

# **EMERGENCY MEDICAL SERVICES PROCEDURE MANUAL**

**December 1, 2017**  
(Replaces September 28, 20017 Version)

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## **TERMS AND CONVENTIONS**

<b>AAMS</b>	means Association of Air Medical Services
<b>AED</b>	means Automatic External Defibrillator
<b>AEMT</b>	means Advanced Emergency Medical Technician
<b>AI/DM</b>	means Administer Immunizations/Dispense Medication
<b>ALS</b>	means Advanced Life Support
<b>APRN</b>	means Advanced Practice Registered Nurse
<b>BCCTPC</b>	means Board for Critical Care Transport Paramedic Certification
<b>BLS</b>	means Basic Life Support
<b>CAAHEP</b>	means Commission on Accreditation of Allied Health Education Programs
<b>CAPCE</b>	means Commission on Accreditation for Pre-Hospital Continuing Education
<b>CCT</b>	means Critical Care Transport
<b>CECBEMS</b>	means Continuing Education Coordinating Board for Emergency Medical Services
<b>CP</b>	means Community Paramedicine
<b>CPR</b>	means Cardiopulmonary Resuscitation
<b>DOT</b>	means U.S. Department of Transportation
<b>EMS</b>	means Emergency Medical Services
<b>EMT</b>	means Emergency Medical Technician
<b>IBSC</b>	means International Board for Specialty Certification
<b>NAC</b>	means Nevada Administrative Code
<b>NAEMSP</b>	means National Association of EMS Physicians
<b>NEMSEC</b>	means National EMS Educator Certification
<b>NHTSA</b>	means National Highway Traffic Safety Administration
<b>NR</b>	means the National Registry of EMTs
<b>NRS</b>	means Nevada Revised Statutes
<b>NSC</b>	means National Standard Curriculum
<b>OEMSTS</b>	means Office of Emergency Medical Services & Trauma System
<b>PA</b>	means Physician Assistant

<b>PHE</b>	means Public Health Emergency
<b>RN</b>	means Registered Nurse
<b>SNHD</b>	means Southern Nevada Health District

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# FOREWORD

The *Emergency Medical Services Procedure Manual* outlines the operational processes and mandatory requirements as set forth in the EMS Regulations adopted by the Board of Health. The manual contains standardized procedures approved by the Southern Nevada Health District Office of Emergency Medical Services & Trauma System (OEMSTS). Changes to the manual must be approved by the OEMSTS. All procedures are to be completed in the order written, unless otherwise directed by the OEMSTS.

All requested provider cards must be signed by the cardholder and meet American Heart Association standards or equivalent, as approved by the OEMSTS. The CPR course must include 1- and 2-man rescuer for the adult, infant and child, and the automated external defibrillator. A copy of a valid class roster is acceptable in lieu of the card. All online classes must include verifiable documentation of the skills component.

From time to time, procedures may be added or revised by the OEMSTS. Additional recommendations are welcomed and appreciated at any time and may be mailed to:

Southern Nevada Health District  
Office of Emergency Medical Services & Trauma System  
P.O. Box 3902  
Las Vegas, Nevada 89127

Questions may be addressed to OEMSTS staff at 702-759-1050.

Or visit our website at <http://www.southernnevadahealthdistrict.org/ems/index.php>

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## Key:

Items in “**Bold**” and in quotations correspond to the name of a procedure.

Items in “*Italics*” and in quotations correspond to the name of a form.

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## DEFINITIONS

When a word or term is capitalized, within the body of this document, it shall have the meaning ascribed to it as defined below. Unless otherwise expressly stated, words not defined herein shall be given their common and ordinary meaning. The words "shall" and "will" are mandatory; and the word "may" is permissive.

**"ADVANCED EMERGENCY MEDICAL TECHNICIAN"** means a Person who is certified by the Health Officer as having satisfactorily completed 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 as a national standard for certification as an Advanced Emergency Medical Technician pursuant to NRS 450B.1915.

**"ADVANCED PRACTICE REGISTERED NURSE"** means a registered nurse who:

- I. Has specialized skill, knowledge and experienced obtained from an organized formal program of training; and
- II. Is licensed by the Nevada State Board of Nursing, and is authorized in special conditions as set forth in NAC 632.254 to 632.295 inclusive, to provide designated services in addition to those which a registered nurse is authorized to perform.

**"AIR AMBULANCE"** means an aircraft especially designed, constructed, modified or equipped to be used for the transportation of injured or sick persons. Air Ambulance does not include any commercial aircraft carrying passengers on regularly scheduled flights.

**"AIR AMBULANCE ATTENDANT"** means a qualified individual licensed by the Health Officer in accordance with subsection 500.100 of EMS Regulations and authorized to provide Emergency Medical Care for an Air Ambulance Service.

**"AIR AMBULANCE SERVICE"** means a Permittee who is authorized by the Health Officer to provide Patient Transport and/or Transfer in an Air Ambulance in accordance with Section 1000 of EMS Regulations.

**"AMBULANCE"** means a motor vehicle which is specifically designed, constructed, equipped and staffed to provide basic, intermediate, or advanced care for one (1) or more:

- I. Sick or injured persons; or
- II. Persons whose medical condition may require special observation during transportation or transfer.

**"AMBULANCE SERVICE"** means a Permittee, including Special Purpose Permit, Critical Care Transport, and Community Paramedicine Services, which is authorized by the Health Officer to provide Patient care, Transport and/or Transfer.

**"APPLICANT"** means a Person who applies for a Permit, Endorsement, License, Certificate or training, under the applicable provisions of EMS Regulations.

**"ATTENDANT"** means a Person responsible for the care of a sick or injured Person in an Ambulance or Air Ambulance, and includes the driver of an Ambulance but not the pilot of an Air Ambulance. An Attendant is classified as a qualified individual licensed by the Health Officer in accordance with EMS Regulations and authorized to:

- I. Provide Emergency Medical Care for an Ambulance Service or Firefighting Agency; or
- II. Provide Community Paramedicine Services for an Ambulance Service, Air Ambulance Service, or Firefighting Agency, if there is an Endorsement on both the Attendant's License and the Agency's Permit to provide such services.

**"AUTHORIZED EMS TRAINING CENTER"** means a public or private agency that is authorized by the Health District to conduct continuing medical education, and initial EMS training programs or refresher EMS training programs, which must meet the standards set forth in NRS 450B, EMS Regulations, and the EMS Procedure Manual.

**“AUTHORIZED ENTITY”** means any public or private entity, other than a public or private school, where allergens capable of causing anaphylaxis may be present on the premises of the entity or in connection with activities conducted by the entity.

**"BOARD"** means the Southern Nevada District Board of Health.

**"CERTIFICATE"** means a Nevada Certificate issued by the Health Officer as authorized by NRS 450B.0605, certifying successful completion of training and testing at the level identified on the Certificate. A Certificate does not authorize the holder to function as an Attendant, pursuant to EMS Regulations.

**“CLASS”** means continuing education subject matter taught to increase knowledge on a particular subject.

**“COMMUNITY PARAMEDICINE ENDORSEMENT”** means an Attendant who is endorsed by the Health Officer as having satisfactorily completed an approved Course of instruction in Community Paramedicine Services.

**“COMMUNITY PARAMEDICINE SERVICES”** means services provided by an EMT, AEMT or Paramedic to Patients who do not require emergency medical transportation, and provided in a manner that is integrated with the health care and social services resources available in the community.

**“COMMUNITY PARAMEDICINE VEHICLE”** means any vehicle owned by a Permittee which is used for the purpose of providing Community Paramedicine Services.

**“COURSE”** means a complete series of study that follows a standard curriculum for the purpose of certification or recertification.

**"COURSE MEDICAL DIRECTOR"** means a Physician who has accepted the responsibility for directing the conduct of training Courses and for evaluating the performance of students in such Courses.

**“CRITICAL CARE PARAMEDIC”** means a Paramedic who is endorsed by the Health Officer as having satisfactorily completed an approved Course of instruction in Critical Care Transport in accordance with subsection 400.050 of EMS Regulations.

