Article 1. Definitions

§ 100101. Advanced Emergency Medical Technician Approving Authority.
"Advanced Emergency Medical Technician (Advanced EMT) Approving Authority" means the local Emergency Medical Services Agency (LEMSA).
Reference: Sections 1797.82, 1797.171, 1797.200, 1797.208, and 1797.218, Health and Safety Code.

§ 100102. Advanced EMT Certifying Entity.
"Advanced EMT Certifying Entity" means the medical director of the LEMSA.

§ 100102.1. Emergency Medical Services Quality Improvement Program.
"Emergency Medical Services Quality Improvement Program" or “EMSQIP” means methods of evaluation that are composed of structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, intervene to reduce or eliminate these causes, and take steps to correct the process, and recognize excellence in performance and delivery of care, pursuant to the provisions of Chapter 12 of this Division. This is a model program which will develop over time and is to be tailored to the individual organization’s quality improvement needs and is to be based on available resources for the EMSQIP.

§ 100103. Advanced Emergency Medical Technician.
"Advanced Emergency Medical Technician" or "Advanced EMT" means:
(a) A California certified EMT with additional training in limited advanced life support (LALS) according to the standards prescribed by this Chapter, and who has a valid Advanced EMT wallet-sized certificate card issued pursuant to this Chapter, or
(b) An individual who was certified as an EMT-II prior to the effective date of this chapter, whose scope of practice includes the LEMSA approved Advanced EMT Scope of Practice as well as the Local Optional Scope of Practice, and who was part of an EMT-II program in effect on January 1, 1994.
Reference: Sections 1797.82 and 1797.171, Health and Safety Code.
§ 100103.1. Authority
“Authority” means the Emergency Medical Services Authority.
Reference: Sections 1797.54, 1797.82 and 1797.171, Health and Safety Code.

§ 100103.2. Limited Advanced Life Support Service Provider
A “limited advanced life support service” or “LALS service” means a service provider approved by a LEMSA or state statute that utilizes Advanced EMT and/or EMT-II personnel.
Reference: Sections 1797.82, 1797.92 and 1797.171, Health and Safety Code.

§ 100104. Advanced EMT Certifying Examination
“Advanced EMT Certifying Examination,” as used in this Chapter, means an examination, developed by the Advanced EMT Certifying Entity and selected by the Authority, given to an individual applying for certification as an Advanced EMT. The examination shall include both written and skills testing portions designed to determine an individual’s competence for certification as an Advanced EMT. Effective September 12, 2012, the National Registry of Emergency Medical Technicians Advanced EMT written and skills examination shall be the AEMT certifying examinations for AEMT certification.

Article 2. General Provisions

§ 100105. Application of Chapter; Displacement of Services.
(a) Any LEMSA may approve an advanced life support (ALS), meaning Paramedic or LALS, meaning Advanced EMT program which provides services utilizing Advanced EMTs, or Paramedics, or any combination thereof.
(b) Prior to considering and initiating a reduction of existing Paramedic services, or of existing services that utilize Advanced EMTs that are accredited in the local optional scope of practice, within the LEMSA’s jurisdiction, the LEMSA shall prepare an impact evaluation report. The impact evaluation report shall indicate why the continuation of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice, is not feasible or appropriate within that LEMSA’s jurisdiction. The impact evaluation report shall only be required when existing Paramedic services, or services utilizing Advanced EMTs accredited in the local optional scope of practice, are displaced by initiating new Advanced EMT services. The impact evaluation report shall include, but not be limited to:
(1) An evaluation describing why the geography, population density, and resources would not make the continuation of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice, more appropriate or feasible.
(2) The LEMSA shall hold a public hearing regarding the Paramedic services, or services utilizing Advanced EMTs accredited in the local optional scope of practice, that
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may be displaced by the new Advanced EMT services. The public hearing shall be for the purpose of allowing the public an opportunity to provide the LEMSA with written and/or verbal input regarding the displacement of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice. The LEMSA may waive the public hearing if a public hearing was previously held that allowed the public an opportunity to provide written and/or verbal input regarding the displacement of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice.

(c) The governing body of a public safety agency that operates in the jurisdiction of a LEMSA and that may displace Paramedic services, or services utilizing Advanced EMTs accredited in the local optional scope of practice, by initiating new Advanced EMT services, shall meet the requirements of this subsection (c). The governing body of the public safety agency shall hold a public hearing prior to considering the displacement of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice, by initiating Advanced EMT services. The public safety agency shall:

(1) Provide the LEMSA in the jurisdiction in which it operates with written notice no less than six (6) months prior to the implementation date of the reduction of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice; and

(2) Provide the LEMSA in the jurisdiction in which it operates with an evaluation report no less than three (3) months prior to the implementation date of the reduction of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice. The public safety agency’s evaluation report shall contain, at a minimum, an evaluation describing why the geography, population density, and resources would not make the continuation of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice, more appropriate or feasible.

Upon receipt of the evaluation report from the public safety agency, the LEMSA may, but is not required to, prepare a separate evaluation report with the contents specified in subsection (b)(1).

(d) If the LEMSA determines, pursuant to the impact evaluations from subsections (b) and/or (c) of this section, that the displacement of Paramedic services, or of services utilizing Advanced EMTs accredited in the local optional scope of practice, is not justified or feasible, the new Advanced EMT services shall not be approved. If the LEMSA determines, pursuant to the impact evaluations from subsections (b) and/or (c) of this section, that the displacement of Paramedic services, or of services utilizing Advanced EMT’s accredited in the local optional scope of practice, is justified and feasible, then the new Advanced EMT services may be approved by the LEMSA. This approval by the LEMSA shall occur after the Advanced EMT service provider has met the requirements of Section 100126 of this Chapter.

(e) Any LEMSA which approves an Advanced EMT training program, or a LALS service which provides services utilizing Advanced EMT personnel, shall be responsible for approving Advanced EMT training programs, Advanced EMT service providers, Advanced EMT base hospitals, and for developing and enforcing standards, regulations, policies, and procedures in accordance with this Chapter so as to provide
for quality assurance, appropriate medical control and coordination of the Advanced EMT personnel and training program(s) within an EMS system.

(f) No person or organization shall offer an Advanced EMT training program or hold themselves out as offering an Advanced EMT training program, or provide LALS services, or hold themselves out as providing LALS services utilizing Advanced EMTs unless that person or organization is authorized by a LEMSA.


