amended to read as follows:

450B.570 1. To be used as an air ambulance, an aircraft, whether a fixed- or rotary-wing type, must ~~{}~~ *meet the requirements set forth in 14 C.F.R. Part 135, including by means of receiving a current endorsement by a nationally accredited air ambulance organization, including, without limitation, the Commission on the Accreditation of Medical Transport*

Systems, meet an equivalent national standard set forth by the Federal Aviation

Administration or, in addition to meeting other *applicable* requirements set forth in this chapter:

- (a) Be designed and maintained in a safe and sanitary condition;
- (b) Have sufficient space for storage of *medical* equipment and *medical* supplies which may be locked against unauthorized entry;
- (c) Be designed to accommodate at least one stretcher;
- (d) Have a door of sufficient size to allow a stretcher to be loaded without rotating it more than 30 degrees about the longitudinal axis or 30 degrees about the lateral axis; and
- (e) Have the climate controlled in the cabin of the aircraft to prevent extremes in temperature that would adversely affect the care of a patient.

2. The stretcher or litter must:

(a) Be positioned in the aircraft so as to allow the attendant a clear view of and access to any part of the patient's body that may require attention. The attendant must always have access to the patient's head and upper body.

(b) Be of sufficient size to carry full length and in the supine position a person whose height is at least equal to the 95th percentile of all adult patients in the United States.

(c) Have a rigid surface suitable for performing cardiac compressions.

(d) Be constructed of material that may be cleaned and disinfected after each use.

(e) Have a mattress or pad that is impervious to liquids.

(f) Be capable of elevating the head of the patient to a 45-degree angle from the base.

3. Each air ambulance must, when in use as such:

(a) Have an electrical system capable of servicing the power needs of all *medical* equipment for patient care carried on board the aircraft. The electricity may be supplied by the electrical

system of the aircraft or by a portable source carried in the aircraft. Any modification to the electrical system on the aircraft must be approved by the Federal Aviation Administration.

(b) Have adequate interior lighting, so that patient care can be given and patient status monitored without interfering with the vision of the pilot.

(c) Have adequate tie-down fixtures within the aircraft for securing any additional equipment as necessary.

(d) Have a system for air-to-ground communications that provides for the exchange of information internally among the crew and provides for air-to-ground exchange of information between members of the crew and agencies appropriate to the mission, including, but not limited to:

(1) The physician or registered nurse who is providing instructions of medical care.

(2) ~~The air traffic control center.~~

~~(3)~~ The dispatch center.

~~(4)~~ (3) If the air ambulance is used to transport patients ~~from the scene of an~~ *emergency*, a law enforcement agency.

(e) Be equipped with ~~the~~

~~(1) Survival~~ *survival* equipment appropriate for mountain, desert and water environments

~~the~~

~~(2) A fire extinguisher that is accessible to the pilot and any medical personnel in the air ambulance.~~ *for the continuation of patient care.*

4. A fixed-wing aircraft must not be operated as an air ambulance unless it is capable of pressurizing the cabin. ~~and has:~~

~~(a) Two or more engines; or~~

~~—(b) A single turbine engine.—~~

5. The installation of any *medical* equipment in a fixed- or rotary-wing aircraft must be in a manner consistent with any applicable requirements of the Federal Aviation Administration and must receive the approval of the Federal Aviation Administration.

6. Any fixed- or rotary-wing aircraft that is used as an air ambulance must carry the *medical* equipment and *medical* supplies specified for that aircraft set forth in a written inventory that is ~~prepared by the Health Division and approved by the board.~~ *filed with the Division by the service and included in the written protocols used by the service.*

Sec. 64. NAC 450B.574 is hereby amended to read as follows:

450B.574 A ~~vehicle~~ *unit* used by a service ~~or fire-fighting agency~~ *in any configuration* to provide emergency care at the scene of an emergency ~~+~~ *without transporting a patient*, when in operation as such, must have at least one attendant licensed at the level for ~~intermediate or advanced emergency medical care.~~ *which the service holds a permit.*

Sec. 65. NAC 450B.575 is hereby amended to read as follows:

450B.575 ~~+~~ An ambulance, *air ambulance or any other unit* that is used to *transport a patient and* provide ~~basic~~ *any level of* emergency care must be:

~~(a)~~ *1.* Equipped with a two-way voice radio capable of operating on the state radio system for emergency medical services, except that an ~~agency's vehicle~~ *air ambulance service's unit* may be equipped with a cellular telephone which is capable of providing communication to the hospital; and

~~(b)~~ *2.* Staffed by licensed attendants ~~+~~

~~—2.— An ambulance or agency's vehicle that is used to provide intermediate emergency care must be:~~

~~—(a) Equipped with a two-way voice radio which is capable of operating on the state radio system for emergency medical services, except that an agency's vehicle may be equipped with a cellular telephone which is capable of providing communication to the hospital; and~~

~~—(b) Staffed by licensed attendants, at least one of whom is licensed as an intermediate emergency medical technician.~~

~~—3. An ambulance or agency's vehicle that is used to provide advanced emergency care must have the following equipment and staff:~~

~~—(a) A two-way voice radio which is capable of operating on the state radio system for emergency medical services, except that an agency's vehicle may be equipped with a cellular telephone which is capable of providing communication to the hospital; and~~

~~—(b) Licensed attendants, at least one of whom is licensed as an advanced emergency medical technician or a registered nurse who is qualified to provide advanced emergency care under the regulations of the State Board of Nursing.] *pursuant to NAC 450B.450.*~~

Sec. 66. NAC 450B.578 is hereby amended to read as follows:

450B.578 An ambulance, air ambulance or agency's vehicle which is to be used to provide basic, intermediate or advanced emergency care must be equipped for 24-hour communication by radio with a hospital, and the hospital must agree to:

1. Have its emergency department supervised 24 hours a day by a physician or registered nurse supervised by a physician. The physician must be available in the hospital or be able to be present in the hospital within 30 minutes.

2. Record on magnetic tape or digital disc all transmissions between the hospital and the ambulance or agency's vehicle regarding care of patients, and retain the tapes or discs for at least

90 days, if the tapes or discs are not retained at a regional dispatch center ~~{}~~ *or recorded and stored with the Department of Transportation as part of the Nevada Shared Radio System.*

3. Make available to the medical director of the service ~~{or fire-fighting agency}~~ or the ~~{Health}~~ Division the tapes or discs concerning patients for the purposes of auditing performance and investigating any alleged violation of this chapter by an ambulance ~~{}~~ *or* air ambulance service ~~{or fire-fighting agency}~~ or one of its attendants or registered nurses ~~{}~~ *if requested within 90 days after an event.*

4. Provide the emergency medical technicians, ~~{intermediate emergency medical technicians,}~~ advanced emergency medical technicians, *paramedics* and registered nurses with an opportunity for regular participation in continuing education.

5. ~~{Supervise the supply of medications, intravenous fluids and other medical supplies to be used in the ambulance, air ambulance or agency's vehicle.~~

~~—6.}~~ Include the report of emergency care in the medical record of the hospital for each patient.

Sec. 67. NAC 450B.580 is hereby amended to read as follows:

450B.580 1. Each ambulance ~~{, air ambulance}~~ or agency's vehicle must be maintained in safe operating condition, including all of its engine, body and other operating parts and equipment. The ~~{Health}~~ Division shall periodically, at least every 12 months, require the holder of a permit to certify that the holder has had each ambulance, air ambulance or agency's vehicle under his or her control inspected by a professional mechanic who has found it to be in safe operating condition. In the case of an air ambulance, maintenance must be in accordance with Federal Aviation ~~{Rules}~~ *Administration rules, 14 C.F.R.* Parts 43, 91 and 135, as applicable, which are hereby adopted by reference and are available without charge from the United States

Department of Transportation, ~~400 Seventh Street, S.W.,~~ *1200 New Jersey Avenue, S.E.*, Washington, D.C. 20590. The holder shall mail a copy of the certificate to the ~~Health~~ Division with each application for the renewal of a permit or upon request of the ~~Health~~ Division.

2. Each ambulance, air ambulance or agency's vehicle must be equipped with equipment that provides two-way radio communications which provides an attendant with communication 24 hours a day for dispatch and medical information. At least one radio must operate on the ~~ultra high frequencies~~ *any frequency* allocated by the Federal Communications Commission for transmission of medical communications and *, if not using the Nevada Shared Radio System,* must contain all of the features incorporated in the state radio system for emergency medical services.

3. The name of the service ~~, including a volunteer service,~~ or its operator must be printed on both sides of an ambulance or on a sign placed in the window of an air ambulance.

4. No ambulance, air ambulance or agency's vehicle may be operated while an attendant, pilot or air attendant serving on the vehicle or craft is under the influence of any alcoholic beverage or any drug or prescribed medication that impairs the ability to carry out his or her responsibilities.

5. No ambulance, ~~or~~ air ambulance *or agency's vehicle* may be operated unless all interior portions of the patient's compartment are cleaned and sanitized after each use.

6. No ambulance, air ambulance or agency's vehicle may be used to respond to any call if it contains any soiled, dirty or otherwise contaminated bandages, dressings, bedding, materials or equipment.