**“CRITICAL CARE TRANSPORT”** means the Transfer or Transport of a Patient in an appropriately equipped Ambulance or Air Ambulance, as defined by the Permittee’s Medical Director, whose medical condition may require special observation or treatment.

**"DEDICATED ADVANCED LIFE SUPPORT AMBULANCE"** means an Ambulance equipped to provide advanced life support that:

- I. Is capable of transporting a Patient from a Special Event to a hospital but, upon delivering the Patient, immediately returns to the site of the Special Event; and
- II. Is staffed in accordance with EMS Regulations.

**“DISTANCE EDUCATION”** means a program in which lectures are broadcast or classes are conducted by correspondence or via the Internet or other network technologies.

**“DISTRICT”** means the Southern Nevada Health District, its officers and authorized agents.

**“DISTRICT PROCEDURE”** means Southern Nevada Health District standard operating procedure.

**"EMERGENCY"** means any actual or self-perceived event which threatens life, limb, or well-being of an individual in such a manner that a need for immediate medical care is created.

**"EMERGENCY MEDICAL CARE"** means that Emergency Medical Technician, Advanced Emergency Medical Technician, or Paramedic care given to a Patient in an Emergency before the Patient arrives at a Receiving Facility and until such reasonable transition of care, as set forth in protocol or procedure, is accomplished.

**"EMERGENCY MEDICAL SERVICES"** means a system comprised of a chain of services linked together to provide Emergency Medical Care for the Patient at the scene of an Emergency, during Transport or Transfer, and upon entry at the Receiving Facility, and is sometimes referred to as EMS or EMSS.

**"EMERGENCY MEDICAL TECHNICIAN (EMT)"** means a Person who is certified by the Health Officer as having satisfactorily completed 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 as a national standard for certification as an Emergency Medical Technician pursuant to NRS 450B.1905.

**"EMS REGISTERED NURSE" or "EMS RN"** means a Person who is certified by the Nevada State Board of Nursing, in accordance with NRS 450B.160, NAC 632.225, and NAC 632.565 as having met the requirements to function as an Attendant.

**"EMS INSTRUCTOR I"** means a Person who holds an Endorsement to conduct EMS training in EMS skills, or evaluate Field performance, in compliance with standards set forth in EMS Regulations and the EMS Procedure Manual.

**"EMS INSTRUCTOR II"** means a Person who holds an Endorsement to conduct EMS Courses or Classes in compliance with standards set forth in EMS Regulations and the EMS Procedure Manual. An EMS Instructor II may also perform all duties of an EMS Instructor I.

**"ENDORSEMENT"** means a provision added to a Certificate, License, or Permit altering the scope of practice or authorization, or a letter and/or identification card authorizing specific activities within the EMS System.

**"FIELD"** means experience obtained while working as a credentialed Attendant responsible for the care of a sick or injured Person in an Ambulance, Air Ambulance, or Firefighting Agency vehicle with an EMS agency that responds to 911 calls.

**"FIREFIGHTING AGENCY"** means a fire department or fire protection district of the State or a political subdivision which is permitted by the Health District to provide:

- I. Emergency Medical Care to sick or injured persons at the scene of an Emergency; or
- II. At the scene of an Emergency and while transporting those persons to a Receiving Facility; or
- III. Community Paramedicine Services, but only if the Firefighting Agency has obtained an Endorsement on the Permit to provide such services pursuant to this procedure manual.

**"FIREFIGHTING AGENCY VEHICLE "** means any vehicle owned by a permitted Firefighting Agency which is used for the purpose of providing Emergency Medical Care at the scene of an Emergency, except that a Firefighting Agency Vehicle may be used to Transport or Transfer a Patient only if such vehicle meets the requirements as defined in EMS Regulations 100.027.

**"FIXED WING AIR AMBULANCE"** means a fixed wing type aircraft that is used as an Air Ambulance to Transfer Patients.

**"HEALTH DISTRICT" or "DISTRICT"** means the Southern Nevada Health District, its officers and authorized agents.

**"HEALTH DISTRICT OFFICE OF EMSTS" or "OEMSTS"** means the staff of the Health District charged with the responsibility of administering the Emergency Medical Services & Trauma System in Clark County.

**"HEALTH OFFICER"** means the District Health Officer of the Southern Nevada Health District or the District Health Officer's designee.

**"INTERN"** means a Person placed on an Ambulance, Air Ambulance, or Firefighting Agency Vehicle for the purpose of gaining supervised, practical experience.

**"LETTER OF AUTHORIZATION"** means a letter issued by the District that authorizes a Person to conduct EMS training at the level identified in the letter. A Letter of Authorization is not transferrable to another person, date, or location.

**"LICENSE"** means the License issued by the Health Officer to a Person, authorizing the holder to perform the duties of an Attendant or Air Ambulance Attendant, in accordance with EMS Regulations.

**"LICENSEE"** means an individual who holds a License issued in accordance with EMS Regulations.

**"MASTER EMS INSTRUCTOR"** means a Person who holds an Endorsement to conduct EMS Instructor Courses in compliance with standards set forth in EMS Regulations and the EMS Procedure Manual.

**"MEDICAL ADVISORY BOARD"** means a board appointed by the Health Officer which advises the Health Officer and Board on matters pertaining to the Emergency Medical Services System in Clark County.

**"MEDICAL DIRECTOR"** means a Physician who is specifically designated by an Authorized EMS Training Center or Permittee and has accepted the responsibility for providing medical direction to the Permittee's Ambulance, Air Ambulance, Critical Care Transport, Firefighting Agency or Special Purpose Permit Service.

**"NATIONAL REGISTRY"** means the agency known as the National Registry of Emergency Medical Technicians based in Columbus, Ohio, that prepares and administers standardized testing for EMTs, AEMTs and Paramedics for national registration.

**"OFFICIAL ADVANCED EMT DRUG INVENTORY"** means the inventory authorized by the Health Officer which lists the approved drugs for administration by AEMT Attendants.

**"OFFICIAL EMT DRUG INVENTORY"** means the inventory authorized by the Health Officer which lists the approved drugs for administration by EMT Attendants.

**"OFFICIAL GROUND AMBULANCE, AIR AMBULANCE AND FIREFIGHTING AGENCY INVENTORY"** means the inventory authorized by the Health Officer which lists the minimum standards and additional requirements for medical and nonmedical equipment and supplies to be carried in Ambulances, Air Ambulances, and Firefighting Agency vehicles.

**"OFFICIAL PARAMEDIC DRUG INVENTORY"** means the inventory authorized by the Health Officer which lists the approved drugs for administration by Paramedic Attendants.

**"OPERATIONS DIRECTOR"** means a Person specifically designated by a Permittee and has accepted the responsibility for operational decisions on behalf of that Permittee.

**"PARAMEDIC"** means a Person who is certified by the Health Officer as having satisfactorily completed 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 as a national standard for certification as a Paramedic pursuant to NRS 450B.195.

**"PATIENT"** means any individual that meets at least one of the following criteria: 1) A person who has a complaint or mechanism suggestive of potential illness or injury; 2) A person who has obvious evidence of illness or injury; or 3) A person identified by an informed 2<sup>nd</sup> or 3<sup>rd</sup> party caller as requiring evaluation for potential illness or injury.

**"PERMIT"** means a permit issued by the Health Officer to a Person authorizing the provision of Emergency Medical Care in Clark County through an Ambulance Service, Air Ambulance Service, or Firefighting Agency:

- I. At the scene of an Emergency; and
- II. To provide Community Paramedicine Services, but only if the holder of the Permit has obtained an Endorsement on the Permit to provide such services pursuant to EMS Regulations.

**"PERMITTEE"** means the Person who holds a Permit issued pursuant to EMS Regulations.

**"PERSON"** means any natural person, partnership, corporation, or other public or private entity.

**"PHYSICIAN"** means a Person licensed by the Nevada State Board of Medical Examiners or the Nevada State Board of Osteopathic Medical Examiners to practice medicine in Nevada.