§ 100106. Advanced EMT Scope of Practice.
(a) An Advanced EMT may perform any activity identified in the scope of practice of an EMT in Chapter 2 of this Division.
(b) A certified Advanced EMT or an Advanced EMT trainee, as part of an organized EMS system, while caring for patients in a hospital as part of their training or continuing education, under the direct supervision of a Physician or Registered Nurse, or while at the scene of a medical emergency or during transport, or during interfacility transfer is authorized to do all of the following according to the policies and procedures approved by the LEMSA:
   (1) Perform pulmonary ventilation by use of a perilyngeal airway adjunct.
   (2) Perform tracheo-bronchial suctioning of an intubated patient.
   (3) Institute intravenous (IV) catheters, saline locks, needles or other cannulae (IV lines), in peripheral veins.
   (4) Administer the following intravenously:
      (A) Glucose solutions;
      (B) Isotonic balanced salt solutions (including Ringer's lactate solution);
      (C) Naloxone;
      (D) Intravenous administration of 50% dextrose for adult patients, and 10% or 25% dextrose for pediatric patients.
   (5) Establish and maintain intraosseous access in a pediatric patient.
   (6) Obtain venous and/or capillary blood samples for laboratory analysis.
   (7) Use blood glucose measuring device.
   (8) Administer, the following drugs in a route other than intravenous:
      (A) Sublingual nitroglycerine preparations;
      (B) aspirin;
      (C) glucagon;
      (D) inhaled beta-2 agonists (bronchodilators);
      (E) activated charcoal;
      (F) naloxone;
      (G) epinephrine.
   (c) During a mutual aid response into another jurisdiction, an Advanced EMT may utilize the scope of practice for which s/he is trained and certified according to the policies and procedures established by his/her certifying LEMSA.
(d) The scope of practice of an Advanced EMT shall not exceed those activities authorized in this section except in those limited situations as approved in Section 100106.1.


§ 100106.1 Advanced EMT Local Optional Scope of Practice.

(a) Advanced EMTs who were not certified as EMT-IIs prior to the effective date of this Chapter are not eligible for accreditation in the scope of practice items listed in this Section.

(b) In addition to the activities authorized by Section 100106 of this Chapter, a LEMSA with an EMT-II program in effect on January 1, 1994, may establish policies and procedures for local accreditation of an individual previously certified, as an EMT-II, to perform any or all of the following optional skills specified in this section.

1. Administer the Following Medications:
   (A) Lidocaine hydrochloride
   (B) Atropine sulfate
   (C) Sodium bicarbonate
   (D) Furosemide
   (E) Epinephrine
   (F) Morphine sulfate
   (G) Benzodiazepines (midazolam)

2. Perform synchronized cardioversion and defibrillation.
3. Utilize electrocardiographic devices and monitor electrocardiograms.


§ 100106.2. Advanced EMT Trial Studies.

An Advanced EMT may perform any prehospital emergency medical care treatment procedure(s) or administer any medication(s) on a trial basis when approved by the medical director of the LEMSA and the Director of the Authority.

(a) The medical director of the LEMSA shall review a trial study plan, which at a minimum shall include the following:
   1. A description of the procedure(s) or medication(s) proposed, the medical conditions for which they can be utilized, and the patient population that will benefit.
   2. A compendium of relevant studies and material from the medical literature.
   3. A description of the proposed study design including the scope of the study and method of evaluating the effectiveness of the procedure(s) or medication(s), and expected outcome.
   4. Recommended policies and procedures to be instituted by the LEMSA regarding the use and medical control of the procedure(s) or medication(s) used in the study.
   5. A description of the training and competency testing required to implement the study.

(b) The medical director of the LEMSA shall appoint a local medical advisory committee to assist with the evaluation and approval of trial studies. The membership of the
committee shall be determined by the medical director of the LEMSA, but shall include individuals with knowledge and experience in research and the effect of the proposed study on the EMS system.

(c) The medical director of the LEMSA shall submit the proposed study and send a copy of the proposed trial study plan at least forty-five (45) calendar days prior to the proposed initiation of the study to the Director of the Authority for approval in accordance with the provisions of section 1797.221 of the Health and Safety Code. The Authority shall inform the Commission on EMS of studies being initiated.

(d) The Authority shall notify, within fourteen (14) working days of receiving the request, the medical director of the LEMSA submitting its request for approval of a trial study that the request has been received, and shall specify what information, if any, is missing.

(e) The Director of the Authority shall render the decision to approve or disapprove the trial study within forty-five (45) calendar days of receipt of all materials specified in subsections (a) and (b) of this section.

(f) The medical director of the LEMSA within eighteen (18) months of initiation of the procedure(s) or medication(s), shall submit a written report to the Commission on EMS which includes at a minimum the progress of the study, number of patients studied, beneficial effects, adverse reactions or complications, appropriate statistical evaluation, and general conclusion.

(g) The Commission on EMS shall review the above report within two meetings and advise the Authority to do one of the following:

(1) Recommend termination of the study if there are adverse effects or no benefit from the study is shown.

(2) Recommend continuation of the study for a maximum of eighteen (18) additional months if potential, but inconclusive benefit is shown.

(3) Recommend the procedure or medication be added to the Advanced EMT local optional scope of practice. Additions to the local optional scope of practice are only for those EMT-II programs that were in effect on January 1, 1994.

(h) If option (g)(2) is selected, the Commission on EMS may advise continuation of the study as structured or alteration of the study to increase the validity of the results.

(i) At the end of the additional eighteen (18) month period, a final report shall be submitted to the Commission on EMS with the same format as described in (f) above.

(j) The Commission on EMS shall review the final report and advise the Authority to do one of the following:

(1) Recommend termination or further extension of the study.

(2) Recommend the procedure or medication be added to the Advanced EMT local optional scope of practice. Additions to the local optional scope of practice are only for those EMT-II programs that were in effect on January 1, 1994.

(k) The Authority may require the trial study(ies) to cease after thirty-six (36) months.


§ 100107. Responsibility of the LEMSA.
The LEMSA, which approves a LALS service provider, shall develop and maintain policies and procedures that comply with guidelines established by the Authority for
training and maintenance of knowledge, skills and abilities contained in this Chapter which shall include, but not be limited to, the following:
(a) Development or approval, monitoring, and enforcement of standards, policies, and procedures for the EMS system which relates to the Advanced EMT.
(b) Approval, denial, revocation of approval, and suspension of training programs, Advanced EMT base and alternative base stations, and Advanced EMT service providers.
(c) Assurance of compliance of the Advanced EMT training program and the EMS system with the provisions of this Chapter.
(d) Submission annually to the Authority the names of approved Advanced EMT training programs.
(e) Monitoring and evaluation of the EMS system as it applies to Advanced EMT personnel.
(f) Development or approval, implementation and enforcement of policies for medical control and medical accountability for the Advanced EMT including:
(1) General treatment and triage protocols.
(2) Patient care record and reporting requirements.
(3) Field medical care protocols.
(4) Medical care audit system.
(5) Role and responsibility of the Advanced EMT base and alternative base stations and Advanced EMT service provider.
(g) System data collection and evaluation.