7. The operator of a service ~~for fire-fighting agency~~ *providing ground response* shall maintain at least one ambulance ~~, air ambulance~~ or agency's vehicle in a fully operational

condition 24 hours per day, 7 days per week. If the operator of a service ~~{or fire-fighting agency}~~ is unable to provide such service because of an inoperative ambulance or agency's vehicle, the operator shall notify the ~~{Health}~~ Division of that fact ~~{within}~~ *at the earliest possible time, but not later than* 48 hours ~~{}~~ *after the unit becomes inoperative.*

Sec. 68. NAC 450B.600 is hereby amended to read as follows:

450B.600 1. An aircraft used by a service ~~{operating}~~ *which has received a permit issued by the Division to operate a service using* an air ambulance ~~{, including a volunteer service, must be endorsed by the Health Division,}~~ must be equipped to provide advanced life support and must be operated by a pilot certified by the Federal Aviation Administration.

2. An air ambulance used to transport a patient must be staffed with ~~{a}~~ *an emergency medical services* registered nurse or a physician and have the capability of being staffed with two air attendants.

3. Except as otherwise provided in this subsection, an air ambulance used to transfer a patient must be staffed with at least one air attendant and must have the capability of being staffed with two air attendants. An air ambulance used to transfer a patient must be staffed with at least two air attendants, one of which is ~~{a}~~ *an emergency medical services* registered nurse or a physician, if it is determined by the physician requesting the transfer that the presence of two air attendants is in the best interest of the care of the patient.

4. An air attendant or *emergency medical services* registered nurse staffing an air ambulance must be examined biennially by a licensed physician and found to be free from physical defects or disease which might impair the ability to attend a patient in an air ambulance. The operator of the air ambulance shall maintain documentation of such examinations.

Sec. 69. NAC 450B.611 is hereby amended to read as follows:

450B.611 1. Each service ~~{and fire-fighting agency}~~ shall identify at least one base station providing 24-hour voice communication between a physician and personnel who provide emergency care. The station or stations must be identified in the application for a permit for the service ~~{or fire-fighting agency}~~ submitted to the ~~{Health}~~ Division.

2. The medical director of a service ~~{or fire-fighting agency}~~ shall identify local protocols which define the circumstances under which verbal medical directions must be given by a physician to personnel who provide emergency care.

3. Except as otherwise provided by local protocol, a receiving hospital must be notified before the arrival of each patient transported by the service . ~~{or fire-fighting agency}~~

4. The medical director of the service ~~{or fire-fighting agency}~~ may establish requirements for the training of the physician at the base station to assure that the physician is knowledgeable of the protocols and procedures established by the medical director.

5. A base station with an agreement to provide 24-hour communication between a physician and a provider of emergency care shall require that the physician providing medical directions is knowledgeable of:

(a) The procedures for treatment established by the medical director of the service ; ~~{or fire-fighting agency}~~

(b) The communication system establishing contact between personnel who provide emergency care and the base station;

(c) The emergency care of acutely ill or injured patients;

(d) The capabilities of the providers of emergency care; and

(e) The policies of local and regional emergency medical services and protocols for referring patients with trauma.

6. A physician at a base station providing medical directions to a provider of emergency care may participate in medical audits of that care in conjunction with the medical director regarding the proper use of protocols and procedures.

Sec. 70. NAC 450B.620 is hereby amended to read as follows:

450B.620 1. Each holder of a permit to operate a service ~~for fire fighting agency, including a volunteer service or agency,~~ shall file with the ~~Health~~ Division a list of all ambulances, air ambulances or agency's vehicles operated pursuant to the permit. The list must contain the same information as is required to be submitted with an application for a permit.

2. The operator shall file an amended list of his or her ambulances or agency's vehicles with the ~~Health~~ Division before any such ~~vehicle~~ unit or aircraft is placed in or removed from the service.

3. The operator of such a service ~~for agency~~ shall maintain a record of each patient on the report of emergency care in a format approved by the ~~Health~~ Division. In addition to the information required in NAC 450B.766, the record must include, without limitation, the ~~following information:~~

~~—(a) The time an ambulance or vehicle was dispatched.~~

~~—(b) The date and time when and place where the patient was provided care or transportation by the crew of the ambulance or agency's vehicle.~~

~~—(c) The time of departure with the patient.~~

~~—(d) The time of arrival at the destination.~~

~~—(e) An identification of the destination.~~

~~—(f) A description of the care given by the attendant.~~ *information required by the National Emergency Medical Services Information System and any other information required by the Division.*

4. The completed report of emergency care must contain accurate information and be delivered to the receiving facility within 24 hours after the patient's arrival.

5. Each service shall submit the information required by subsection 3 and NAC 450B.766 to the ~~{Health}~~ Division ~~{on forms or}~~ in a format approved by the ~~{Health}~~ Division. The information submitted may be used for compiling statistics.

Sec. 71. NAC 450B.640 is hereby amended to read as follows:

450B.640 1. The ~~{Health}~~ Division shall inspect or have inspected every ambulance, air ambulance *configured to be used for providing medical services* or agency's vehicle to be used in a service ~~{or fire-fighting agency, including a volunteer service or agency.}~~ after the issuance of a permit but before it is placed in service, and shall determine whether or not it complies with the requirements of this chapter.

2. After a permit is issued for the operation of an ambulance or air ambulance service, ~~{or fire-fighting agency.}~~ the ~~{Health}~~ Division shall, at least once a year, inspect or ~~{have}~~ *cause to be* inspected every ~~{ground or}~~ *ambulance*, air ambulance or agency's vehicle operated in the service. ~~{or by the agency.}~~ After each inspection pursuant to NRS 450B.220 and this section, the inspector shall prepare a written report describing any violation of any provisions of this chapter with respect to the ~~{vehiele}~~ *unit* or aircraft inspected and shall schedule a date for reinspection after correction of the violation within 4 weeks after the violation was noted.

3. The inspector shall give a copy of the report to the holder of the permit for the service ~~{or fire-fighting agency}~~ inspected.

Sec. 72. NAC 450B.650 is hereby amended to read as follows:

450B.650 **1.** Nothing contained in this chapter prohibits the ~~Health~~ Division from periodically examining or investigating any person issued a permit, license or certificate.

2. *The Division may charge and collect a fee from any service or person against whom a complaint alleging a violation of this chapter or chapter 450B of NRS is submitted to the Division by a service or person to recover the costs of investigating the complaint after the investigation is completed if the complaint is substantiated. The fee will be based upon the hourly rate established for each investigator of the Division, as determined by the budget of the Division, and travel expenses.*

3. *As used in this section, “substantiated” means supported or established by evidence or proof.*

Sec. 73. NAC 450B.655 is hereby amended to read as follows:

450B.655 A person exhibits unprofessional conduct if he or she fails, while functioning in the capacity of a person who is licensed or certified pursuant to this chapter, to maintain that standard of performance, to exercise that degree of skill, care, diligence and expertise or to manifest that professional demeanor and attitude which is ordinarily exercised and possessed by licensees in Nevada. Unprofessional conduct includes, without limitation:

1. The use of obscene, abusive or threatening language ~~H~~, *gestures or actions*;
2. Berating or belittling or making critical remarks or statements regarding competing services or other licensees and professionals participating in the system for emergency medical care;
3. The use of unreasonable force which unnecessarily increases or inflicts pain upon a patient;

4. A callous disregard for personal feelings or sensibilities of patients, their friends, families or other persons present while care is being rendered;
5. Habitual intemperance; and
6. Addiction to the use of any controlled substance as defined in *the preliminary* chapter ~~{453}~~ of NRS.

Sec. 74. NAC 450B.660 is hereby amended to read as follows:

450B.660 1. Whenever the ~~{Health}~~ Division determines that any ambulance, air ambulance ~~{}~~ *configured to be used for providing medical services*, agency's vehicle or its equipment which is faulty, malfunctioning or otherwise in violation of this chapter constitutes an immediate, serious hazard or a detriment to any person who may use the services provided by it, the ~~{Health}~~ Division shall immediately inform the operator of the service ~~{or fire-fighting agency, including a volunteer service or agency,}~~ of the condition. The ~~{Health}~~ Division may immediately issue an order temporarily suspending the equipment ~~{}~~ *or* service ~~{or fire-fighting agency}~~ from operation pending the institution of appropriate proceedings to revoke the permit for the service ~~{or fire-fighting agency}~~ or the license or certificate of an attendant, or may suspend the permit, license or certificate pending the correction of the condition if the operator of the service ~~{or fire-fighting agency}~~ agrees to make the correction within a reasonable period.

2. Any type of permit ~~{or endorsement}~~ issued to operate a service ~~{or fire-fighting agency, including a volunteer service or agency,}~~ may be revoked or suspended if, after an inspection by a representative of the ~~{Health}~~ Division, the holder of the permit does not correct the violation within a reasonable period after receiving an order by the ~~{Health}~~ Division to do so. As used in this subsection, "reasonable" means a period necessary to take immediate action with due regard for the public interest and for the ordering of necessary supplies or parts.