- "PHYSICIAN ADVISOR"** means a Physician who has verified, on a form provided and approved by the Health Officer, the ability of a Registered Nurse to provide Emergency Medical Care in accordance with NAC 632.225 and has issued written policies or protocols, including Critical Care, for the performance of those procedures.
- "PHYSICIAN ASSISTANT"** means a Person licensed by the Board of Medical Examiners of the State of Nevada to perform medical services under the supervision of a supervising Physician.
- "PHYSICIAN SUPERVISOR"** means a Physician who has verified, on a form provided and approved by the Health Officer, the ability of a Physician Assistant to provide Emergency Medical Care in accordance with NAC 630.370. The performance of medical services must be within the scope of the specialty of the supervising Physician.
- "PROVISIONAL LICENSE"** means a license issued by the Health Officer with specific limitations. A Provisional License may be issued for a period not to exceed twelve (12) months and is not renewable per NRS 450B.190.
- "PUBLIC HEALTH EMERGENCY" or "PHE"** means an occurrence or threatened occurrence for which, in the determination of the Governor, the assistance of state agencies is needed to supplement the efforts and capabilities of political subdivisions to save lives, protect property and protect the health and safety of persons in this State, or to avert the threat of damage to property or injury to, or the death of persons in this State.
- "QUALITY ASSURANCE DIRECTOR"** means that Person who is specifically designated by a Permittee and has accepted the responsibility for the duties specified in subsections 900.050, 1000.050, and 1100.050 of EMS Regulations.
- "RECEIVING FACILITY"** means a medical facility, as approved by the Health Officer.
- "REGISTERED NURSE"** means a Person who is licensed by the Nevada State Board of Nursing to practice professional nursing in Nevada under NRS 632.019.
- "REPORTS"** means any record required by the Health Officer as set forth in EMS Regulations.
- "ROTORWING AIR AMBULANCE"** means a helicopter type aircraft that is used as an Air Ambulance to Transfer or Transport patients.
- "SECONDARY EMS INSTRUCTOR"** means a Person who holds an Endorsement to conduct training in EMS skills, provide periodic lectures as part of an EMS training program under the supervision of a Primary or Master EMS Instructor, or evaluate Field performance, in compliance with standards set forth in EMS Regulations and the EMS Procedure Manual. (**Note:** This level of endorsement will sunset on September 28, 2019.)
- "SPECIAL PURPOSE PERMIT SERVICE"** means a Permittee who is authorized by the Health Officer to provide standby medical coverage in accordance with EMS Regulations.
- "UNIT"** means an Ambulance, Air Ambulance, or Firefighting Agency Vehicle.
- "UNPROFESSIONAL CONDUCT"** means that failure of a Person while providing Emergency Medical Care 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 Clark County. Examples of such unprofessional conduct, demeanor and attitude would include, without limitation, the use of obscene, abusive or threatening language, berating, belittling or inappropriate critical remarks or statements regarding others, such as permittees or licensees and other professionals participating in the provision of Emergency Medical Care; use of unreasonable force unnecessarily increasing or inflicting pain upon a Patient; callous disregard for personal feelings or sensibilities of Patients, their friends, families or other persons present while care is being rendered.

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# **TRAINING PROCEDURES**

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**DISTRICT PROCEDURE FOR  
INITIAL EDUCATION**  
(EMS Regulations Section 200)

**PURPOSE:** To establish a standard guideline for approving initial training conducted within the Clark County EMS System.

**DEFINITION:** For training centers authorized to conduct initial EMS courses which, upon successful completion, results in a certificate of completion from an accredited institution.

**PROCEDURE:**

I. For initial training, all OEMSTS approved EMS Training Centers must submit the required documentation\* at least thirty (30) days prior to the Course start date.

A. The first time the Course is offered, submit the SNHD “*Notice of Intent to Conduct Initial EMS Training Course*” form and a copy of the Course lesson plan which indicates:

1. The Course title;
2. The date and time of the topic(s) to be discussed;
3. A detailed outline of each topic;
4. The time allotted for each topic;
5. The section/lesson that the topic fits into;
6. The method of presentation; and
7. The instructor(s) names.

**Note:** Any modifications to previously approved Courses need to go through a new approval process, which includes a re-submission of 1-7 above.

B. Each time the Course is offered, submit a copy of the Course schedule, in its entirety, which indicates:

1. The Course title;
2. The date and time of the topic(s) to be discussed;
3. The time allotted for each topic;
4. The section/lesson that the topic fits into; and
5. The instructor(s) names.

II. An EMS Instructor II or Master EMS Instructor must be in the classroom to witness all instruction that takes place.

III. All instruction must be by a Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor unless exempted under District EMS Regulations Section 400.550. The expertise of the exempted professional is to be documented and will be assessed for appropriate faculty. The OEMSTS will not authorize a proposed Course with inadequate faculty.

IV. An EMS Instructor may not teach Courses above his/her own level of certification.

V. Upon successful completion of the training program, the Course coordinator shall submit the “*EMS Course Completion Record*” to the OEMSTS within ten (10) days of Course completion.

\* **Note:** All documentation must be hand-delivered to the front office or emailed to [ems@snhd.org](mailto:ems@snhd.org).

- VI. All initial training Courses must have “*EMS Course/Instructor Evaluation*” forms completed by each student. Evaluations must be submitted to the OEMSTS within ten (10) days of Course completion.
- VII. All EMS Instructors will be given full CME credit for an EMS Course or portion of the Course they teach at the level of their certification. Credit for a given Class/Course will only be awarded “one time” per certification period, not each time it is taught.
- VIII. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Course.
- IX. Permitted EMS agencies and training centers must maintain CME files for their employees/students that include copies of rosters, tests, and skills proficiency records. Documentation of training must be kept on file for a minimum of three (3) years.
- X. Any exception to the above procedure must be based upon a written appeal to the Health Officer.

# **DISTRICT PROCEDURE FOR CONTINUING MEDICAL EDUCATION (CME)**

(EMS Regulations Section 200)

**PURPOSE:** To establish a standard guideline for approving continuing medical education training conducted within the Clark County EMS System.

**DEFINITION:** For training centers authorized to conduct EMS Classes that offer continuing medical education to EMS providers.

**PROCEDURE:**

I. For CME training, all OEMSTS approved EMS Training Centers must submit the required documentation at least seven (7) days prior to the Class start date.

A. The first time the Class is offered, submit the SNHD “*Notice of Intent to Conduct Continuing Medical Education (CME) Class*” form\* and a copy of the Class lesson plan which indicates:

1. Class title;
2. The date and time of the topic(s) to be discussed;
3. A detailed outline of each topic;
4. The time allotted for each topic;
5. The category that the topic fits into;
6. The method of presentation; and
7. The instructor(s) names.

**Note: Any modifications to previously approved Classes need to go through a new approval process, which includes a re-submission of 1-7 above.**

B. Each time the Class is offered, submit a copy of the Class schedule, in its entirety, which indicates:

1. Class title;
2. The date and time of the topic(s) to be discussed;
3. The time allotted for each topic;
4. The category that the topic fits into; and
5. The instructor(s) names.

II. An EMS Instructor II or Master EMS Instructor must be in the classroom to witness all instruction that takes place.

III. All instruction must be by a Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor unless exempted under District EMS Regulations Section 400.550. The expertise of the exempted professional is to be documented and will be assessed for appropriate faculty. The OEMSTS will not authorize a proposed Course with inadequate faculty.

IV. An EMS Instructor may not teach Classes above his/her own level of certification.

V. All EMS Instructors will be given full CME credit for an EMS Class or portion of the Class they teach at the level of their certification. Credit for a given Class will only be awarded “one time” per certification period, not each time it is taught.

\* **Note:** All documentation must be hand-delivered to the front office, emailed to [ems@snhd.org](mailto:ems@snhd.org), or via alternative method(s) as determined by the OEMSTS.

- VI. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Class.
- VII. Permitted EMS agencies and training centers must maintain CME files for their employees/students that include copies of rosters, tests, and skills proficiency records. Documentation of training must be kept on file for a minimum of three (3) years.
- VIII. The OEMSTS will audit 10% of the CME documentation submitted by each permitted Agency.