§ 100107.1. Advanced EMT Quality Improvement Program.
(a) The LEMSA shall establish a system-wide quality improvement program (EMSQIP) as defined in Section 100102.1 of this Chapter.
(b) Each Advanced EMT service provider, as defined in Section 100126 and each Advanced EMT base hospital as defined in Section 100127, of this Chapter, shall have an EMSQIP approved by the LEMSA.
(c) If, through the EMSQIP, the employer or medical director of the LEMSA determines that an Advanced EMT needs additional training, observation or testing, the employer and the medical director may create a specific and targeted program of remediation based upon the identified need of the Advanced EMT related to medical and patient care. If there is disagreement between the employer and the medical director, the decision of the medical director shall prevail.


Article 3. Program Requirements for Advanced EMT Training Programs

§ 100108. Advanced EMT Approved Training Programs.
(a) The purpose of an Advanced EMT training program shall be to prepare eligible EMTs to render prehospital LALS within an organized EMS system.

(b) Advanced EMT training shall be offered only by approved training programs. Eligibility for training program approval shall be limited to the following institutions:

1. Accredited universities and colleges, including junior and community colleges, and private postsecondary schools as approved by the State of California, Department of Consumer Affairs, Bureau for Private Postsecondary Education.
2. Medical training units of a branch of the Armed Forces or Coast Guard of the United States.
3. Licensed general acute care hospitals which meet the following criteria:
   A. Hold a special permit to operate a Basic or Comprehensive Emergency Medical Service pursuant to the provisions of Division 5; and
   B. Provide continuing education to other health care professionals.


§ 100109. Advanced EMT Training Program Teaching Staff.
(a) Each program shall have an approved program medical director who shall be a physician currently licensed in the State of California, who has two (2) years academic or clinical experience in emergency medicine in the last five (5) years, and who is qualified by education or experience in methods of instruction. Duties of the program medical director shall include, but not be limited to:

1. Approval of all course content.
2. Approval of content of all written and skills examination.
3. Approval of provision for hospital clinical and field internship experiences.
4. Approval of principal instructor(s) qualifications.

(b) Each program shall have an approved course director who shall be a Physician, Registered Nurse, or Paramedic currently licensed in the State of California, or an individual who holds a baccalaureate degree or equivalent in a related health field or equivalent. The course director shall have a minimum of one (1) year experience in an administrative or management level position and have a minimum two (2) years academic or clinical experience in prehospital care education within the last five (5) years. The approved course director shall be qualified by education and experience in methods, materials, and evaluation of instruction which shall be documented by at least forty (40) hours in teaching methodology. The courses include, but are not limited to the following examples:

1. State Fire Marshal Instructor 1A and 1B,
2. National Fire Academy’s Instructional Methodology,
3. Training programs that meet the United States Department of Transportation/National Highway Traffic Safety Administration 2002 Guidelines for Educating EMS Instructors such as the National Association of EMS Educators Course.

Duties of the course director shall include, but not be limited to:

1. Administration of the training program.
(2) In coordination with the program medical director, approve the principal instructor, teaching assistants, field preceptors, clinical and internship assignments, and coordinate the development of curriculum.
(3) Ensure training program compliance with this Chapter and other related laws.
(4) Sign all course completion records.
(c) Each program shall have a principal instructor(s) who may also be the program medical director or course director, who shall:
(1) Be a Physician, Registered Nurse, or a Physician Assistant currently licensed in the State of California;
or
(2) Be a Paramedic or an Advanced EMT and/or EMT-II currently licensed or certified in California.
(3) Have two (2) years academic or clinical experience in emergency medicine within the last five (5) years.
(4) Be approved by the course director in coordination with the program medical director as qualified to teach those sections of the course to which s/he is assigned.
(5) Be responsible for areas including, but not limited to, curriculum development, course coordination, and instruction.
(6) Be qualified by education and experience in methods, materials, and evaluation of instruction, which shall be documented by at least forty (40) hours in teaching methodology. The courses include, but are not limited to the following examples:
(A) State Fire Marshal Instructor 1A and 1B,
(B) National Fire Academy’s Instructional Methodology,
(C) Training programs that meet the United States Department of Transportation/National Highway Traffic Safety Administration 2002 Guidelines for Educating EMS Instructors such as the National Association of EMS Educators Course.
(d) Each program may have a teaching assistant(s) who shall be an individual(s) qualified by training and experience to assist with the teaching of the course and shall be approved by the course director in coordination with the program medical director as qualified to assist in teaching the topics to which the assistant is to be assigned. A teaching assistant shall be directly supervised by a principal instructor, the course director, and/or the program medical director.
(e) Each program shall have a field preceptor(s) who shall:
(1) Be a Physician, Registered Nurse, or Physician Assistant currently licensed in the State of California; or
(2) Be a Paramedic or an Advanced EMT currently licensed or certified in the State of California; and
(3) Have two (2) years academic or clinical experience in emergency medicine within the last five (5) years.
(4) Be approved by the course director in coordination with the program medical director to provide training and evaluation of an Advanced EMT trainee during field internship with an authorized service provider.
(5) Be under the supervision of a principal instructor, the course director and/or program medical director.
(f) Each program shall have a hospital clinical preceptor(s) who shall:
(1) Be a Physician, Registered Nurse, or Physician Assistant who is currently licensed in the State of California.
(2) Have two (2) years academic or clinical experience in emergency medicine within the last five (5) years.
(3) Be approved by the course director in coordination with the program medical director to provide evaluation of an Advanced EMT trainee during the clinical training.

Reference: Sections 1797.82, 1797.171 and 1797.208, Health and Safety Code.

§ 100110. Advanced EMT Training Program Didactic and Skills Laboratory
An approved Advanced EMT training program shall insure that no more than six (6) trainees are assigned to one (1) instructor/teaching assistant during the skills practice/laboratory sessions.