3. The ~~{Health}~~ Division *or the medical director of a service* may immediately suspend ~~{from service or duty}~~ any attendant ~~{, volunteer, pilot}~~ or air attendant of a service ~~{or, in the case of a fire-fighting agency, including a volunteer service or agency, suspend an attendant}~~ from medical duty who the ~~{Health}~~ Division *or medical director* determines has violated any of the provisions of this chapter, has been found to have exhibited unprofessional conduct or who constitutes an immediate risk to persons needing his or her services. Upon such a suspension, the person may request a hearing pursuant to the requirements set forth in NAC 439.300 to 439.395, inclusive.

4. The ~~{Health}~~ Division may suspend or revoke the holder's license, certificate ~~{}~~ *or* permit ~~{or endorsement}~~ if the holder continues to fail to comply with any applicable provisions of this chapter or any other applicable laws or ordinances after a warning by the ~~{Health}~~ Division. Upon such a suspension or revocation, the holder may request a hearing pursuant to the requirements set forth in NAC 439.300 to 439.395, inclusive.

Sec. 75. NAC 450B.680 is hereby amended to read as follows:

450B.680 Whenever any permit, endorsement, certificate or license issued pursuant to this chapter is suspended, revoked or otherwise terminated, the ~~{Health}~~ Division shall immediately notify the appropriate licensing authorities of the action taken and shall request that they immediately institute proceedings to revoke any business license or other license issued to the person operating the service ~~{or fire-fighting agency}~~ or acting in the capacity of a driver, attendant ~~{, volunteer}~~ or air attendant if the permit or license was issued on the condition that the approval of the ~~{Health}~~ Division was necessary.

Sec. 76. NAC 450B.690 is hereby amended to read as follows:

450B.690 1. Any person whose permit ~~for endorsement~~ to operate a service ~~for fire-fighting agency, including a volunteer service or agency,~~ or whose certification or license to act as an attendant ~~for volunteer attendant~~ has been suspended or revoked or otherwise terminated in accordance with the provisions of this chapter may apply to the ~~Health~~ Division for a reinspection or reexamination for the purpose of reinstating the permit, ~~endorsement,~~ certificate or license. The application must be submitted within 180 days after a final decision is issued by the ~~Health~~ Division relating to the suspension, revocation or termination of the permit, ~~endorsement,~~ certificate or license, or not later than the scheduled date of expiration of the permit, ~~endorsement,~~ certificate or license, whichever is earlier.

2. The ~~Health~~ Division shall conduct a complete inspection or *coordinate a written examination approved by the Division in accordance with the national standard prepared by the National Highway Traffic Safety Administration of the United States Department of Transportation* within 10 working days after receipt of a written application for such a reinstatement. After the inspection or *receipt of the results of the* examination, the ~~Health~~ Division shall:

- (a) Reinstatement or reissue the permit, ~~endorsement,~~ certificate or license; or
- (b) Notify the person, in the manner described in NAC 450B.710, that the permit, ~~endorsement,~~ certificate or license may not be reinstated or reissued because of the person's failure to comply with specified sections of this chapter.

Sec. 77. NAC 450B.695 is hereby amended to read as follows:

450B.695 A person whose certificate was revoked, terminated or suspended pursuant to disciplinary action at the time the certificate expired may not apply for a renewal of the certificate . ~~pursuant to NAC 450B.425.~~

Sec. 78. NAC 450B.700 is hereby amended to read as follows:

450B.700 The ~~Health~~ Division shall charge and collect the following fees:

1. For licenses:

(a) For issuing a new license to an attendant *or for issuing a new license by reciprocity based on a current National Registry of Emergency Medical Technicians certification to an attendant* \$10.00

(b) For renewing the license of an attendant 5.00

2. For issuing a new certificate or renewing a certificate as an emergency medical dispatcher, *emergency medical responder*, emergency medical technician, ~~intermediate emergency medical technician or~~ advanced emergency medical technician *or paramedic or for adding an endorsement other than an endorsement described in NAC 450B.493 and 450B.497* \$10.00

3. To apply:

(a) For ~~an advanced emergency medical technician~~ *a paramedic* by *state* reciprocity \$50.00

(b) For an ~~intermediate~~ *advanced* emergency medical technician by *state* reciprocity 40.00

(c) For an emergency medical dispatcher, *emergency medical responder* or emergency medical technician by *state* reciprocity 30.00

(d) For late renewal of a certificate 10.00

4. For issuing a new permit to operate a service ~~for fire fighting agency~~ for an operator who will provide emergency care *or provide medical support at special events* \$200.00

5. For renewing a permit:

(a) For ~~an operator providing emergency care~~ *a service* \$30.00
plus \$5.00
per ~~vehicle~~
unit

(b) For making a late renewal, an additional 25.00

6. For replacing or duplicating documents or furnishing copies of records:

(a) Permit \$2.00

(b) License 3.00

(c) Certificate or identification card 5.00

(d) Copies of personnel records or any other material:

(1) For ~~less than 100~~ *electronic* copies No charge

(2) For ~~100 copies or more~~ *printed copies* ~~0.02~~ *0.10*
per copy

Sec. 79. NAC 450B.710 is hereby amended to read as follows:

450B.710 If any application for:

1. A permit to operate a service ~~for fire-fighting agency, including a volunteer service or agency;~~ *at any level of service; or*

2. ~~An endorsement authorizing emergency care at the level of intermediate or advanced emergency care; or~~

~~3.~~ A license as an attendant of such a service, ~~for fire-fighting agency;~~

↪ is rejected by the ~~Health~~ Division for the applicant's failure to comply with the requirements of this chapter, the applicant must be notified of the action, the reasons for the rejection and the applicant's right of appeal pursuant to NAC 439.300 to 439.395, inclusive.

Sec. 80. NAC 450B.715 is hereby amended to read as follows:

450B.715 1. Except as otherwise provided in this section, the ~~Health~~ Division shall not renew the certificate of a person who holds a certificate issued in Nevada as ~~a first~~ *an emergency medical dispatcher, an emergency medical responder, an emergency medical technician, ~~an intermediate emergency medical technician,~~ an advanced emergency medical technician, a paramedic* or an instructor in emergency medical services if the person is no longer a resident of this state ~~and is no longer employed by a service that has received a permit from the Division.~~

2. The ~~Health~~ Division may issue one renewal to such a person if he or she needs a renewed certificate to obtain reciprocal certification in the new state of residence. The person must meet the other requirements for renewal, including the requirement that a certificate must be renewed on or before the date on which it expires.

3. To renew the certificate of such a person, the ~~Health~~ Division may give him or her credit for training which he or she has received in the new state if:

(a) The training is approved by the agency which regulates emergency medical services in the new state;

(b) The person submits documentary evidence of having received the training; and

(c) The person makes a written request of the ~~Health~~ Division to accept the training before the final date for renewing the certificate.

4. This section does not apply to the renewal of certificates of persons certified pursuant to the provisions of NAC 450B.363 . ~~450B.378 or 450B.410.~~

Sec. 81. NAC 450B.720 is hereby amended to read as follows:

450B.720 1. The ~~Health~~ Division shall, within the limits of its appropriated money, conduct or contract with other persons to conduct the programs of training necessary to bring each service , ~~and fire-fighting agency,~~ including a volunteer service , ~~or agency,~~ and each attendant into compliance with the requirements of this chapter for training.

2. Any person proposing to conduct a program within this state for training for certification issued under this chapter must apply to the ~~Health~~ Division for approval at least 20 working days before the program is to begin. The ~~Health~~ Division shall not issue a certificate of completion of the program to any trainee unless the ~~Health~~ Division has approved the program. The person conducting the program shall not start the program until approval by the ~~Health~~ Division has been granted.

3. The Division shall not issue retroactive approval for a program which has been conducted without its approval.

4. Curriculum and procedures for testing submitted as part of a request for approval of a program must not be changed after approval has been granted for the program except upon prior written approval from the ~~Health~~ Division. The proposed change or modification, with an alternative acceptable to the ~~Health~~ Division, must be submitted in writing to the ~~Health~~ Division not less than 15 working days before the effective date of the use of the changed or modified curriculum or test.

5. Conferences, online courses and continuing education that are approved by the Continuing Education Coordinating Board for Emergency Medical Services are deemed to

qualify for use to satisfy the requirements of this chapter relating to training for the renewal of a license or certificate if the conference, online course or continuing education is appropriate to the license or certificate.

Sec. 82. NAC 450B.723 is hereby amended to read as follows:

450B.723 1. To receive an endorsement as an instructor in emergency medical services, an applicant must:

(a) Provide proof of the successful completion of a course or courses in training equivalent to the national standard ~~{course;}~~ *prepared by the National Association of Emergency Medical Service Educators as a national standard for instructors or an equivalent standard approved by the Administrator of the Division;* and

(b) Provide verification of current certification as ~~{a-first}~~ *an emergency medical dispatcher, emergency medical responder, emergency medical technician, ~~{intermediate-emergency-medical-technician-or}~~ advanced emergency medical technician or paramedic* issued by the ~~{Health}~~ Division.