Any exception to the above procedure must be based upon a written appeal to the Health Officer.

**Note:** CME submitted by an entity other than an Authorized EMS Training Center will be approved on a case-by-case basis. There may be a fee charged for each submission, apart from community service CME offered free to the public.

# **DISTRICT PROCEDURE FOR EMT TRAINING**

(EMS Regulations Section 200.200 & 200.210)

- PURPOSE:** To standardize EMT training programs conducted within the Clark County EMS System.
- DEFINITION:** A program of training in procedures and skills for Emergency Medical Care as prepared and authorized by NHTSA of the United States DOT as a national standard for certification as an Emergency Medical Technician pursuant to NRS 450B.1905.
- PREREQUISITE:** Current CPR certification.
- PROCEDURE:**
- I. All EMT Courses must include Weapons of Mass Destruction (WMD) training. WMD training must include:
    - Introduction to Terrorism
    - Chemical
    - Biological (including Syndromic Surveillance & Health Alert Network)
    - Radiological/Nuclear Agents
    - Personal Protective Equipment
    - Decontamination
  - II. Upon successful completion of the training program, the Course coordinator shall submit the following to the OEMSTS within ten (10) days of Course completion:
    - A. “*EMS Course Completion Record*” that includes the attestation by the Course coordinator of successful completion of the Course, including the skills portion.
    - B. “*EMS Course/Instructor Evaluation*” forms.
  - III. If the training center’s intent is to have the student attain National Registry EMT certification:

**Note:** The National Registry EMT psychomotor examination remains valid for a 12 -month period upon date of completion.

The psychomotor and cognitive examinations must be passed within 12 months of each other.

    - A. The Course coordinator shall submit the National Registry EMT psychomotor examination to the OEMSTS within ten (10) days of Course completion.
    - B. The student shall schedule and successfully pass the National Registry EMT cognitive examination per the National Registry procedure, within two years of Course completion.
    - C. Upon successful completion of the National Registry EMT psychomotor and cognitive examinations, the student will be eligible to apply for EMT certification in accordance with the “**District Procedure for Certification via Reciprocity.**”
  - IV. If the training center’s intent is to have the student attain Clark County certification:
    - A. The student shall schedule and successfully pass the Health District approved EMT Certification Examination, within two years of Course completion.
    - B. Upon successful completion of the Health District approved practical and EMT Certification Examination, the student will be eligible to apply for EMT certification in accordance with the “**District Procedure for Initial Certification/Licensure.**”

**Note:** The student will have a maximum of six (6) attempts to pass either the National Registry EMT certification examination or the Clark County EMT certification examination. If after six attempts the student is unable to successfully pass either

examination, the student will not be eligible for EMT certification in Clark County unless he/she retakes the entire EMT Course.

**DISTRICT PROCEDURE FOR  
ADVANCED EMT TRAINING**  
(EMS Regulations Section 200.300 & 200.310)

**PURPOSE:** To standardize Advanced EMT training programs conducted within the Clark County EMS System.

**DEFINITION:** A program of training in procedures and skills for Emergency Medical Care as prepared and authorized by NHTSA of the United States DOT as a national standard for certification as an Advanced Emergency Medical Technician pursuant to NRS 450B.191.

**ELIGIBILITY:** Current certification as an EMT. **Note:** The student must maintain EMT certification throughout the AEMT course.

**PREREQUISITE:** Current certification in CPR.

**PROCEDURE:**

- I. The Course coordinator must submit the Course roster to the OEMSTS within 14 (fourteen) days after Course start date. If the student is not Clark County certified, a copy of the student's current National Registry, State of Nevada, or out-of-state EMT Certificate must be submitted.
- II. Upon successful completion of the training program, the Course coordinator shall submit the following to the OEMSTS within ten (10) days of Course completion:
  - A. "*EMS Course Completion Record*" that includes an attestation by the Course coordinator of successful completion of the skills portion of the Course.
  - B. "*EMS Course/Instructor Evaluation*" forms.
- III. If the training center's intent is to have the student attain National Registry AEMT certification:

**Note:** The National Registry AEMT psychomotor examination remains valid for a 12 -month period upon date of completion.

The psychomotor and cognitive examinations must be passed within 12 months of each other.

  - A. The Authorized EMS Training Center may facilitate an Advanced Level National Registry psychomotor examination; and
  - B. The student shall schedule to take the National Registry AEMT cognitive examination per the National Registry procedure, within two years of Course completion.
  - C. Upon successful completion of the National Registry AEMT psychomotor and cognitive examinations, the student will be eligible to apply for AEMT certification in accordance with the "**District Procedure for Certification via Reciprocity.**"
- IV. If the training center's intent is to have the student attain Clark County certification:
  - A. The student shall schedule and successfully pass the Health District approved AEMT Certification Examination, within two years of Course completion.
  - B. Upon successful completion of the Health District approved practical and AEMT certification examination, the student will be eligible to apply for AEMT

certification in accordance with the **“District Procedure for Initial Certification/Licensure.”**

**Note:** The student will have a maximum of six (6) attempts to pass either the National Registry AEMT cognitive examination or the Clark County AEMT certification examination. If after six attempts the student is unable to successfully pass either examination, the student will not be eligible for AEMT certification in Clark County unless he/she retakes the entire AEMT Course.



**DISTRICT PROCEDURE FOR  
PARAMEDIC TRAINING**  
(EMS Regulations Section 200.400 & 200.410)

**PURPOSE:** To standardize Paramedic training programs conducted within the Clark County EMS System.

**DEFINITION:** A program of training in procedures and skills for Emergency Medical Care as prepared and authorized by NHTSA of the United States DOT as a national standard for certification as a Paramedic pursuant to NRS 450B.195.

**ELIGIBILITY:** An Applicant for admission to a Paramedic training program shall be currently certified as an EMT or AEMT. **Note:** The student must maintain current EMT or AEMT certification throughout the Paramedic course.

**PREREQUISITE:** Current certification in CPR.

**PROCEDURE:**

- I. The Course coordinator must submit the Course roster to the OEMSTS within 14 (fourteen) days after Course start date. If the student is not Clark County certified, a copy of the student's current National Registry, State of Nevada, or out-of-state EMT or AEMT Certificate must be submitted.
- II. Upon successful completion of the didactic and clinical portions of the Paramedic training program, including the training center's final written and practical examinations, the training center must submit to the OEMSTS the "*Paramedic Didactic/Clinical Course Completion*" form that certifies the student has successfully completed the didactic and clinical portions of the training program. The form must be signed by the Course coordinator and Course Medical Director. The Paramedic Intern Applicant must follow the procedure as outlined in the "**District Procedure for Provisional Licensure,**" which will allow the OEMSTS to schedule the written ALS Licensure examination for the students whose names appear on the form.
- III. Upon successful completion of the ALS Licensure examination, a Provisional License may be issued by the OEMSTS allowing the student to enter the Field internship portion of the Paramedic training program. A Paramedic Intern must possess a Provisional License prior to performing any ALS procedure outside of the hospital or classroom setting. The Provisional License will expire upon completion of the Paramedic Course and shall not be valid for more than one (1) year from the date of issuance, and is not renewable. The Paramedic Intern must sign the Provisional License prior to issuance, and a copy shall be kept on file in the OEMSTS.
- IV. The Paramedic Intern must complete the internship with a permitted 911 responding agency. The internship shall be for a minimum of 360 hours if 12-hour shifts are worked or for a minimum of 480 hours if 24-hour shifts are worked. The Paramedic Intern must be evaluated under the direct observation of an EMS Instructor. The Paramedic Intern must be a third-rider, and must always be with an EMS Instructor when providing care.
- V. The SNHD Paramedic Mentorship/Internship Program consists of three phases of structured training, which every new Paramedic Intern must complete in its entirety, as outlined in the Southern Nevada Health District Paramedic Mentorship/Internship Program.

**Note:** The internship will be under the direction of the Paramedic's Authorized EMS Training Center.

- VI. Failure to successfully complete any portion of the “**District Procedure for Paramedic Training**” may be cause for the candidate’s internship to be terminated upon recommendation of the Health Officer.
- VII. If the training center’s intent is to have the student attain National Registry Paramedic certification, the Authorized EMS Training Center may facilitate an Advanced Level National Registry psychomotor examination.