§ 100111. Advanced EMT Training Program Hospital Clinical Training
(a) An approved Advanced EMT training program shall provide for and monitor a supervised clinical experience at a hospital(s) which is licensed as a general acute care hospital. The clinical setting may be expanded to include areas commensurate with the skills experience needed. Such settings may include surgicenters, clinics, jails or any other areas deemed appropriate by the LEMSA.
(b) Training programs in nonhospital institutions shall enter into a written agreement(s) with a licensed general acute care hospital(s) which holds a permit to operate a Basic or Comprehensive Emergency Medical Service for the purpose of providing this supervised clinical experience as well as a clinical preceptor(s) to instruct and evaluate the student.
(c) Advanced EMT clinical training hospital(s) shall provide clinical experience, supervised by a clinical preceptor(s) approved by the training program medical director. Hospitals providing clinical training and experience shall be approved by the program medical director, and shall provide for continuous assessment of student performance. No more than two (2) trainees will be assigned to one (1) preceptor during the supervised hospital clinical experience at any one time. The clinical preceptor may assign the trainee to another health professional for selected clinical experience. Clinical experience shall be monitored by the training program staff and shall include direct patient care responsibilities including the administration of additional drugs which are designed to result in the competencies specified in this Chapter. Clinical assignments shall include, but not be limited to: emergency, surgical, cardiac, obstetric, and pediatric patients.
(d) The Advanced EMT training program shall establish criteria to be used by clinical preceptors to evaluate trainees. Verification of successful performance in the prehospital setting shall be required prior to course completion or certification.
§ 100112. Advanced EMT Training Program Field Internship.
(a) An approved Advanced EMT training program shall provide for and monitor a field internship with a designated Advanced EMT or Paramedic service provider(s) approved by the training program medical director.
(b) After obtaining the approval of the LEMSA, the Advanced EMT training program shall enter into a written agreement with an Advanced EMT or Paramedic service provider(s) to provide for this field internship, as well as for a field preceptor(s) to directly supervise, instruct and evaluate students. The field internship shall include direct patient care responsibilities which, when combined with the other parts of the training program, shall result in the Advanced EMT competencies specified in this Chapter.
(c) The field internship shall be medically supervised and monitored in accordance with the policies of the LEMSA.
(d) No more than one (1) Advanced EMT trainee shall be assigned to an Advanced EMT or Paramedic response vehicle during the field internship.
(e) The Advanced EMT training program shall establish evaluation criteria to be used by field preceptors to evaluate trainees.

§ 100113. Advanced EMT Training Program Approval.
(a) Eligible training programs as defined in Section 100108 of this Chapter, shall submit a written request for Advanced EMT program approval to the Advanced EMT Approving Authority.
(b) The Advanced EMT Approving Authority shall receive and review the following prior to program approval:
(1) A statement verifying that the course content is equivalent to the U.S. Department of Transportation (DOT) National EMS Education Standards (DOT HS 811 077A, January 2009).
(2) A course outline.
(3) Performance objectives for each skill.
(4) The name and qualifications of the training program course director, program medical director, and principal instructors.
(5) Provisions for supervised hospital clinical training, including standardized forms for evaluating Advanced EMT trainees.
(6) Provisions for supervised field internship, including standardized forms for evaluating Advanced EMT trainees.
(7) The location at which the course(s) are to be offered and their proposed dates.
(8) Provisions for course completion by challenge, including a challenge examination (if different from the final examination).
(c) The Advanced EMT Approving Authority shall review the following prior to program approval:
(1) Samples of written and skills examinations used for periodic testing.
(2) A final skills competency examination.
(3) A final written examination.
(4) Evidence that the program provides adequate facilities, equipment, examination security, student record keeping, clinical training and field internship training.
(d) The Advanced EMT Approving Authority shall make available to the Authority, upon request, any or all materials submitted pursuant to this Section by an approved Advanced EMT training program in order to allow the Authority to make the determinations required by Section 1797.173 of the Health and Safety Code.


§ 100114. Advanced EMT Training Program Approval Notification.
(a) Program approval or disapproval shall be made in writing by the Advanced EMT Approving Authority to the requesting training program within a reasonable period of time after receipt of all required documentation. This time period shall not exceed three (3) months.
(b) The Advanced EMT Approving Authority shall establish the effective date of program approval in writing upon the satisfactory documentation of compliance with all program requirements.
(c) Program approval shall be for four (4) years following the effective date of program approval and may be renewed every four (4) years subject to the procedure for program approval specified in this Chapter.


§ 100115. Application of Regulations to Existing AEMT Training Programs.
All AEMT training programs in operation prior to the effective date of these regulations shall submit evidence of compliance with this Chapter to the Advanced EMT Approving Authority for the county in which they are located within six (6) months after the effective date of these regulations. AEMT training programs that do not submit the information, as required by this section, shall not be approved as an Advanced EMT Training Program.


§ 100116. Advanced EMT Training Program Review and Reporting.
(a) All program materials specified in this Chapter shall be subject to periodic review by the Advanced EMT Approving Authority.
(b) All programs shall be subject to periodic on-site evaluation by the Advanced EMT Approving Authority.
(c) Any person or agency conducting a training program shall notify the Advanced EMT Approving Authority in writing, in advance when possible, and in all cases within thirty (30) calendar days of any change in course content, hours of instruction, course director, program medical director, principal instructor(s), course locations and proposed dates, provisions for hospital clinical experience, or field internship.

Reference: Sections 1797.82, 1797.171 and 1797.208, Health and Safety Code.

§ 100117. Advanced EMT Denial or Withdrawal of Training Program Approval.
(a) Noncompliance with any criterion required for program approval, use of any unqualified teaching personnel, or noncompliance with any other applicable provision of this Chapter may result in denial, probation, suspension or revocation of program approval by the Advanced EMT Approving Authority. Notification of noncompliance and action to place on probation, suspend or revoke shall be done as follows:
(1) An Advanced EMT Approving Authority shall notify the approved Advanced EMT training program course director in writing, by registered mail, of the provisions of this Chapter with which the Advanced EMT training program is not in compliance.
(2) Within fifteen (15) working days of receipt of the notification of noncompliance, the approved Advanced EMT training program shall submit in writing, by registered mail, to the Advanced EMT Approving Authority one of the following:
(A) Evidence of compliance with the provisions of this Chapter, or
(B) A plan for meeting compliance with the provisions of this Chapter within sixty (60) calendar days from the day of receipt of the notification of noncompliance.
(3) Within fifteen (15) working days of receipt of the response from the approved Advanced EMT training program, or within thirty (30) calendar days from the mailing date of the noncompliance notification if no response is received from the approved Advanced EMT training program, the Advanced EMT Approving Authority shall notify the Authority and the approved Advanced EMT training program in writing, by registered mail, of the decision to accept the evidence of compliance, accept the plan for meeting compliance, place on probation, suspend or revoke the Advanced EMT training program approval.
(4) If the Advanced EMT Approving Authority decides to suspend or revoke the Advanced EMT training program approval or place the Advanced EMT training program on probation, the notification specified in subsection (a)(3) of this section shall include the beginning and ending dates of the probation or suspension and the terms and conditions for lifting of the probation or suspension or the effective date of the revocation, which may not be less than sixty (60) calendar days from the date of the Advanced EMT Approving Authority’s letter of decision to the Authority and the Advanced EMT training program.