2. A person certified as an instructor in emergency medical services may teach a program of training in emergency medical services less than or equal to the level of the instructor's emergency medical certification ~~{issued by the Health Division.}~~ *but may not teach outside of the scope of the level of instruction indicated by the national standard prepared by the National Association of Emergency Medical Service Educators as a national standard for instructors or an equivalent standard approved by the Administrator of the Division.*

Sec. 83. NAC 450B.725 is hereby amended to read as follows:

450B.725 1. An endorsement to be an instructor in emergency medical services expires on the date of expiration appearing on the certificate for ~~{a-first}~~ *an emergency medical dispatcher,*

emergency medical responder, emergency medical technician, ~~intermediate emergency medical technician or~~ advanced emergency medical technician ~~or~~ *paramedic*.

2. The endorsement is renewable if the holder of the endorsement verifies participation as an instructor in ~~6~~ *10* hours of emergency medical training within the 2 years immediately preceding the expiration date of the endorsement.

Sec. 84. NAC 450B.730 is hereby amended to read as follows:

450B.730 If the holder of a permit to operate a service ~~or fire fighting agency~~ or any licensee in the service ~~or agency~~ is involved in any ~~crash~~ *traffic accident* or *incident reportable to the Federal Aviation Administration as a* hard landing with an air ambulance or ~~any traffic accident with one of the ambulances or, in the case of an~~ agency's vehicle, ~~involved in a traffic accident while in service on a medical call,~~ he or she shall report the full details of the ~~crash,~~ *traffic accident or* hard landing ~~or accident~~ within 5 days after it occurs. The report must be submitted to the ~~Health~~ Division by certified mail, postmarked within 5 days after the ~~crash,~~ *traffic accident or* hard landing , ~~or accident,~~ or by personal delivery of a written report. *The report must be provided to the Division immediately if the traffic accident or hard landing involves an injury or death.*

Sec. 85. NAC 450B.766 is hereby amended to read as follows:

450B.766 1. A licensee providing emergency medical care at the scene of an injury shall submit to:

(a) The ~~Health~~ Division, information concerning patients with traumas who are not transported to a receiving hospital or a center for the treatment of trauma; and

(b) The receiving hospital or center for the treatment of trauma, information concerning a patient with trauma upon the delivery of that patient to the receiving hospital or center for the treatment of trauma.

2. The information required by subsection 1 must be submitted in a format approved by the ~~Health~~ Division.

3. Information concerning treatment received before admission to a hospital must include ~~at least the following:~~

~~—(a) The date and estimated time of the injury.~~

~~—(b) The date and time the call for emergency medical care was received.~~

~~—(c) The time the person providing emergency medical care arrived at the scene of the injury.~~

~~—(d) The time of physical access to the injury by the licensee providing emergency medical care.~~

~~—(e) The location of the scene of the injury, including the city or county and the state, in a format prescribed by the Health Division.~~

~~—(f) The cause of the injury.~~

~~—(g) Any safety restraints or protective equipment used.~~

~~—(h) The permit number and name of the ambulance service that transported the patient to a receiving hospital or a center for the treatment of trauma.~~

~~—(i) The patient's:~~

~~—(1) Age.~~

~~—(2) Gender.~~

~~—(3) Residential code assigned pursuant to the Federal Information Processing Standards, or the city or county and the state of his or her residence.~~

- ~~— (4) Vital signs, including his or her:~~
- ~~— (I) Blood pressure;~~
- ~~— (II) Pulse rate; and~~
- ~~— (III) Respiratory rate.~~
- ~~— (j) Other clinical signs which are appropriate to determine the patient's revised trauma score or as may be requested by the Health Division.~~
- ~~— (k) The receiving hospital or medical facility of initial destination.~~
- ~~— (l) The criteria used in performing triage.~~
- ~~— (m) The emergency medical procedures performed or initiated.~~
- ~~— (n) The patient's revised trauma score at the scene of the injury.~~
- ~~— (o) The time of departure from the scene of the injury.~~
- ~~— (p) The time of arrival at a center for the treatment of trauma or another receiving facility.]~~

all information required by the National Emergency Medical Services Information System, the Nevada State Emergency Medical Services Information System, the National Trauma Data Standard established by the American College of Surgeons, the Nevada Public Health Preparedness Program minimum data set and any other information required by the Division or the State Board of Health.

4. As used in this section, “patient with trauma” has the meaning ascribed to it in NAC 450B.798.

Sec. 86. NAC 450B.768 is hereby amended to read as follows:

450B.768 1. Each hospital shall submit to the **[Health]** Division quarterly reports which comply with the criteria prescribed by the **[Health]** Division and which contain at least the ~~[following information for each patient treated for trauma by the hospital:~~

- ~~—(a) The date and time the patient arrived in the emergency department or the receiving area or operating room, or both.~~
- ~~—(b) The patient's revised trauma score upon arrival in the emergency department or receiving area and upon discharge or transfer from the emergency department, if the patient is discharged or transferred less than 1 hour after the time of arrival.~~
- ~~—(c) The method of arrival at the hospital. If the patient arrived by ambulance or air ambulance, the information required by subsection 3 of NAC 450B.766 must also be submitted.~~
- ~~—(d) The time the surgeon or the trauma team was requested.~~
- ~~—(e) The time the surgeon arrived at the requested location.~~
- ~~—(f) The patient's vital signs, including his or her:
 - ~~—(1) Blood pressure;~~
 - ~~—(2) Pulse rate;~~
 - ~~—(3) Respiratory rate; and~~
 - ~~—(4) Temperature.~~~~
- ~~—(g) The results of diagnostic blood alcohol or drug screening tests, or both, if obtained.~~
- ~~—(h) Other clinical signs which are appropriate to determine the patient's revised trauma score, including the patient's score on the Glasgow Coma Scale and, if appropriate for a pediatric patient, the patient's score on the modified Glasgow Coma Scale.~~
- ~~—(i) The date and time the initial surgery began and the surgical procedures that were performed during the period in which the patient was anesthetized and in an operating room.~~
- ~~—(j) The number of days the patient was in the hospital.~~
- ~~—(k) The number of days the patient was in the intensive care unit, if applicable.~~
- ~~—(l) Any complications which developed while the patient was being treated at the hospital.~~

- ~~—(m) Information concerning the patient’s discharge from the hospital, including:~~
- ~~——(1) The diagnosis of the patient.~~
 - ~~——(2) The patient’s source of payment.~~
 - ~~——(3) The severity of the injury as determined by the patient’s injury severity score.~~
 - ~~——(4) The condition of the patient.~~
 - ~~——(5) The disposition of the patient.~~
 - ~~——(6) Information concerning the transfer of the patient, if applicable.~~
 - ~~——(7) If the reporting hospital is a center for the treatment of trauma or a pediatric center for the treatment of trauma, the amount charged by the hospital, including charges for the treatment of trauma.~~
 - ~~——(8) If the hospital is not a center for the treatment of trauma or if the patient was transferred from a center for the treatment of trauma to another center for the treatment of trauma, pediatric center for the treatment of trauma or other specialized facility:~~
 - ~~——(I) The revised trauma score of the patient at the time the transfer was requested.~~
 - ~~——(II) The date and time the center for the treatment of trauma, pediatric center for the treatment of trauma or other specialized facility was notified.~~
 - ~~——(III) The time the patient left the receiving hospital or center for the treatment of trauma for a center for the treatment of trauma, pediatric center for the treatment of trauma or other specialized facility.~~
- ~~—(n) The patient’s residential code assigned pursuant to the Federal Information Processing Standards, or the city or county and the state of his or her residence.] ***information required by the National Trauma Data Standard established by the American College of Surgeons, the***~~

Nevada Public Health Preparedness Program minimum data set and any other information required by the Division or the State Board of Health.

2. The information must be submitted not later than 60 days after the end of each quarter in a form approved by the ~~{Health}~~ Division.

3. The quarterly reports must be submitted on or before:

(a) June 1 for the period beginning on January 1 and ending on March 31.

(b) September 1 for the period beginning on April 1 and ending on June 30.

(c) December 1 for the period beginning on July 1 and ending on September 30.

(d) March 1 for the period beginning on October 1 and ending on December 31.

4. The ~~{Health}~~ Division shall prepare an annual report not later than July 1 for the preceding calendar year summarizing the data submitted by hospitals on patients with traumas.