**Note:** The National Registry Paramedic psychomotor examination remains valid for a 12 -month period upon date of completion.

The psychomotor and cognitive examinations must be passed within 12 months of each other.

- A. The student must successfully complete the internship portion of the Paramedic training program.
- B. Upon successful completion of the internship, the training center will submit an “*EMS Course Completion Record*” to the OEMSTS documenting the student’s successful completion of the entire Paramedic training program, along with the “*EMS Course/Instructor Evaluation*” forms.
- C. The student shall schedule and successfully pass the National Registry Paramedic cognitive examination per the National Registry procedure, within two years of Course completion.
- D. Once the student attains National Registry Paramedic certification, he/she will be eligible to apply for reciprocity in accordance with the “**District Procedure for Certification via Reciprocity.**”

VIII. If the training center’s intent is to have the student attain Clark County certification:

- A. The student must successfully complete the internship portion of the Paramedic training program.
- B. Upon successful completion of the internship, the training center will submit an “*EMS Course Completion Record*” that includes the attestation by the Course coordinator of successful completion of the skills portion of the Course to the OEMSTS documenting the student’s successful completion of the entire Paramedic training program, along with the “*EMS Course/Instructor Evaluation*” forms.
- C. The student shall schedule and successfully pass the Health District approved Paramedic Certification Examination, within two years of Course completion.
- D. Upon successful completion of the Health District approved practical and Paramedic Certification Examination, the student will be eligible to apply for Paramedic certification in accordance with the “**District Procedure for Initial Certification/Licensure.**”

**Note:** The student will have a maximum of six (6) attempts to pass either the National Registry Paramedic cognitive examination or the Clark County Paramedic certification examination. If after six attempts the student is unable to successfully pass either examination, the student will not be eligible for Paramedic certification in Clark County unless he/she retakes the entire Paramedic Course.

# **CERTIFICATION PROCEDURES**

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# DISTRICT PROCEDURE FOR APPLICATION FOR INITIAL CERTIFICATION/LICENSURE

(EMS Regulations Sections 200; 300; 400)

**PURPOSE:** To standardize the application process for all EMTs, Advanced EMTs, and Paramedics applying for initial certification/licensure within the Clark County EMS System.

**DEFINITION:** An Applicant is an individual who:

1. Is at least 18 years of age;
2. Is applying for initial certification; or
3. If applying for reciprocity, has current certification from National Registry, State of Nevada, or another state; or
4. Is applying for initial licensure; or
5. Needs to renew an expired Clark County Certificate

**Note:** Proof of residency in Clark County (State of Nevada I.D., military I.D., or Clark County University/College ID) or current EMS employment in Clark County is required for all Applicants.

The Applicant will be given six (6) months to complete the process before the file is destroyed.

## PROCEDURE:

- I. Complete the Health District's "*Application for Initial Certification/Licensure*" that contains at least the following information:
  - A. Section 1 – Applicant Information
    1. Name
    2. Mailing/home address
    3. Telephone number
    4. Date of birth
    5. Gender
    6. Social security number
  - B. Section 2 – Background
    1. Can you speak, read, and write the English language?
    2. Have you ever been certified as an EMS provider in this state, or any other state? If yes, list state(s).
    3. Have you ever been licensed as an Ambulance/Firefighter Attendant or Air Ambulance Attendant?
    4. Have you ever had an investigation/review of your EMS certificate/license?
    5. Have you ever surrendered any type of EMS certificate/license in any state or to a state agency that had issued you an EMS certificate/license?
    6. Have you ever been subject to limitation, suspension, or revocation of an EMS certificate/license, including your right to practice in a health care occupation, if applicable?
    7. Have you ever been denied any type of EMS certificate/license in any state by a state agency?

C. Section 3 – Criminal Background

1. Have you ever received deferred adjudication for a felony or misdemeanor?
2. Have you ever been convicted of a felony?
3. Have you ever been convicted of a gross misdemeanor?
4. Have you ever been convicted of a misdemeanor other than a minor traffic violation, e.g. speeding ticket or parking violation?

**Note:** An Applicant who answers “yes” to any of the above questions may be required to submit additional documentation to the OEMSTS.

D. Section 4 – Military Background (if applicable)

1. Branch of service
2. Length of service
3. Military Occupational Specialty

E. Section 5 – Signature and Date

The Applicant’s signature and date is required affirming that all information on the application is true and correct. The Applicant must provide any additional information needed to clarify the above relative to the Applicant’s pending certification which the OEMSTS has requested.

1. The Applicant’s signature further attests to knowledge of and compliance with the guidelines concerning safe and appropriate injection practices as set forth in NRS 450B.165.
2. The Applicant’s signature further acknowledges the obligation as a certified or licensed Person providing medical services, to report any findings of abuse, neglect or exploitation of children, elderly, or vulnerable persons within 24 hours from occurrence as set forth in NRS 432B.220, NRS 200.5093, and NRS 200.50935.

F. Section 6 – Child Support Information

The Applicant must provide a statement indicating compliance with child support payment in accordance with NRS 450B.183.

II. Submit payment of all required non-refundable, non-transferable fee(s).

**Note:** Any misrepresentation or omission may result in a denial of the application or revocation of certification/licensure. Certification/licensure may be denied if the Applicant has any history of disciplinary action relating to a Certificate/License in this or any other state.

# **DISTRICT PROCEDURE FOR CERTIFICATION VIA RECIPROCITY**

(EMS Regulations Section 300)

**PURPOSE:** To standardize the certification process via reciprocity for all EMTs, Advanced EMTs and Paramedics applying for certification within the Clark County EMS System.

**DEFINITION:** A reciprocity Applicant is an individual who has current certification from the National Registry of Emergency Medical Technicians (NREMT), the State of Nevada, or from another state.

**Note:** EMT, AEMT and Paramedic Applicants with a letter of intent to hire from a permitted agency, please also refer to the “**District Procedure for Licensure**” and “**District Procedure for Provisional Licensure.**”

The Applicant will be given six (6) months to complete the process before the file is destroyed.

## **PROCEDURE:**

- I. Complete the Health District’s “*Application for Initial Certification/Licensure*” form with:
  - A. Proof of residency in Clark County (State of Nevada I.D., military I.D., or Clark County University/College ID), or enrollment in EMS training, or current EMS employment in Clark County.
  - B. Payment of all required non-refundable, non-transferable fee(s).
  - C. Copy of:
    1. Current certification in CPR;
    2. Current NREMT certificate; or
    3. Current certificate from another state; or
    4. Current State of Nevada Certificate; and
    5. All other current and expired EMS certifications held, if applicable.
  - D. The Applicant must submit the “*Request for Verification of Certification*” form to all states where an EMS Certificate or License was held, if applicable.

**Note:** It is the Applicant’s responsibility to follow-up with the state(s) they once held certification. The OEMSTS will not issue a Certificate until we have received the completed “Request for Verification of Completion” form.
  - E. If Paramedic Applicant, copy of current certification in advanced cardiac life support procedures for Patients who require ALS care.
  - F. If Paramedic Applicant, copy of current certification in life support procedures for pediatric Patients who require ALS care, and prehospital trauma life support procedures.

**Note:** Any Paramedic Applicant who has not previously completed these Courses will be required to do so within twelve (12) months. Failure to do so will result in the certification being withdrawn by the Health Officer.
  - G. Proof of completion of a course of instruction in both WMD Surveillance and Health Alert Network training as defined in NRS 450B.180. An Applicant who has not completed this training will be required to do so prior to recertification.

**Note:** An Applicant who has held a Clark County Certificate in the past will be required to submit documentation of completion of both the WMD Surveillance

and Health Alert Network training courses at time of application, if not already on file. (Both courses are available on the SNHD website free of charge.)

- II. The Applicant will also need to submit two (2) complete sets of fingerprints and written permission authorizing the OEMSTS to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report.
- III. Upon completion of I and II, the Applicant will be given instructions on the process to take the Health District approved certification examination appropriate to the level of application.