§ 100118. Advanced EMT Student Eligibility.
(a) To be eligible to enter an Advanced EMT training program, an individual shall meet the following requirements:
(1) Possess a high school diploma or general education equivalent; and
(2) Possess a current EMT certificate in the State of California; and
(3) Possess a current Basic Life Support (CPR) card according to the American Heart Association 2005 Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care at the healthcare provider level.
Reference: Sections 1797.82, 1797.171 and 1797.208, Health and Safety Code.

§ 100119. Advanced EMT Training Program Required Course Hours.
(a) The Advanced EMT training program shall consist of not less than one-hundred and sixty (160) hours. These training hours shall be divided into:
(1) A minimum of eighty (80) hours of didactic instruction and skills laboratory;
(2) The hospital clinical training shall consist of no less than forty (40) hours and field internship shall consist of no less than forty (40) hours.
(b) The trainee shall have a minimum of fifteen (15) ALS patient contacts during the field internship. An ALS patient contact shall be defined as the student performance of one or more of the skills specified in Section 100106(b) of this Chapter. Each ALS patient contact by an Advanced EMT student shall be documented in writing on a standard form and shall be signed by the training program medical director as verification of the fact that the ALS contact met the criteria set forth in this section.
(c) The trainee shall demonstrate competency in all skills listed in Section 100106 (b) of this Chapter.
(d) During the field internship, the student shall demonstrate competency as the team leader while on-scene delivering patient care at least five (5) times.
(e) Competency and success in the skills listed in subsections (c) and (d) of this section shall be evaluated and documented by the field preceptor.
(f) The minimum hours shall not include the following:
(1) Course material designed to teach or test exclusively EMT knowledge or skills including CPR.
(2) Examination for student eligibility.
(3) The teaching of any material not prescribed in Section 100120 of this Chapter.
(4) Examination for Advanced EMT certification.
Reference: Section 1797.82 and 1797.171, Health and Safety Code.

§ 100120. Advanced EMT Training Program Required Course Content
The content of an Advanced EMT course shall meet the objectives contained in the U.S. Department of Transportation (DOT) National EMS Education Standards (DOT HS 811 077A, January 2009), incorporated herein by reference, to result in the Advanced EMT being competent in the Advanced EMT basic scope of practice specified in section 100106 of this Chapter. The U.S. Department of Transportation (DOT) National EMS Education Standards (DOT HS 811 077A, January 2009) can be accessed through the U.S. DOT National Highway Traffic Safety Administration at the following website address:
§ 100121. Advanced EMT Training Program Required Testing.
(a) An approved Advanced EMT training program shall include periodic examinations and final comprehensive competency-based examinations to test the knowledge and skills specified in this Chapter.
(b) Successful performance in the clinical and field setting shall be required prior to course completion.

Reference: Sections 1797.63, 1797.82, 1797.171, 1797.208 and 1797.210, Health and Safety Code.

§ 100122. Advanced EMT Training Program Course Completion Record.
(a) An approved Advanced EMT training program shall issue a course completion record to each person who has successfully completed the Advanced EMT training program.
(b) The course completion record shall contain the following:
   (1) The name of the individual.
   (2) The date of course completion.
   (3) The type of course completed (i.e., Advanced EMT) and the number of hours completed.
   (4) The following statement from an approved Advanced EMT training program: "The individual named on this record has successfully completed an approved Advanced EMT course", to indicate the appropriate type of course completed.
   (5) The name of the Advanced EMT Approving Authority.
   (6) The signature of the course director.
   (7) The name and location of the training program issuing the record.
   (8) The following statement in bold print: "This is not an Advanced EMT certificate."
   (9) The following statement: "This course completion record is valid to apply for certification for a maximum of two (2) years from the course completion date and shall be recognized statewide."
(c) The name and address of each person receiving a course completion record and the date on which the record was issued shall be reported in writing to the appropriate Advanced EMT Certifying Entity fifteen (15) working days of course completion.

Reference: Sections 1797.82, 1797.171, 1797.208 and 1797.210, Health and Safety Code.

Article 4. Certification

§ 100123. Advanced EMT Initial Certification Requirements.
(a) In order to be eligible for initial certification an individual shall:
   (1) Possess a current EMT certificate issued in the State of California.
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(2) Have an Advanced EMT course completion record or other documented proof of successful completion of the topics contained in an approved Advanced EMT training program.

(3) Pass, by pre-established standards a competency based written and skills Advanced EMT certifying examination pursuant to Section 100104 of this Chapter.

(4) Beginning July 1, 2010, complete the criminal history background check requirements as specified in Article 4, Chapter 10 of this Division.

(5) Comply with other reasonable requirements, as may be established by the local Advanced EMT Certifying Entity, such as:

(A) Pay the established fee.

(B) Furnish a photograph for identification purposes.

(6) Complete an application that contains this statement, “I hereby certify under penalty of perjury that all information on this application is true and correct to the best of my knowledge and belief, and I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to Advanced EMT certification in the state of California. I understand all information on this application is subject to verification, and I hereby give my express permission for this certifying entity to contact any person or agency for information related to my role and function as an Advanced EMT in California.”

(7) Disclose any certification or licensure action:

(A) Against any EMT-related certification or license in California, and/or entity per statutes and/or regulations of that state or other issuing entity, including active investigations, or

(B) Against an EMT certificate, Advanced EMT certificate or a Paramedic license, or health related license, or

(C) Any denial of certification by a LEMSA or in the case of paramedic licensure a denial by the Authority.

(8) Complete a precertification field evaluation.

(9) Complete the additional training specified in Section 100106.1 if applicable, of this Chapter.

(b) An individual who possesses a current California Advanced EMT certificate in one or more counties in California, shall be eligible for certification upon fulfilling the requirements of subsections (a)(2), (a)(3), (a)(4), (a)(5), (a)(6), (a)(7), and (a)(8) of this section and meets the following requirements.

(1) Provides satisfactory evidence that his/her training included the required course content as specified in Section 100120 of this Chapter.

(2) Successfully completes training and demonstrates competency in any additional prehospital emergency medical care treatment practice(s) required by the local Advanced EMT Certifying Entity pursuant to subsection 100106.1 of this Chapter.

(c) An individual currently licensed in California as a Paramedic is deemed to be certified as an Advanced EMT, except when the Paramedic license is under suspension, with no further testing required. In the case of a Paramedic license under suspension, the Paramedic shall apply to a LEMSA for Advanced EMT certification.