~~{5. As used in this section:~~

~~—(a) “Injury severity score” means a number given retrospectively for the quantification of injury to a patient based upon anatomical and physiological considerations as described in The Journal of Trauma, Volume 14, 1974, at pages 187 to 196, inclusive.~~

~~—(b) “Trauma team” means the group of persons who have been chosen by a designated center for the treatment of trauma or a pediatric center for the treatment of trauma to render care to patients with trauma and are led by a general surgeon credentialed in trauma care or, in the case of a pediatric center for the treatment of trauma, a pediatric surgeon credentialed in trauma care.]~~

Sec. 87. NAC 450B.770 is hereby amended to read as follows:

450B.770 **1.** A licensee providing emergency medical care to a patient at the scene of an injury shall use the ~~{following procedures}~~ *national standard set forth by the National Highway Traffic Safety Administration of the United States Department of Transportation, the*

American College of Surgeons or an equivalent standard approved by the Administrator of the Division to identify and care for patients with traumas . †:

~~—1.— Step 1: If the patient's:~~

~~—(a) Score on the Glasgow Coma Scale or, if the patient is a pediatric patient, his or her score on the modified Glasgow Coma Scale is not more than 13;~~

~~—(b) Systolic blood pressure is less than 90;~~

~~—(c) Respiratory rate is less than 10 or greater than 29; or~~

~~—(d) Revised trauma score is less than 11;~~

~~→ the patient must be transported to a center for the treatment of trauma. If the patient is not required to be transported, the licensee providing emergency medical care shall assess the patient's condition based upon the degree of injury to the anatomy and the mode of injury.~~

~~—2.— Step 2: If the patient:~~

~~—(a) Has a penetrating injury to the head, neck, torso or the extremities proximal to the elbow or knee;~~

~~—(b) Has at least two proximal long bone fractures;~~

~~—(c) Has a fracture of the pelvis;~~

~~—(d) Has a combination of trauma with burns;~~

~~—(e) Has a flail chest;~~

~~—(f) Has an amputation proximal to the wrist or ankle;~~

~~—(g) Has acute paralysis;~~

~~—(h) Has an open and depressed fracture of the skull; or~~

~~—(i) Has major burns;~~

~~→ the patient must be transported to a center for the treatment of trauma. If the patient is not required to be transported, the licensee providing emergency medical care shall evaluate the patient to determine the method of injury and the existence of any high-energy impact.~~

~~—3. Step 3: If the patient has experienced a high-impact blow to the body which may include:~~

~~—(a) A fall of at least 20 feet;~~

~~—(b) A motor vehicle accident in which:~~

~~——(1) The motor vehicle was traveling at a speed of at least 20 miles per hour immediately before the accident occurred;~~

~~——(2) There was at least 20 inches of severe damage to the body of the motor vehicle;~~

~~——(3) There was a 12-inch intrusion into the passenger's compartment;~~

~~——(4) The patient was ejected from the motor vehicle;~~

~~——(5) The period required to extricate the patient from the motor vehicle was more than 20 minutes;~~

~~——(6) The motor vehicle rolled over;~~

~~——(7) A person riding in the motor vehicle with the patient died as a result of the accident;~~

~~——(8) The patient was riding on a motorcycle that was traveling at a speed of at least 20 miles per hour when the accident occurred; or~~

~~——(9) The patient was thrown from a motorcycle driven by him or her;~~

~~—(c) As a pedestrian, being run over by a vehicle or thrown any distance by the impact of a vehicle, regardless of the rate of speed of the vehicle; or~~

~~—(d) Being struck as a pedestrian or bicyclist by a vehicle traveling at a speed of at least 6 miles per hour;~~

~~→ the patient must be transported to a center for the treatment of trauma.~~

~~—4.— Step 4: If the patient is less than 5 years of age or more than 55 years of age or is known to:~~

~~—(a) Have a cardiac or respiratory disease;~~

~~—(b) Have insulin dependent diabetes;~~

~~—(c) Have cirrhosis;~~

~~—(d) Be morbidly obese;~~

~~—(e) Be pregnant;~~

~~—(f) Have a suppressed immune system;~~

~~—(g) Have a bleeding disorder; or~~

~~—(h) Be taking any anticoagulant;~~

~~→ the licensee providing emergency medical care shall communicate with a physician at a center for the treatment of trauma or comply with any local protocol approved by the Health Division to determine the need to transport the patient to that center.~~

~~—5.†~~ **2.** If the licensee providing emergency medical care is not certain whether to transport the patient to a center for the treatment of trauma, the licensee shall transport the patient to a center pursuant to NAC 450B.772.

Sec. 88. NAC 450B.772 is hereby amended to read as follows:

450B.772 The person licensed to provide emergency medical care at the scene of an injury shall determine the time required to transport a patient to a designated center for the treatment of trauma and determine the destination based on the following criteria:

1. If the time required to transport a patient to a level I center for the treatment of trauma is not more than 30 minutes, the patient must be transported to that center and the medical directions for the treatment of the patient must originate at that center.

2. If the time required to transport a patient to a level I center for the treatment of trauma is more than 30 minutes, but the time required to transport the patient to a level II center for the treatment of trauma is not more than 30 minutes, the patient must be transported to the level II center for the treatment of trauma and the medical directions for the treatment of the patient must originate at that center.

3. If the time required to transport a patient to a level I or II center for the treatment of trauma is more than 30 minutes, but the time required to transport the patient to a level III center for the treatment of trauma is not more than 30 minutes, the patient must be transported to the level III center for the treatment of trauma and the medical directions for the treatment of the patient must originate at that center.

4. If the time required to transport a patient to a center for the treatment of trauma is more than 30 minutes, the patient must be transported to the nearest medical facility which can provide a higher level of emergency medical care than can be provided by personnel at the scene of the injury and the medical directions for the treatment of the patient must originate at that facility **H** *or from a protocol approved by the medical director of the service and filed with the Division which meets or exceeds the national standard for the treatment of trauma.*

Sec. 89. NAC 450B.774 is hereby amended to read as follows:

450B.774 1. If a patient at the scene of an injury refuses to be transported to a center for the treatment of trauma after a determination has been made that the patient's physical condition meets the triage criteria requiring transport to the center, the person providing emergency medical care shall evaluate the mental condition of the patient. If the person determines that the patient is competent, the patient must be advised of the risks of not receiving further treatment at the center.

2. If the patient continues to refuse to be transported to the center for the treatment of trauma, the person providing emergency medical care shall request the patient to sign a statement indicating that the patient has been advised of the risks of not receiving further treatment at the center and continues to refuse to be transported to the center.

3. The person providing emergency medical care shall inform a physician at the ~~center for the treatment of trauma~~ *location to which the person intends to transport the patient* of the patient's refusal to be transported ~~to the center for treatment~~ before the person leaves the scene of the injury.

4. As used in this section, "triage criteria" has the meaning ascribed to it in NAC 450B.814.

Sec. 90. NAC 450B.960 is hereby amended to read as follows:

450B.960 1. For a do-not-resuscitate identification, ~~or~~ do-not-resuscitate order *or a valid Physician Order for Life-Sustaining Treatment form if the form provides that the patient is not to receive life-sustaining treatment* to be honored by a person who administers emergency medical services, the identification, ~~or~~ order *or form* must:

(a) Be ~~in a~~ *an identification, order or form* approved or issued by a health authority of this state or be a do-not-resuscitate identification, ~~or~~ do-not-resuscitate order *or valid Physician Order for Life-Sustaining Treatment form if the form provides that the patient is not to receive life-sustaining treatment* issued pursuant to the laws of another state;

(b) Not bear any mark or other indication that the identification, ~~or~~ order *or form* has been modified or altered; and

(c) Be in plain sight or be presented to the person who administers emergency medical services by the patient or by another person present at the scene.

2. A person who administers emergency medical services shall, upon being presented with or upon discovering a do-not-resuscitate identification , ~~††~~ do-not-resuscitate order ~~††~~ *or valid Physician Order for Life-Sustaining Treatment form if the form provides that the patient is not to receive life-sustaining treatment*, make a reasonable effort to verify that the identification ~~††~~ , order *or form* belongs to the patient. If the person who administers emergency medical services determines that the identification , ~~††~~ order *or form* belongs to the patient, the person who administers emergency medical services shall:

- (a) Provide appropriate emergency medical or supportive care if the patient is not experiencing cardiac or respiratory arrest;
- (b) Withhold life-resuscitating treatment from a patient if the patient is experiencing cardiac or respiratory arrest; and
- (c) Closely observe the patient for any indication that the patient is attempting to remove or destroy the identification , ~~††~~ order ~~††~~ *or form*, thus , *if applicable*, invalidating the identification pursuant to NRS 450B.530, or is otherwise indicating that the patient wishes to revoke the authorization to withhold life-resuscitating treatment. Upon observing such an attempt by the patient, the person who administers emergency medical services shall attempt to communicate with the patient to confirm that the patient wishes to revoke the authorization to withhold life-resuscitating treatment. If the person who administers emergency medical services confirms that the patient wishes to revoke the authorization to withhold life-resuscitating treatment, the person who administers emergency medical services shall inform subsequent providers of medical care that the patient has so indicated and shall document in the report of emergency care the name and identifying number that is unique to the patient and any action or

request made by the patient that indicated that the patient wishes to revoke the authorization to withhold life-resuscitating treatment.

3. If the person who administers emergency medical services to a patient with a do-not-resuscitate identification, ~~for~~ do-not-resuscitate order *or Physician Order for Life-Sustaining Treatment form* is unable or unwilling to comply with paragraph (b) of subsection 2, the person shall promptly:

(a) Transfer care of the patient to a person who administers emergency medical services who is able and willing to comply with paragraph (b) of subsection 2; or

(b) Transport the patient to a physician or health care facility at which the do-not-resuscitate protocol may be followed.

4. As used in this section, “Physician Order for Life-Sustaining Treatment form” has the meaning ascribed to it in NRS 449.693.

Sec. 91. NAC 450B.364, 450B.374, 450B.3745, 450B.378, 450B.383, 450B.385, 450B.390, 450B.400, 450B.410, 450B.420, 450B.425, 450B.443, 450B.523, 450B.535, 450B.590 and 450B.705 are hereby repealed.