**Note:** Please refer to the SNHD Certification Examination Instructions (Appendix A). The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least thirty (30) days prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to “**Eligibility for Accommodations Due to Disability**” or contact the OEMSTS.

**Note:** Reciprocity applicants who hold a current Certificate from NREMT or the State of Nevada will not be required to take the certification examination.

- IV. Upon receipt of the “*Request for Verification of Certification*” form, the OEMSTS will approve the application if the Applicant meets the requirements for certification via reciprocity, and will issue an EMS Certificate at the appropriate level.

**Note:** The OEMSTS may suspend or revoke a Certificate upon receipt of a positive fingerprint response or failure to disclose material facts on Section 3 (Criminal Background) of the application.



# DISTRICT PROCEDURE FOR RENEWAL OF AN EXPIRED NEVADA CERTIFICATE

(EMS Regulations Section 300.322)

**PURPOSE:** To standardize the process for all EMTs, Advanced EMTs, and Paramedics to regain certification within Nevada.

**DEFINITION:** An Applicant for renewal of an expired Nevada Certificate is an EMT, Advanced EMT, or Paramedic who held a Nevada Certificate that expired within the last two (2) years and wants to regain certification in Clark County.

**Note:** Paramedic applicants who wish to attain National Registry certification, please refer to the “**District Procedure for Issuance of a National Registry Support Letter.**”

**Note:** Applicants who hold a current National Registry, State of Nevada, or another state certificate, please refer to the “**District Procedure for Certification via Reciprocity.**”

## PROCEDURE:

- I. The Applicant must meet the following requirements at time of application:
  - A. Submit the Health District’s “*Application for Initial Certification/Licensure.*”
  - B. Submit proof of expired (w/in the last two (2) years) Nevada certification.
  - C. Submit proof of residency in Clark County (State of Nevada I.D., military I.D., or Clark County/College I.D.) or current EMS employment in Clark County.
  - D. Submit payment of all required non-refundable, non-transferable fee(s).
  - E. Submit the required continuing medical education hours as defined in the recertification procedure appropriate to the level of certification.

**Note:** Refresher paperwork is valid for two (2) years.
  - F. Submit a copy of skills (signed off within the last six (6) months) as defined on the Health District’s “*Skills Proficiency Record.*”
  - G. Submit a copy of a current CPR card.
  - H. Submit documentation of completion of a course of instruction in both WMD Surveillance and Health Alert Network training, if not already on file. (Both courses are available on the SNHD website free of charge.)
  - I. Two complete sets of fingerprints and written permission authorizing the Health District to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report, unless documentation already on file within the past two (2) years.
- II. After successful completion of the above requirements, the Applicant may schedule to take the Health District approved certification examination appropriate to the level of certification (Appendix A – SNHD Certification Examination Instructions).
- III. The Applicant will have 12 months from the date of application to complete the renewal process as outlined above.

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## **ELIGIBILITY FOR ACCOMMODATIONS DUE TO DISABILITY**

The OEMSTS will offer reasonable and appropriate accommodations for the written examinations for those persons with documented disabilities.

### Learning Disabilities

Based upon a thorough analysis of the written examination it has been determined that persons with learning disabilities in the areas of reading decoding, reading comprehension, or written expression may be eligible for special test accommodations. Other areas in which learning disabilities may be evidenced (e.g. mathematics calculations, mathematics applications, oral expression, listening comprehension) should not negatively impact upon one's performance on the written examination due to the format (multiple choice) and content.

Those persons requesting accommodations for the written component of the licensure examination must submit documented evidence of a learning disability. Appropriate documentation must be received by the OEMSTS no less than thirty (30) days before the scheduled test date.

Documentation of a specific learning disability must include evidence of a previously documented learning disability in reading decoding, reading comprehension, or written expression as follows:

1. Diagnosis of a learning disability in the area(s) of reading decoding, reading comprehension, and/or written expression, based upon the results of a standardized psycho educational assessment including an individually administered standardized measure of intelligence and an individually administered standardized measure of achievement in reading decoding, reading comprehension and/or written expression. Both standard scores and grade equivalent scores are required.
2. A learning disability made by a qualified professional in accordance with the criteria outlined in the most current edition of Diagnostic and Statistical Manual of Mental Disorders.
3. Development and academic history reflecting current cognitive functioning, thorough investigation of deficit areas, reasonable consideration of alternative diagnosis and co-morbidity, and rationale for diagnosis.
4. A recent psycho-educational evaluation within the past five (5) years. If no such assessment has been conducted, then the Applicant is responsible for obtaining such documentation before any decision can be made by the Southern Nevada Health District regarding the Applicant's request for special accommodations.

Requested accommodations must be reasonable and appropriate for the documented disability. The OEMSTS will permit those persons who qualify for special accommodations on the written examination due to a documented learning disability in reading decoding, reading comprehension, and/or written expression to take the standard format of the examination but receive an extended amount of time in which to complete the examination. Applicants selecting this option will normally receive an additional 50% of the standard time allotted. (Example: A qualified individual will receive three (3) hours versus the standard two hours). Additional accommodations may be provided as appropriate. The OEMSTS realizes that each candidate's circumstances are unique and uses a case by case approach to review the documentation submitted.

No Person will be granted special accommodation on the written examination if he/she does not meet the minimum standards for performance as determined by analysis of the requirements of the job and as documented by standardized measures of aptitude and achievement. Please contact the OEMSTS for further information regarding minimum standards of performance.

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# **ENDORSEMENT PROCEDURES**

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**DISTRICT PROCEDURE FOR  
EMS INSTRUCTOR I ENDORSEMENT**  
(EMS Regulations Section 400)

**PURPOSE:** To standardize EMS Instructor training programs conducted within the Clark County EMS System.

**DEFINITION:** An EMS Instructor I holds an Endorsement, issued by the OEMSTS, to conduct training in EMS skills and serve as an evaluator of Interns.

**PREREQUISITES:**

1. Current State of Nevada certification as an AEMT, Paramedic, or current State of Nevada licensure as a Physician, PA, APRN, or RN;
2. Letter of recommendation from an Authorized EMS Training Center outlining the intent to utilize the individual in this capacity, including training level; and
3. Documentation of at least two (2) years of full-time employment or at least five years of volunteer/part-time EMS Field experience at the level being requested, as defined by the OEMSTS.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

- I. Submit an “*Application for EMS Instructor I Endorsement.*”
- II. Submit payment of all required non-refundable, non-transferable fee(s).
- III. Successfully demonstrate to a Clark County endorsed EMS Instructor the ability to perform the skills as defined on the “*Skills Proficiency Record*” within six (6) months prior to the date of application.
- IV. Successfully pass the appropriate Health District EMS Instructor Examination with a minimum score of 80%:
  - A. If the instructor Applicant does not pass the examination on the first attempt, a second opportunity to test will be allowed within six (6) months following the date of the first attempt. If there is no second attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.
  - B. If the instructor Applicant does not pass the examination on the second attempt, the Applicant must submit to the OEMSTS, at a minimum, documentation from the Applicant’s sponsoring agency, of successful completion of remedial training. The remedial training must be conducted by a Clark County endorsed EMS Instructor II or Master EMS Instructor. A third attempt will be allowed within six (6) months following the date of the second attempt. If there is no third attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.
  - C. If unsuccessful after the third attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed

attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.

**Note:** The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least three (3) weeks prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to “**Eligibility for Accommodations Due to Disability**” or contact the OEMSTS.