(d) In order for an individual, whose National Registry EMT-Intermediate or Paramedic or out-of-state EMT-Intermediate certification or Paramedic license/certification has
lapsed, to be eligible for certification in California as an Advanced EMT the individual shall:

1. For a lapse of less than six (6) months, the individual shall comply with the requirements contained in Section 100124 (b), (c), (d), (e) and (f) of this Chapter.
2. For a lapse of six (6) months or more, but less than twelve (12) months, the individual shall comply with the requirements of Section 100125 (a) (2) of this Chapter.
3. For a lapse of twelve (12) months or more, but less than twenty-four (24) months, the individual shall comply with the requirements of Section 100125 (a) (3) of this Chapter.
4. For a lapse of twenty-four (24) months or more, the individual shall complete an entire Advanced EMT course and comply with the requirements of subsection (a) of this Section.

(e) An individual who possesses a current and valid out-of-state or National Registry EMT-Intermediate certification or Paramedic license/certification shall be eligible for certification upon fulfilling the requirements of subsections (a)(3), (a)(4), (a)(5), (a)(6), (a)(7), and (a)(8) of this section.

(f) A Physician, Registered Nurse, or a Physician Assistant currently licensed by the State of California shall be eligible for Advanced EMT certification upon:
1. Providing documentation of instruction in topics and skills equivalent to those listed in Section 100120.
2. Successfully complete five (5) documented ALS contacts in a prehospital field internship as specified in Section 100119 (b).

(g) Each Advanced EMT Certifying Entity shall provide for adequate certification tests to accommodate the eligible individuals requesting certification within their area of jurisdiction, but in no case less than once per year, unless otherwise specified by their Advanced EMT Approving Authority.

(h) The Advanced EMT Certifying Entity may waive portions of, or all of, the certifying examination for individuals who are currently certified as an Advanced EMT in California. In such situations, the Advanced EMT Certifying Entity shall issue a certificate, which shall have as its expiration date, a date not to exceed the expiration date on the individual's current certificate.

(i) An individual currently accredited by a California LEMSA in the EMT Optional Skills contained in Section 100064 of Chapter 2 of this Division may be given credit for training and experience for those topics and scope of practice items contained in Section 100106 of this Chapter. The LEMSA shall evaluate prior training and competence in the EMT Optional Skills and determine what, if any, supplemental training and certification testing is required for an individual to be certified as an Advanced EMT. This provision will sunset twelve (12) months after this Chapter becomes effective.

(j) The Advanced EMT Certifying Entity shall issue a wallet-sized certificate card to eligible individuals, using the single Authority approved wallet-sized certificate card format. The wallet-sized certificate card shall contain the information contained in Section 100344(c) of Chapter 10 of this Division.
(k) All California issued EMT and Advanced EMT wallet-sized certificate cards shall be printed by the Advanced EMT Certifying Entity using the central registry criteria, pursuant to Chapter 10 of this Division. Upon the written request of an Advanced EMT Certifying Entity, the Authority shall print and issue an EMT or Advanced EMT wallet-sized certificate card for the Advanced EMT Certifying Entity.

(l) The effective date of certification, shall be the date the individual satisfactorily completes all certification requirements and has applied for certification. Certification as an Advanced EMT shall be valid for a maximum of two (2) years from the effective date of certification. The certification expiration date shall be the final day of the month of the two (2) year period.

(m) An individual currently certified as an Advanced EMT by the provisions of this section is deemed to be certified as an EMT with no further testing required.

(n) The Advanced EMT shall be responsible for notifying the Advanced EMT Certifying Entity of her/his proper and current mailing address and shall notify the Advanced EMT Certifying Entity in writing within thirty (30) calendar days of any and all changes of the mailing address, giving both the old and the new address, and Advanced EMT registry number.

(o) The Advanced EMT Certifying Entity shall issue, within forty-five (45) calendar days of receipt of a complete application as specified in Section 100123(j), a wallet-sized Advanced EMT certificate card to eligible individuals who apply for an Advanced EMT certificate and successfully complete the Advanced EMT certification requirements.

(p) An Advanced EMT shall only be certified by one (1) Advanced EMT Certifying Entity during a certification period.

NOTE: Authority cited: Sections 1797.107, 1797.171 and 1797.175, Health and Safety Code. Reference: Sections 1797.61, 1797.82, 1797.118, 1797.171, 1797.175, 1797.177, 1797.184, 1797.210, and 1797.212, Health and Safety Code.

§ 100124. Advanced EMT Recertification.
In order to recertify, an Advanced EMT shall:
(a) Possess a current Advanced EMT Certification issued in California.
(b) Obtain at least thirty-six (36) hours of continuing education hours (CEH) from an approved continuing education (CE) provider in accordance with the provisions contained in the Prehospital Continuing Education Chapter, Chapter 11 of this Division.
(c) Complete an application form that contains this statement, “I hereby certify under penalty of perjury that all information on this application is true and correct to the best of my knowledge and belief, and I understand that any falsification or omission of material facts may cause forfeiture on my part of all rights to Advanced EMT certification in the state of California. I understand all information on this application is subject to verification, and I hereby give my express permission for this certifying entity to contact any person or agency for information related to my role and function as an Advanced EMT in California.”
(d) Disclose any certification or licensure action against an EMT, Advanced EMT, EMT-II certificate or a Paramedic license or any denial of certification by a LEMSA or in the case of Paramedic licensure, a denial by the Authority.
(e) Starting July 1, 2010, complete the criminal history background check requirements as specified in Article 4, Chapter 10 of this Division.
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(f) Submit a completed Advanced EMT Skills Competency Verification Form, EMSA-AEMT SCVF (01/07) incorporated herein by reference. Skills competency shall be verified by direct observation of an actual or simulated patient contact. Skills competency shall be verified by an individual who is currently certified or licensed as an Advanced EMT, Paramedic, Registered Nurse, Physician Assistant, or Physician and who shall be designated as part of a skills competency verification process approved by the LEMSA. The skills requiring verification of competency are:

1. Injection (IM or SQ)
2. Peripheral IV
3. IV Push Medication
4. Inhaled medications
5. Blood Glucose Determination
6. Perilaryngeal Airway Adjunct

(g) If the Advanced EMT recertification requirements are met within six (6) months prior to the expiration date, the Advanced EMT Certifying Entity shall make the effective date of certification the date immediately following the expiration date of the current certificate. The certification expiration date will be the final day of the final month of the two (2) year period.

(h) If the Advanced EMT recertification requirements are met greater than six (6) months prior to the expiration date, the Advanced EMT Certifying Entity shall make the effective date of certification the date the individual satisfactorily completes all certification requirements and has applied for certification. The certification expiration date shall not exceed two (2) years and shall be the final day of the final month of the two (2) year period.