TEXT OF REPEALED SECTIONS

450B.364 Certification of emergency medical technicians: Issuance of certificate by health authority without jurisdiction. (NRS 450B.120, 450B.180) A health authority shall not issue a certificate as an emergency medical technician to an applicant who resides outside the

jurisdiction of that health authority unless that health authority and the health authority which has jurisdiction where the applicant resides agree that the health authority which does not have jurisdiction may issue the certificate.

450B.374 Late renewal of certificate as emergency medical technician or first responder. (NRS 450B.120, 450B.180)

1. If an emergency medical technician or first responder is unable to attend an approved course for continuing training required for renewal of his or her certificate, or otherwise comply with the requirements for renewal, within the prescribed period, he or she must, if he or she wishes to renew the certificate, submit a written request for a late renewal on a form provided by the Health Division.

2. To be granted a late renewal of the certificate, the applicant must:

(a) Successfully meet all of the requirements for renewal;

(b) Submit verification that he or she has met those requirements;

(c) For an emergency medical technician, pass a written examination administered by the Health Division; and

(d) Submit evidence satisfactory to the Health Division of verification of his or her skills.

3. The applicant for late renewal of a certificate must pay the fee required pursuant to NAC 450B.700.

4. The Health Division shall deny an application for a late renewal if more than 3 years have elapsed from the date of the expiration of the certificate.

450B.3745 Training and certification of intermediate emergency medical technician.
(NRS 450B.120, 450B.191) To be trained and certified as an intermediate emergency medical technician, an applicant must:

1. Possess a valid certificate as an emergency medical technician;
2. Successfully complete the national standard course for intermediate emergency medical technicians or an equivalent curriculum approved by the Health Division;
3. Submit verification signed by the physician of record who was responsible for the training that the applicant has successfully completed the course or curriculum specified in subsection 2;
4. Submit evidence satisfactory to the Health Division of verification of his or her skills;
5. Pass a written examination administered or approved by the Health Division; and
6. Maintain a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the Health Division.

450B.378 Certification of intermediate emergency medical technician trained in another state; renewal of certificate. (NRS 450B.120, 450B.191)

1. The Health Division may issue a certificate as an intermediate emergency medical technician to a person trained in another state if:

(a) The applicant:

(1) Is a resident of Nevada;

(2) Will be a resident of Nevada within 6 months after applying for certification; or

(3) Is a resident of a state contiguous to Nevada and is employed by or an active volunteer with a service or fire-fighting agency in Nevada that holds a valid permit to operate at the level of intermediate emergency care.

(b) The applicant submits the appropriate form and the fee prescribed in NAC 450B.700.

(c) The applicant:

(1) Has successfully completed training in a course which was at least equivalent to the national standard course for intermediate emergency medical technicians and holds a valid certificate as an intermediate emergency medical technician or an advanced medical technician issued by an authorized agency in the other state; or

(2) Holds a valid certificate as an intermediate emergency medical technician issued by the National Registry for Emergency Medical Technicians.

(d) The applicant's certification or registration in the other state has not been revoked, terminated or suspended pursuant to any disciplinary proceeding.

(e) The Health Division receives verification of his or her certificate as an intermediate emergency medical technician or advanced emergency medical technician from the issuing agency of the other state on a form provided by the Health Division.

(f) The applicant maintains a certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the Health Division.

2. The Health Division may require the applicant to:

(a) Submit evidence satisfactory to the Health Division of verification of his or her skills by a qualified instructor who is approved by the Health Division; and

(b) Pass a written examination administered by the Health Division.

3. A certificate as an intermediate emergency medical technician issued pursuant to this section must be renewed in accordance with the provisions of NAC 450B.380.

450B.383 Emergency medical technician: Authorized practices. (NRS 450B.120, 450B.180)

1. An emergency medical technician may:

(a) Render services in rescue, first aid and cardiopulmonary resuscitation.

(b) Use an automatic external defibrillator or a semiautomatic external defibrillator to defibrillate a patient.

(c) If licensed as an attendant, provide care for a sick or injured person at the scene of an emergency or during transportation of the person in accordance with written medical protocols approved by the Health Division.

2. As used in this section:

(a) “Automatic external defibrillator” means a device that is capable of the automatic analysis of heart rhythm and that will charge and deliver an electrical countershock after electronically detecting the presence of ventricular fibrillation or rapid ventricular tachycardia.

(b) “Semiautomatic external defibrillator” means a device that is capable of electronically detecting ventricular fibrillation and rapid ventricular tachycardia, but which requires a command by the operator to deliver an electrical countershock.

450B.385 Intermediate emergency medical technician: Authorized practices. (NRS 450B.120, 450B.1915) An intermediate emergency medical technician may, in addition to the authorized activities of an emergency medical technician:

1. During training received in a clinical setting, perform venipuncture and intraosseous infusion, administer parenteral medications and perform esophageal or endotracheal intubation under the supervision of a physician or registered nurse supervised by a physician.

2. If licensed as an attendant, under the supervision of a physician or a registered nurse supervised by a physician, or under such prescribed conditions as set forth by the medical director pursuant to written protocols of the service or fire-fighting agency, and in accordance with any written medical protocols approved by the Health Division, perform such procedures

and administer such medications as are approved by the board and recommended by the medical director of the service or fire-fighting agency.

450B.390 Performance of special procedures: Venipuncture, management of airways, administration of medication and performance of intraosseous infusion. (NRS 450B.120, 450B.160, 450B.180, 450B.1915)

1. The following are the circumstances and conditions under which the special procedures of venipuncture, management of airways, administration of medication and performance of intraosseous infusion must be documented by a licensed attendant who is an intermediate emergency medical technician:

(a) Any oral order from the physician, or a registered nurse acting on the authority of a physician, authorizing the attendant to perform one of the procedures must originate from an emergency department of a hospital or any other site designated by the Health Division and must be recorded on magnetic tape or digital disc.

(b) Each tape or digital recording of a physician's oral orders to an attendant concerning the procedures must be retained by the hospital or the facility issuing the medical directions, or the regional dispatch center, for at least 90 days after the recording is made.

(c) The attendant shall enter the physician's oral order or circumstances under which the emergency medical technician performed pursuant to a written order or protocol on the report of emergency care.

(d) The entry on the report of emergency care must be countersigned by the physician receiving the patient unless the intermediate emergency medical technician was performing pursuant to a written order or protocol.

2. The fluids, tubing and needles used for venipuncture, equipment for the management of airways and the other supplies and medications needed to support the special procedures performed by the authorized attendants must not be carried or stored in any vehicle other than an ambulance or agency's vehicle operated under a permit. The special procedures may be performed only when the attendant is functioning as part of the ambulance's team or as an attendant of a fire-fighting agency at the scene of an emergency.

3. A person may perform one of the special procedures only if the person is:

- (a) A licensed attendant who is licensed as an intermediate emergency medical technician;
- and
- (b) Authorized for the procedure by the medical director of the service or fire-fighting agency.

4. The Health Division shall suspend the license and certificate of any person who performs one of the procedures without authorization or not in accordance with this section.

450B.400 Certification: Qualifications. (NRS 450B.120, 450B.195) To be certified as an advanced emergency medical technician, an applicant must:

- 1. Be 18 years or older;
- 2. Successfully complete the national standard course for advanced emergency medical technicians or an equivalent curriculum approved by the Health Division;
- 3. Submit verification, signed by the physician of record who was responsible for the training, that he or she has successfully completed the course or curriculum specified in subsection 2;
- 4. Submit evidence satisfactory to the Health Division of verification of his or her skills;

5. Receive a score of not less than 70 percent on a written examination administered by the Health Division;

6. Maintain a certificate to provide advanced cardiac life support issued in accordance with the requirements of the American Heart Association or an equivalent organization approved by the Health Division;

7. Submit a statement indicating compliance with the provisions of NRS 450B.183; and

8. Submit the appropriate form and the fee prescribed in NAC 450B.700.

450B.410 Certification: Person trained in another state; renewal of certificate. (NRS 450B.120, 450B.195)

1. The Health Division may issue a certificate for an advanced emergency medical technician to a person trained in another state if:

(a) The applicant:

(1) Is a resident of Nevada on the date of the application;

(2) Will be a resident of Nevada within 6 months after applying for certification; or

(3) Is a resident of a state contiguous to Nevada and is employed by or an active volunteer with a service or fire-fighting agency in Nevada that holds a valid permit to operate at the level of advanced emergency care;

(b) The applicant submits the appropriate form and the fee prescribed in NAC 450B.700;

(c) The applicant:

(1) Has successfully completed training in a course which was at least equivalent to the national standard course for emergency medical technicians-paramedic and holds a certificate as an emergency medical technician-paramedic issued by an authorized agency in the other state; or

(2) Is certified by the National Registry of Emergency Medical Technicians as a paramedic;

(d) The applicant's certification or registration in the other state has not been revoked, terminated or suspended pursuant to any disciplinary proceeding;

(e) The Health Division receives verification of his or her certification as an advanced emergency medical technician from the issuing agency of the other state on a form provided by the Health Division; and

(f) The applicant maintains a certificate to provide advanced cardiac life support issued in accordance with the requirements of the American Heart Association or a similar organization approved by the Health Division.