- V. Successfully complete a Health District approved EMS Instructor Course, unless Applicant can show documentation of completion of the Fire Service Instructor II Course. The required minimum Course content shall meet or exceed the most recent Guidelines for Educating the EMS Instructor.
- VI. Submit the “*Monitoring Form for EMS Instructor Applicant,*” completed by a currently endorsed EMS Instructor II or Master EMS Instructor, within ten (10) days of Course completion, that verifies the monitored skills instruction.
- VII. Submit the “EMS Course Completion Record” to the OEMSTS within ten (10) days of Course completion.
- VIII. Upon receipt of the “*Monitoring Form for EMS Instructor Applicant*” and “*EMS Course Completion Record*” the OEMSTS may:
  - A. Add an Endorsement as an EMS Instructor I to the Applicant’s AEMT or Paramedic Certificate, or
  - B. Issue a Letter of Authorization as an EMS Instructor I to a Nevada licensed Physician, PA, APRN, or RN.
- IX. An Endorsement to be an EMS Instructor I will expire:
  - A. On the date of expiration appearing on the AEMT or Paramedic Certificate, or
  - B. Up to two (2) years from the date of the Letter of Authorization for a Nevada licensed Physician, PA, APRN, or RN, or
  - C. On the date of separation from employment as an EMS Instructor for an Authorized EMS Training Center, or
  - D. On the date the Certificate is suspended or revoked.
- X. The Endorsement is renewable if the holder of the Endorsement:
  - A. Verifies participation as an EMS Instructor I in good standing with an Authorized EMS Training Center;
  - B. Provides documentation of current certification as an AEMT or Paramedic issued by the Health Officer, or current Nevada licensure as a Physician, PA, APRN, or RN;
  - C. Has submitted an “*Application for Recertification*” (EMS providers only); and
  - D. Has, within the Endorsement period, submitted documentation of completion of an EMS Instructor Update, or evidence of completion of the required hours of instructor training, as approved by the OEMSTS, along with the “*EMS Instructor Renewal Report.*”
    - 1. If the EMS Instructor Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.



2. If the EMS Instructor Endorsement was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is two (2) hours.
3. If the EMS Instructor Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is four (4) hours.

**Note:** If the Endorsement is not renewed within two (2) years of expiration, the Applicant must meet the eligibility requirements as outlined in the **“District Procedure for EMS Instructor Endorsement via Challenge.”**

**Note:** All State of Nevada EMS Instructor Applicants will be endorsed as an EMS Instructor I unless the Applicant provides documentation that they meet the eligibility requirements as outlined in the **“District Procedure for EMS Instructor II Endorsement”** or **“District Procedure for Master EMS Instructor Endorsement.”** The Applicant must meet all prerequisites.

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**DISTRICT PROCEDURE FOR  
EMS INSTRUCTOR II ENDORSEMENT**  
(EMS Regulations Section 400)

**PURPOSE:** To standardize the process for Endorsement as an EMS Instructor II within the Clark County EMS System.

**DEFINITION:** An EMS Instructor II who holds an Endorsement, issued by the OEMSTS, to coordinate and conduct EMS Courses/Classes, training in EMS skills, and serve as an evaluator of Interns.

**PREREQUISITES:**

1. If currently endorsed as an EMS Instructor I, successful completion of an EMS Instructor II Instructor Bridge Course, or
2. A Fire Service Instructor II Certificate, or
3. The entire Health District approved EMS Instructor Course; and
4. Has a letter of recommendation from an Authorized EMS Training Center outlining the intent to utilize the individual in this capacity.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

- I. Submit an “*Application for EMS Instructor II Endorsement.*”
- II. Submit payment of all required non-refundable, non-transferable fee(s).
- III. Submit the “*Monitoring Form for EMS Instructor Applicant,*” completed by a currently endorsed Master EMS Instructor, within ten (10) days of Course Completion, that verifies, at a minimum, one (1) hour monitored didactic instruction.
- IV. Submit the “EMS Course Completion Record” to the OEMSTS within ten (10) days of Course completion.
- V. Upon receipt of the “*Monitoring Form for EMS Instructor Applicant*” and the “*EMS Course Completion Record*” the OEMSTS may:
  - A. Add an Endorsement as an EMS Instructor II to the Applicant’s AEMT or Paramedic Certificate, or
  - B. Issue a Letter of Authorization as an EMS Instructor II to a Nevada Licensed Physician, PA, APRN, or RN.
- VI. An Endorsement to be an EMS Instructor II will expire:
  - A. On the date of expiration appearing on the AEMT or Paramedic Certificate, or
  - B. Up to two (2) years from the date of the Letter of Authorization for a Nevada licensed Physician, PA, APRN, or RN, or
  - C. On the date of separation from employment as an EMS Instructor for an Authorized EMS Training Center, or
  - D. On the date the Certificate is suspended or revoked.

VII. The Endorsement is renewable if the holder of the Endorsement:

- A. Verifies participation as an EMS Instructor II in good standing with an Authorized EMS Training Center;
- B. Provides documentation of current AEMT or Paramedic certification, issued by the OEMSTS, or current Nevada licensure as a Physician, PA, APRN, or RN;
- C. Has submitted an “*Application for Recertification*” (EMS providers only); and
- D. Has, within the Endorsement period, submitted documentation of completion of an EMS Instructor Update, or evidence of completion of the required hours of instructor training, as approved by the OEMSTS, along with the “*EMS Instructor Renewal Report.*”
  - 1. If the EMS Instructor Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.
  - 2. If the EMS Instructor Endorsement was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is two (2) hours.
  - 3. If the EMS Instructor Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is four (4) hours.

**Note:** If the Endorsement is not renewed within two (2) years of expiration, the Applicant must meet the eligibility requirements as outlined in the “**District Procedure for EMS Instructor Endorsement via Challenge.**”

**Note:** If an EMS Instructor II originally certified at the AEMT level attains Paramedic certification, that instructor is eligible for EMS Instructor II Endorsement at the Paramedic level after two (2) years of full-time Paramedic Field experience. The Applicant must submit a letter of recommendation from an Authorized EMS Training Center outlining the intent to utilize the individual in this capacity, and successfully pass the Paramedic instructor examination.

**Note:** EMT, AEMT and Paramedic applicants who hold a current license as a Nevada Educator from the Nevada State Board of Education will be considered for endorsement as an EMS Instructor II on a case-by-case basis. The Applicant must submit a letter of recommendation from a secondary education institution outlining the intent to utilize the individual in this capacity. Upon approval by the OEMSTS, the Applicant will need to pass the EMS Instructor Examination appropriate to the level of certification, and will be endorsed to teach an EMT Course for the secondary education institution.

**DISTRICT PROCEDURE FOR  
MASTER EMS INSTRUCTOR ENDORSEMENT**  
(EMS Regulations Section 400)

**PURPOSE:** To standardize the process for Endorsement as a Master EMS Instructor within the Clark County EMS System.

**DEFINITION:** A Master EMS Instructor holds an Endorsement, issued by the OEMSTS, to coordinate and conduct a Train the Trainer EMS Instructor Course in addition to EMS Courses/Classes, training in EMS skills, and serve as an evaluator of Interns.

**PREREQUISITES:** 1. Endorsement as an EMS Instructor II for at least two (2) years; and  
2. Letter of recommendation from an Authorized EMS Training Center outlining the intent to utilize the individual in this capacity.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

- I. Submit an “*Application for Master EMS Instructor Endorsement.*”
- II. Submit payment of all required non-refundable, non-transferable fee(s).
- III. Submit documentation demonstrating successful completion of one (1) of the following:
  - A. NEMSEC examination; or
  - B. Course of study with the awarding of at least a bachelor’s degree in education, health education or other related fields, as approved by the OEMSTS; or
  - C. Equivalent course(s), as approved by the OEMSTS.
- IV. Upon approval by the OEMSTS, the Applicant must be monitored teaching a Train the Trainer EMS Instructor Course by a Master EMS Instructor designated by the OEMSTS.
- V. Upon receipt of documentation demonstrating successful monitoring of a Train the Trainer EMS Instructor Course, the OEMSTS may:
  - A. Add an Endorsement as a Master EMS Instructor to the Applicant’s EMT, AEMT or Paramedic Certificate, or
  - B. Issue a Letter of Authorization as a Master EMS Instructor to a Nevada licensed Physician, PA, APRN, or RN.
- VI. An Endorsement to be a Master EMS Instructor will expire:
  - A. On the date of expiration appearing on the EMT, AEMT or Paramedic Certificate, or
  - B. Up to two (2) years from the date of the Letter of Authorization for a Nevada licensed Physician, PA, APRN, or RN, or
  - C. On the date of separation from employment as an EMS Instructor for an Authorized EMS Training Center, or
  - D. On the date the Certificate is suspended or revoked.