(i) An individual who is deployed for active duty with a branch of the Armed Forces of the United States, whose Advanced EMT or EMT-II certificate expires during the time the individual is on active duty or less than six (6) months from the date the individual is deactivated/released from active duty, may be given an extension of the expiration date of his/her Advanced EMT certificate for up to six (6) months from the date of the individual’s deactivation/release from active duty in order to meet the renewal requirements for his/her Advanced EMT certificate upon compliance with the following provisions:

1. Provide documentation from the respective branch of the Armed Forces of the United States verifying the individual’s dates of activation and deactivation/release from active duty.
2. If there is no lapse in certification, meet the requirements of subsection (a) through (f) of this Section. If there is a lapse in certification, meet the requirements of Section 100125 of this Chapter.
3. Provide documentation showing that the CE activities submitted for the certification renewal period were taken not earlier than thirty (30) days prior to the effective date of the individual’s Advanced EMT or EMT-II certificate that was valid when he/she was activated for duty and not later than six (6) months from the date of deactivation/release from active duty.

(A) For an individual whose active duty required him/her to use his/her Advanced EMT or EMT-II skills, credit may be given for documented training that meets the requirements of Chapter 11, EMS CE Regulations (Division 9, Title 22, California Code
of Regulations) while the individual was on active duty. The documentation shall include verification from the individual’s Commanding Officer attesting to the classes attended.

(j) The Advanced EMT Certifying Entity shall issue a wallet-sized certificate card to eligible individuals who apply for Advanced EMT recertification. The wallet-sized certificate card shall contain the information specified in Section 100123 (j).

NOTE: Authority cited: Sections 1797.107, 1797.171 and 1797.175, Health and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.82, 1797.118, 1797.171, 1797.175, 1797.184, 1797.210, 1797.212, and 1797.214, Health and Safety Code; and United States Code, Title 10, Subtitle A, Chapter 1, Section 101.

§ 100125. Advanced EMT Recertification After Lapse in Certification.

(a) In order to be eligible for recertification, for an individual whose Advanced EMT Certification has lapsed, the following requirements shall apply:

(1) For a lapse of less than six (6) months, the individual shall comply with the requirements contained in Section 100124 (b), (c), (d), (e) and (f) of this Chapter.

(2) For a lapse of six (6) months or more, but less than twelve (12) months, the individual shall comply with the requirements of Section 100124 (b), (c), (d), (e) and (f) of this Chapter, and complete an additional twelve (12) hours of continuing education for a total of forty-eight (48) hours of training.

(3) For a lapse of twelve (12) months or more, but less than twenty-four (24) months, the individual shall comply with the requirements of Section 100124 (b), (c), (d), (e) and (f) of this Chapter and complete an additional twenty-four (24) hours of continuing education for a total of sixty (60) hours of training and the individual shall pass the written and skills certification exam as specified in Section 100123 (a) (3).

(4) For a lapse of greater than twenty-four (24) months, the individual shall complete an entire Advanced EMT course and comply with the requirements of Section 100123 (a).

(5) Individuals who are a member of the reserves and are deployed for active duty with a branch of the Armed Forces of the United States, whose Advanced EMT or EMT-II certificate expires during the time they are on active duty may be given an extension of the expiration date of their Advanced EMT or EMT-II certificate for up to six (6) months from the date of their deactivation/release from active duty in order to meet the renewal requirements for their Advanced EMT certificate upon compliance with the provisions of Section 100124 (i) of this Chapter and the requirements of subsection (a) of this section.

(b) The effective date of recertification shall be the date the individual satisfactorily completes all certification requirements and has applied for recertification. The certification expiration date shall be the final day of the final month of the two (2) year period.

(c) The Advanced EMT Certifying Entity shall issue a wallet-sized certificate card to eligible individuals who apply for recertification and successfully complete the recertification requirements. The certificate shall contain the information specified in Section 100344(c) of Chapter 10 of this Division.

NOTE: Authority cited: Sections 1797.107, 1797.171 and 1797.175, Health and Safety Code. Reference: Sections 1797.61, 1797.62, 1797.82, 1797.118, 1797.171, 1797.175, 1797.184, 1797.210, and 1797.212, Health and Safety Code; and United States Code, Title 10, Subtitle A, Chapter 1, Section 101.
Article 5. Operational Requirements.

§ 100126. Advanced EMT Service Provider.
(a) A LEMSA with a LALS system, shall establish policies and procedures for the approval, designation and evaluation through its EMSQIP of Advanced EMT service provider(s). These policies and procedures shall include provisions requiring an Advanced EMT to be affiliated with an approved Advanced EMT service provider in order to perform the scope of practice specified in this Chapter.
(b) An approved Advanced EMT service provider shall:
(1) Provide emergency medical service response on a continuous twenty-four (24) hours per day basis unless otherwise specified by the LEMSA, in which case there shall be adequate justification for the exemption (e.g., lifeguards, ski patrol, personnel, etc.).
(2) Have and agree to utilize and maintain telecommunications as specified by the LEMSA.
(3) Maintain a drug and solution inventory, basic and LALS medical equipment and supplies as specified by the LEMSA.
(4) Have a written agreement with the LEMSA to participate in the LALS program and to comply with all applicable State regulations, and local policies and procedures, including participation in the LEMSA’s EMSQIP as specified in Section 100107.1.
(5) Be responsible for assessing the current knowledge of their Advanced EMTs in local policies, procedures, and protocols and for assessing their Advanced EMTs skills competency.
(c) No Advanced EMT service provider shall advertise itself as providing ALS or Paramedic services unless it does, in fact, routinely provide ALS or Paramedic services on a continuous twenty-four (24) hours per day basis and meets the requirements of subsection (b) of this section.
(d) For Advanced EMT service providers, no responding unit shall advertise itself as providing ALS services unless it does, in fact, provide ALS services and meets the requirements of subsection (b) of this section.
(e) The LEMSA may deny, suspend, or revoke the approval of an Advanced EMT service provider for failure to comply with applicable policies, procedures, and regulations.

Reference: Sections 1797.2, 1797.82, 1797.171, 1797.178, 1797.180, 1797.204 and 1797.218, Health and Safety Code.

§ 100127. Advanced EMT and/or EMT-II Base Hospital.
(a) A LEMSA with a LALS system shall designate an Advanced EMT and/or EMT-II base hospital(s) or alternative base stations to provide medical direction and supervision of Advanced EMT personnel. A Paramedic base hospital may serve as an Advanced EMT and/or EMT-II base hospital.
(b) A designated Advanced EMT and/or EMT-II base hospital shall:
(1) Be licensed by the California Department of Public Health as a general acute care hospital.
(2) Have a special permit for Basic or Comprehensive Emergency Medical Service pursuant to the provisions of Division 5, or have been granted approval by the Authority for utilization as a base hospital pursuant to the provisions of Section 1798.101 of the Health and Safety Code.

(3) Be accredited by a Centers for Medicare and Medicaid Services approved deeming authority.