2. The Health Division shall require the applicant to:

(a) Submit evidence satisfactory to the Health Division of verification of his or her skills by:

(1) A qualified instructor approved by the Health Division; or

(2) The medical director of the service or fire-fighting agency.

(b) Pass a written examination in procedures for advanced emergency care administered by the Health Division.

3. A certificate as an advanced emergency medical technician issued pursuant to this section must be renewed in accordance with the provisions of NAC 450B.420.

450B.420 Certification: Expiration; examination of retention of skills of holder for maintenance; renewal. (NRS 450B.120, 450B.195)

1. A certificate as an advanced emergency medical technician expires on the date of expiration appearing on the certificate and, after the initial period, expires biennially. The Health Division shall designate the date of expiration of each certificate.

2. To maintain certification, a certified advanced emergency medical technician must, every 12 months, complete at least one examination by:

- (a) The medical director of the service or fire-fighting agency; or
- (b) A qualified instructor approved by the Health Division.

3. In making the examination of an advanced emergency medical technician, the medical director or qualified instructor shall determine whether the advanced emergency medical technician retained his or her skills:

- (a) For which certification has been issued; and
- (b) In the administration of approved medications,

↳ and enter that determination on a form provided by the Health Division.

4. To renew the certificate, the advanced emergency medical technician must:

(a) Successfully complete the national standard course of training equivalent to a refresher course for advanced emergency medical technicians-paramedic or 40 hours of continuing education or training approved by the Health Division;

(b) Submit verification that he or she has successfully completed such a curriculum;

(c) Provide proof of certification in advanced cardiac life support;

(d) Before the certificate expires, submit an application evidencing that he or she has met the requirements of this section; and

(e) Pay the appropriate fee prescribed in NAC 450B.700.

450B.425 Certification: Late renewal. (NRS 450B.120, 450B.195)

1. If an advanced emergency medical technician is unable to renew his or her certificate when required, he or she must, if he or she wishes to renew the certificate, submit a request for a late renewal on a form provided by the Health Division.

2. Upon approval by the Health Division of a request for a late renewal, the applicant must submit evidence satisfactory to the Health Division of:

(a) Successfully meeting all the requirements for the renewal of a certificate as an advanced emergency medical technician;

(b) Verification of his or her skills;

(c) Receiving a score not less than 80 percent on a written examination administered by the Health Division; and

(d) Payment of the appropriate fee prescribed in NAC 450B.700.

3. Except as otherwise provided in subsection 4, a late renewal may be authorized for the remainder of the new period of certification.

4. The Health Division shall deny an application for a late renewal if more than 3 years have elapsed from the date of the expiration of the certificate.

450B.443 Renewal of certificate; reexamination. (NRS 450B.120, 450B.195) Each holder of a certificate as an advanced emergency medical technician:

1. Must receive at least 40 hours of training in courses approved by the Health Division for the renewal of the certificate; and

2. Is subject to reexamination every 2 years by the Health Division.

450B.523 Endorsement for operation at intermediate or advanced level. (NRS 450B.120, 450B.200) Any person who proposes to operate a service or fire-fighting agency at the level of intermediate or advanced emergency care must apply for an endorsement authorizing his or her operation at that level. The application must be made on the form prescribed by the Health Division.

450B.535 Endorsement to operate service or fire-fighting agency at specified levels of emergency care. (NRS 450B.120, 450B.200) The operator of a service or fire-fighting agency may apply for an endorsement to operate the service or fire-fighting agency at specified levels of basic, intermediate or advanced emergency care, or any combination thereof.

450B.590 Operation of ambulance by unlicensed person. (NRS 450B.120) In any geographic area for which the board has granted an exception to the requirement that an ambulance be occupied by two licensed attendants, an unlicensed person may drive the ambulance but it must also be occupied by a licensed attendant to care for the patient.

450B.705 Restrictions on licenses. (NRS 450B.120, 450B.160) The Health Division may:

1. Issue an initial license, which restricts the allowed activity or the length of the term of the license, or both, to an applicant who has a history of driving violations or a background of abuse of alcohol or drugs; and
2. Impose restrictions on an existing license if the licensee is found, after proper investigation, to have developed a history of driving violations or abuse of alcohol or drugs.

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH)

September 12, 2014

LCB File # R024-14RP2

Information Statement per NRS 450B

1. A clear and concise explanation of the need for the adopted regulation.

The proposed regulations for NAC 450B Emergency Medical Services (EMS), is due to four bills that were passed during the 2013 legislative session, A.B. 286, A.B. 344, S.B. 100, and S.B. 285. These changes will allow the Nevada State EMS Program to be update with national definitions and national standards. The following is a summary of the changes made to NAC 450B.

- Update the name change to all EMS levels to reflect the national standard.
- Update NACs to match the national EMS standards set forth by the National Highway Traffic Safety Administration of the United States Department of Transportation, National Association of Emergency Medical Service Educators, Federal Aviation Administration, and the American Heart Association.
- Require that out-of-state air ambulances be permitted by the State of Nevada, and be staffed by an appropriate level of care such as RN or EMT if they are transporting patients to Nevada, within, or out of Nevada.
- Update the reportable trauma data to match the national standard set forth from the American College of Surgeons.
- POLST form will now be an additional type of advance directive. The POLST form will have the same NRS statutory language as other advance directives under NRS 449.

2. A description of how public comment was solicited, a summary of the public response and an explanation how other interested persons may obtain a copy of the summary.

The Nevada State EMS Program conducted three informal workshops for feedback from the EMS community and also worked with state and local groups for feedback. The three informal workshops were conducted on July 19, 2013 in Minden; August 22, 2013 in Winnemucca; and September 3, 2013 in Elko, NV.

Comment was solicited from the regulated community, in that each permitted EMS agency under NAC 450B were mailed a copy of the proposed regulations, small business impact questionnaire and the notice of the public workshop.

The main county libraries were faxed the notice of the public workshop, proof of posting verification and the proposed regulations.

All interested parties on the EMS listserv were e-mailed a copy of the proposed regulations and the notice of the public workshop.

The public workshop was held March 25, 2014 in Carson City, Las Vegas, and Winnemucca. The results of the Public Workshop held were as follows: fourteen (14) people attended, nine (9) by phone, and six (6) people commented.

The following comments were made:

- (1) John Moller, Independent EMS Instructor and Care Flight, asked about Section 4, NAC 450B.360. John commented that the American Heart Association needs a certificate to provide international travel life support or equivalent. He stated he can live with the regulation naming specific entities such as the Heart Association and International Trauma Life Support. John asked if we have the opportunity can we drop the international and make it trauma life support certificate or approved by the Division.

Steve Tafoya, DPBH, mentioned that approval needs to be from the Division and that it is easier to not name specific courses. Steve stated the reason they kept the specific names in the regulation is while going through national standards, American College of Surgeons, and Attorney General Office preferred that language. It was suggested to reference the Heart Association in the regulations and have the equivalent rights after all statement that goes with international travel license board or American Heart Association.

This regulation was not revised.

- (2) John Moller, Independent EMS Instructor and Care Flight, mentioned that Section 13, NAC 450B.105 needs clarification and he asked if we still have the designation for basic/intermediate/ advanced medical care.

Steve Tafoya stated to clarify basic/intermediate/advanced care does not refer to new terms of EMT, AEMT and paramedic. It refers back to level of care more towards medical billing. Intermediate care still is the concept of advanced, how come it says medical care, not in so much regards to actual language of advanced. Every time its advanced specific portion it is referenced.

This regulation was not revised

- (3) Donna Miller, Life Guard International, asked about “Operating an Ambulance Service without a Permit.” She did not feel that the language would cover air ambulances especially those out-of-state. Donna proposed to set a penalty system i.e. 1st violation - letter of warning, 2nd violation -\$1,000, 3rd violation - \$5,000 per violation. This would be based on a complaint and investigation.

Erin Seward, DPBH, stated any service (agency) operating as a unit (ambulance, air ambulance) in the State of Nevada without a permit is not allowed. Having a permit

ensures that they are also inspected. If a service unit is caught without a permit, a fine would be implemented. Donna stated that we need to add a penalty system for ambulances that are based out-of-state. Erin responded that in Section 23, NAC 450B.260 the definition of a unit means ambulance and air ambulance. The definition does not separate in-state or out-of-state units. Steve Tafoya mentioned that there is also a fine for people not operating with a certificate. Donna stated that is correct. Mike Sullivan, Eureka County EMS, mentioned that the confusion comes from the title above the section: "Operating Ambulance service without a permit" and the language underneath states "any service operating a unit."

LCB was revised by LCB after the Public Workshop to read as "The Division may assess an administrative penalty in the amount of \$500 per day against a service which operates a unit without a permit issued by the Division."

- (4) Mike Heidemann, SOC Fire and Emergency Services, brought up the section on Section 26, NAC 450B.320, Item 1(d), the licensed physician, in regards to signing off on attendant's license to operate vehicle. There is an issue out in rural Nevada and we would like to reflect licensed physician or physician's assistant and further down same paragraph physician or physician's assistant on approval by Division. Donna Miller mentioned a proposal in that same section regarding licensed physician or nurse practitioner based on new bill or physician's assistant. Steve Tafoya stated that we have been working with the agencies and the Chief Medical Officer has asked to adjust that as well. We are looking to add nurse practitioner and physician assistant too.