(4) Have and agree to utilize and maintain two-way telecommunications as specified by the LEMSA, capable of direct two-way voice communication with the Advanced EMT field units assigned to the hospital.

(5) Have a written agreement with the LEMSA indicating the concurrence of hospital administration, medical staff and emergency department staff to meet the requirements for program participation as specified in this Chapter and by the LEMSA’s policies and procedures.

(6) Assure that a Physician, licensed in the State of California, experienced in emergency medical care, is assigned to the emergency department, and is available at all times to provide immediate medical direction to the Mobile Intensive Care Nurse, or Advanced EMT personnel. This Physician shall have experience in and knowledge of base hospital radio operations and LEMSA policies, procedures and protocols.

(7) Assure that the nurses giving radio direction to Advanced EMT personnel are trained and certified as Mobile Intensive Care Nurses by the medical director of the LEMSA.

(8) Designate an Advanced EMT base hospital medical director who shall be a Physician on the hospital staff, licensed in the State of California who is certified or prepared for certification by the American Board of Emergency Medicine. The requirement of board certification or prepared for certification may be waived by the medical director of the LEMSA. This Physician shall be regularly assigned to the emergency department, have experience in and knowledge of base hospital telecommunications and LEMSA policies and procedures and shall be responsible for functions of the base hospital including quality improvement as designated by the medical director of the LEMSA.

(9) Identify a base hospital coordinator who is a California licensed Registered Nurse with experience in and knowledge of base hospital operations and LEMSA policies and procedures and is a prehospital liaison to the LEMSA.

(10) Ensure that a mechanism exists for replacing medical supplies and equipment used by LALS personnel during treatment of patients according to policies and procedures established by the LEMSA.

(11) Ensure a mechanism exists for initial supply and replacement of controlled substances administered by LALS personnel during treatment of patients according to policies and procedures established by the LEMSA.

(12) Provide for CE in accordance with the policies and procedures of the LEMSA.

(13) Agree to participate in the LEMSA’s EMSQIP, which may include making available all relevant records for program monitoring and evaluation.

(c) If no qualified base hospital is available to provide medical direction, the medical director of the LEMSA may approve an alternative base station pursuant to Health and Safety Code Section 1798.105.

(d) The LEMSA may deny, suspend, or revoke the approval of a base hospital for failure to comply with any applicable policies, procedures, and regulations.
§ 100128. Medical Control.
The medical director of a LEMSA shall establish and maintain medical control in the following manner:
(a) Prospectively, by assuring the development of written medical policies and procedures, to include at a minimum:
(1) Treatment protocols that encompass the Advanced EMT scope of practice.
(2) Local medical control policies and procedures as they pertain to the Advanced EMT base hospitals, alternative base stations, patient destination, and the LEMSA.
(3) Criteria for initiating specified emergency treatments on standing orders, which are consistent with this Chapter.
(4) Requirements to be followed when it is determined that the patient will not require transport to the hospital by ambulance or when the patient refuses transport.
(5) Requirements for initiating, completing, reviewing and retaining patient care records as specified in this Chapter. These requirements shall address, but not be limited to:
(A) Initiation of a record for every patient contact.
(B) Responsibilities for record completion.
(C) Responsibilities for record review and evaluation.
(D) Responsibilities for record retention.
(E) Record distribution to include the LEMSA, receiving hospital, Advanced EMT and/or EMT-II base hospital, alternative base station, and Advanced EMT and/or EMT-II service provider.
(b) Establish policies which provide for direct voice communication between an Advanced EMT and/or EMT-II and base hospital Physician or Mobile Intensive Care Nurse, as needed.
(c) Retrospectively, by providing for organized evaluation and CE for Advanced EMT and/or EMT-II personnel. This shall include, but need not be limited to:
(1) Review by a base hospital Physician or Mobile Intensive Care Nurse of the appropriateness and adequacy of ALS procedures initiated and decisions regarding transport.
(2) Maintenance of records of communications between the service provider(s) and the base hospital through audio recordings and through emergency department communication logs sufficient to allow for medical control and continuing education of the Advanced EMT and/or EMT-II.
(3) Organized field care audit(s).
(4) Organized opportunities for CE including maintenance and proficiency of skills specified in this Chapter.
(d) In circumstances where use of a base hospital as defined in Section 100127 is precluded, alternative arrangements for complying with the requirements of this Section may be instituted by the medical director of the LEMSA if approved by the Authority.
Article 6. Record Keeping and Fees

§ 100129. Record Keeping.
(a) Each Advanced EMT Approving Authority shall maintain a list of approved training programs within its jurisdiction and provide the Authority annually with the names, addresses, phone number, course director, frequency of classes, student eligibility requirements and cost of each class and date of expiration for each approved program. The Authority shall be notified of any changes in the list of approved training programs as such occurs.
(b) Each Advanced EMT Approving Authority shall maintain a list of current Advanced EMT program medical directors, course directors and principal instructors within its jurisdiction.
(c) The Authority shall maintain a record of approved Advanced EMT training programs.
(d) The Advanced EMT is responsible for accurately completing the patient care record referenced in 100128(a)(5) which shall contain, but not be limited to, the following information when such information is available to the Advanced EMT:
   (1) The date and estimated time of incident.
   (2) The time of receipt of the call (available through dispatch records).
   (3) The time of dispatch to the scene.
   (4) Time of unit enroute.
   (5) Time of arrival at the scene.
   (6) The location of the incident.
   (7) The patient's:
      (A) Name;
      (B) age;
      (C) gender;
      (D) weight, if necessary for treatment;
      (E) address;
      (F) chief complaint; and
      (G) vital signs.
   (8) Appropriate physical assessment.
   (9) The emergency care rendered and the patient's response to such treatment.
   (10) Name of designated Physician and/or authorized Registered Nurse issuing orders.
   (11) Patient disposition.
   (12) The time of departure from scene.
   (13) The time of arrival at receiving hospital (if transported).
   (14) The name of receiving facility (if transported).
   (15) The name(s) and unique identifier number(s) of the Advanced EMT(s).
   (16) Signature(s) of Advanced EMT(s).
(e) A LEMSA utilizing computer or other electronic means of collecting and storing the information specified in subsection (d) of this section shall, in consultation with EMS providers, establish policies for the collection, utilization and storage of such data.

§ 100130. Fees.
A LEMSA may establish a schedule of fees for Advanced EMT training program review and approval, Advanced EMT certification, and the Advanced EMT recertification in any amount sufficient to cover the reasonable cost of complying with the provisions of this Chapter.

THIS REGULATION WAS SUPPORTED BY THE PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT. ITS CONTENTS ARE SOLELY THE RESPONSIBILITY OF THE AUTHORS AND DO NOT NECESSARILY REPRESENT THE OFFICIAL VIEWS OF CDC.