This regulation was revised by adding Physician Assistant and Nurse Practitioner onto the list of authorized providers who can verify.

- (5) Donna Miller, Life Guard International, commented on Section 26, NAC 450B.320 regarding Class C driver's license. Donna believes that it should say Class C or better. Mike Sullivan stated that a Class A license is inclusive in Class C type vehicles. Class A can operate vehicles under Class C. Erin Seward suggested a better wording such as "a driver's license that includes a Class C." Mike stated that would eliminate people with Class M that do not have a motor vehicle license, only motorcycle. Erin suggested it read to have a minimum of Class C.

This regulation was revised to say "Holds a Class A, Class B, or Class C driver's license."

- (6) It was mentioned on Section 2, about the phrase "transport bodies" and to have it phrased "transport sick or injured." Steve Tafoya stated that they left the word "bodies" for agencies to get paid and it had to be incorporated for buyer recovery. Steve stated he would double check to make sure of the correct language. Yes this is the correct language.

This regulation was not revised.

- (7) It was mentioned on Section 6, Item 1, regarding paramedic and emergency medical services endorsements that expire on date of expiration appearing on certificate for paramedic and if these are two separate dates. A paramedic certificate and critical care certificate can have two different dates. Steve Tafoya responded that the endorsement portions has a new definition and has been approved by Attorney General Office. Having two different endorsements is up to the EMT to maintain on their own. If it has expired that means they have to renew.

This regulation was not revised.

- (8) It was mentioned on Section 26, NAC 450B.320, Item 2(2), that it state a registered nurse pursuant to chapter 632 NRS. Instead it should say Licensed EMS Registered Nurse pursuant to that chapter.

This regulation was revised to change from “registered nurse” to “emergency medical services registered nurse.”

- (9) Jared Oscarson, Humboldt General Hospital, suggested that on Section 40, NAC 450B.456, to have the requirements for dispatchers.

This regulation was revised to include language regarding “training pursuant to” the national standard.

- (10) Linda Bingaman, Carlin Volunteer Fire Department, questioned Section 66, NAC 450B.574 about units and non-transport units providing care without transporting. What does it mean in relationship to fire service vehicle with ambulance just to assist and not transporting? If a rescue unit is sent are they falling under regulations of having licensed attendants? Those rescue units are staffed by fire service people, are they falling under same regulations?

Non-transport units are not allowed to transport patients. This includes rescue units. All units (ground, air ambulance, non-transport) must be staffed by appropriately licensed EMTs and attendants.

This regulation was not revised.

- (11) Karla Jones, Carlin Volunteer Fire Department, questioned Section 69, NAC 450B.580, Item 2, regarding an ambulance should be equipped with communication that provided radio communication. Should it be “any appropriate” frequency instead of specifying UHF frequency? Steve Tafoya confirmed that it should say “any appropriate” frequency.

This regulation was revised to say “any frequency” rather than “ultra high frequencies.”

- (12) Donna Miller, Life Guard International, asked about clarification on Section 90, NAC 450B.766, Item 1, regarding services responding to a scene. Is every agency required

to give information to the state? Transporting or non-transporting, do they have to stay and wait?

Yes the agency at the scene providing emergency medical care must submit to the Division information concerning patients with traumas who are not transported to a receiving hospital or a trauma center.

This regulation was not revised.

- (13) It was asked about Section 46, NAC 450B.471, Item 2(a), regarding verification by witness with licensed attendant, transporting to hospital who shall sign statement indicating, signed statement, because they use electronic forms. Steve Tafoya stated that if all your information is digital then an electronic signature will suffice. You can also upload any paper documents into an electronic system.

Regulation was revised by LCB. Information regarding electronic signature stands, but was moved to Item 1(f).

- (14) It was mentioned in Section 48, NAC 450B.481 regarding controlled substance and if it required the signed initials of a paramedic or registered nurse. The commenter stated that it should be two persons verifying and not be specific to paramedic or registered nurse. However, the national standard only allows paramedics and registered nurses to administer narcotics. This would require a signature.

This regulation was not revised.

- (15) Karla Jones, Carlin Volunteer Fire Department, asked about Section 74, NAC 450B.640. The term “fire-fighting agency” was taken out of all the regulations, except for Item 3 of this regulation.

Regulation was revised to remove the term “fire-fighting agency” out of Item 3 of NAC 450B.640.

3. The number of persons who: 1) attended the hearing; 2) testified at each hearing; and 3) submitted to the agency written statements.

At the Board of Health on September 12, 2014, nineteen (19) people attended the hearing; one (1) person testified which was Steve Tafoya, Nevada State EMS Program Manager; and no written statements were submitted to the agency.

4. If provided, the name, telephone number, business address, business telephone number, electronic e-mail address and name of entity represented for individuals described above.

See attached Sign-In Sheets for Board of Health on September 12, 2014 from attendees in Las Vegas and Carson City, NV.

5. A description of how comment was solicited from affected businesses, a summary of their response, and an explanation how other interested persons may obtain a copy of the summary.

The Small Business Impact statement along with a copy of the proposed regulation changes was sent to all permitted EMS agencies. Postings were sent to all main libraries for posting of the workshops to be held in Las Vegas, Winnemucca, and in Carson City for March 25, 2014.

There were two (2) responses received out of the fifty-six (56) Small Business Impact Questionnaires distributed. Out of the two (2) responses, only one (1) was a business that was under 150 employees.

One (1) of respondents stated that the regulation could have an adverse economic effect upon their business. This is due to the transition to the new EMS provider name change. The transition from EMT-Intermediate to Advanced EMT and from EMT-Advanced to Paramedic will have an impact to the agencies. This is a one-time certification transition course. This is a national standard requirement and will align our EMT's to the national guidelines. This class is 16 hours in length. To help offset any involved costs associated with this transition, the Nevada State EMS Program has training grant funds that are available that any agency can request if needed.

A summary of the Public Workshop, Chapter 450B can be obtained by contacting the Division of Public and Behavioral Health, 4150 Technology Way, Suite 100, Carson City, NV 89701.

6. If the regulation was adopted without changing any part of the proposed regulation, a summary of the reasons for adopting the regulation without change. The statement should also explain the reasons for making any changes to the regulation as proposed.

The proposed regulation has been revised to address public comment and it meets the NRS adoption.

7. The estimated economic effect of the regulation on the business which it is to regulate and on the public. These must be stated separately, and in each case must include:
 - > Both adverse and beneficial effects; and
 - > Both immediate and long-term effects.

The beneficial effects would ensure that Nevada meets the national standard. The short-term will have an increase of costs for training. This is a one-time training, and from that point on, the overall pre-hospital healthcare will be improved. This transition will allow the State of Nevada to follow national guidelines.

The immediate and long-term effects could be increased standard of patient care throughout the state. It could allow EMS providers in the state to respond to natural disasters outside of the state, if needed.

8. The estimated cost to the agency for enforcement of the proposed regulation:

The agency cost for enforcement will not be impacted for the NAC 450B. No additional staff would be required for these inspections. There would be no additional expense incurred by the Division for the administrative assistant staff.

No additional fees would be necessitated, charged or incurred to the EMS agencies as this would be incorporated into the routine annual inspection.

9. A description of any regulations of other state or government agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the regulation overlaps or duplicates a federal regulation, name the regulatory federal agency.

This regulation does not affect other State agencies, overlap, or duplicate authority. Currently, there is no federal involvement or regulation.

10. If the regulation includes provisions which are more stringent than a federal regulation which regulates the same activity, a summary of such provisions.

At this time, the NAC 450B is at the national standard and doesn't exceed it.

11. If the regulation provides a new fee or increases an existing fee, the total annual amount the agency expects to collect and the manner in which the money will be used.

NAC 450B will have the following new and increased fees:

- \$50 per person per day administrative penalty against a service which allows a person to perform the duties of an attendant on an ambulance, air ambulance or agency's vehicle without a valid certificate issued by the Division.
- \$500 per day administrative penalty against a service which operates a unit (ground or air ambulance) without a permit issued by the Division.
- \$100 re-inspection fee to re-inspect a unit if needed.
- A investigation fee of any complaint will be based upon the hourly rate established for each investigator of the Division, as determined by the budget of the Division, and travel expenses. This is for all complaints that are determined to be substantiated and will be paid for by the service or person for whom the complaint was made against.
- Printed copies of documents will go up from \$.02 per copy to \$.10 per copy.

Type of Fee	SFY14 Audit	Potential Collections
\$50/day against a service that allows an unlicensed provider	12	\$600
\$500 a day for unpermitted agency	SFY14 = 0 SFY13 = 1	\$500
\$100 inspection fee	1	\$100
Substantiated Investigations	4	Estimated \$5,000 total with staff and administration hours along with travel
Copy Fee	Never charged in past	\$100

All fees collected stay within the program and are used for training opportunities that local EMS agencies can apply for; costs associated with Nevada State EMS Program staff providing trainings and proctoring evaluations.

Please see attachments that are included for the above questions.