- VII. The Endorsement is renewable if the holder of the Endorsement:
- A. Verifies participation as a Master EMS Instructor in good standing with a Health District Authorized EMS Training Center;
  - B. Provides documentation of current certification as an EMT, AEMT or Paramedic issued by the OEMSTS, or current Nevada licensure as a Physician, PA, APRN, or RN;
  - C. Has submitted an “*Application for Recertification*” (EMS providers only); and
  - D. Has, within the Endorsement period, submitted documentation of completion of an EMS Instructor Update or evidence of completion of four hours of instructor training, as approved by the OEMSTS, along with the “*EMS Instructor Renewal Report.*”
    - 1. If the EMS Instructor Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.
    - 2. If the EMS Instructor Endorsement was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is two (2) hours.
    - 3. If the EMS Instructor Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is four (4) hours.

**Note:** If the Endorsement is not renewed within two (2) years of expiration, the Applicant must meet the eligibility requirements as outlined in **the “District Procedure for EMS Instructor Endorsement via Challenge.”**

# DISTRICT PROCEDURE FOR EMS INSTRUCTOR ENDORSEMENT VIA CHALLENGE

(EMS Regulations Section 300)

**PURPOSE:** To standardize the Endorsement process via challenge for all individuals applying for EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor Endorsement within the Clark County EMS System.

**DEFINITION:** An Applicant for EMS Instructor Endorsement via challenge is an individual who:

1. Has had training and experience equivalent to that of an EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor as defined in this procedure manual; or
2. Has held an Endorsement as an EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor that has been expired for more than two (2) years; and
3. Has a letter of recommendation from an Authorized EMS Training Center outlining the intent to utilize the individual as an EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PREREQUISITE:** Current Clark County certification as an EMT, AEMT or Paramedic, or current State of Nevada licensure as a Physician, PA, APRN, or RN.

## PROCEDURE:

- I. Submit documentation of at least the minimum number of years of EMS Field experience as outlined in the District procedure for EMS Instructor Endorsement at the applicable level being requested.
- II. Submit documentation of training and experience equivalent to that of an EMS Instructor at the applicable level being requested, as determined by the OEMSTS. If not considered equivalent training, the Applicant must complete a Health District approved EMS Instructor Course.
- III. Submit the completed, appropriate application for EMS Instructor Endorsement with documentation of completion of all requirements outlined in the district procedure for EMS Instructor Endorsement at the applicable level being requested.
- IV. Successfully demonstrate to a Clark County endorsed EMS Instructor the ability to perform the skills as defined on the “*Skills Proficiency Record*” within six (6) months of the date of application.
- V. Obtain a minimum score of 80% on the Health District’s written EMS Instructor Examination:
  - A. If the instructor Applicant does not pass the examination on the first attempt, a second opportunity to test will be allowed within six (6) months following the first attempt. If there is no second attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.

- B. If the instructor Applicant does not pass the examination on the second attempt, the Applicant must submit to the OEMSTS, at a minimum, documentation from the Applicant's sponsoring agency, of successful completion of remedial training. The remedial training must be conducted by a Clark County endorsed EMS Instructor II or Master EMS Instructor. A third attempt will be allowed within six (6) months following the date of the second attempt. If there is no third attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.
  - C. If unsuccessful after the third attempt, the Applicant will not be eligible to take the written EMS Instructor Examination for at least one (1) year after the last failed attempt. At that time, the Applicant must restart the application process, beginning with a new letter of recommendation from an Authorized EMS Training Center.
- Note:** The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least three (3) weeks prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to **"Eligibility for Accommodations Due to Disability"** or contact the OEMSTS.
- VI. Submit documentation of successful completion of the SNHD Preceptor Program, if not already on file.
  - VII. Submit the *"Monitoring Form for EMS Instructor Applicant,"* completed by a currently endorsed Master EMS Instructor that verifies, at a minimum, one (1) hour monitored didactic instruction.
  - VIII. Submit the *"Monitoring Form for EMS Instructor Applicant,"* completed by a currently endorsed EMS Instructor II or Master EMS Instructor that verifies the monitored skills instruction.
  - IX. Upon receipt of the *"Monitoring Form for EMS Instructor Applicant"* the OEMSTS will:
    - A. Add an Endorsement as an EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor to the Applicant's EMT, AEMT or Paramedic Certificate; or
    - B. Issue a Letter of Authorization as an EMS Instructor I, Secondary EMS Instructor, EMS Instructor II, or Master EMS Instructor to a Nevada licensed Physician, PA, APRN, or RN.
  - X. An Endorsement to be an EMS Instructor will expire:
    - A. On the date of expiration appearing on the Certificate for an EMT, AEMT or Paramedic; or
    - B. Up to two (2) years from the date of the Letter of Authorization for a Nevada licensed Physician, PA, APRN, or RN; or
    - C. On the date of separation from employment as an EMS Instructor for an Authorized EMS Training Center, or
    - D. On the date the Certificate is suspended or revoked.



- XI. The Endorsement is renewable if the holder of the Endorsement:
- A. Verifies participation as an EMS Instructor in good standing with an Authorized EMS Training Center;
  - B. Provides documentation of current certification as an EMT, AEMT or Paramedic issued by the Health Officer, or current Nevada licensure as a Physician, PA, APRN, or RN;
  - C. Has, within the Endorsement period, submitted documentation of completion of an EMS Instructor Update, or evidence of completion of four hours of instructor training, as approved by the OEMST, and documented on the “*EMS Instructor Renewal Report;*” and
  - D. Submits the “*Application for Recertification*” (EMS providers only).

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# DISTRICT PROCEDURE FOR CRITICAL CARE PARAMEDIC TRAINING & ENDORSEMENT

(EMS Regulations Section 400)

**PURPOSE:** To ensure uniformity of training for all Critical Care Paramedic training programs in the Clark County EMS System.

**PREREQUISITE:**

1. Current Paramedic certification.
2. Proof of successful completion of an OEMSTS approved CCT Course.
3. Three (3) years full time Field experience as a Paramedic in ground or air service.
4. Current certification in CPR; Current certification in advanced cardiac life support procedures for patients who require ALS care; Current certification in life support procedures for pediatric patients who require ALS care; and certification of completion of training in prehospital trauma life support procedures.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

- I. The minimum Course content shall include the following:

Introduction

Concepts and Components of Critical Care Transport  
Aeromedical Considerations  
Flight Physiology  
Medical Legal Aspects  
Infection Control

Airway Management

Basic and Advanced Airway Management  
RSI  
Oxygenation  
Ventilation

Respiratory

Acute and Chronic Conditions  
Assessment  
Acid-Base Balance  
ABG Interpretation  
Ventilators  
End Tidal CO<sub>2</sub>

Cardiovascular

Cardiac Pathophysiology  
Acute Coronary Syndromes  
Cardiogenic Shock  
Vascular Emergencies  
Pacemakers  
Invasive Hemodynamic Monitoring  
Intra-Aortic Balloon Pump Theory and Transport

Cardiovascular (cont.)

Left Ventricular Assist Devices  
12-Lead ECG Interpretation

Neurological

Medical Neurological Emergencies  
Traumatic Neurological Emergencies  
CVAs  
Spinal Trauma  
Head Trauma  
Neurogenic Shock States  
ICP Monitoring

Pediatric

Assessment  
Respiratory Emergencies  
Neurologic Emergencies  
Metabolic Emergencies  
Traumatic Emergencies  
Children with Special Needs

Toxicology

Assessment  
Toxic Exposures  
Poisoning  
Overdose  
Envenomations  
Anaphylactic Shock  
Infectious Diseases

OB/GYN & Genitourinary

Assessment  
OB Emergencies  
Trauma in Pregnancy  
Renal Disorders  
Reproductive System Disorders  
Fetal Assessment  
HELLP Syndrome

Medical

Septic Shock  
Hypertensive Emergencies  
Environmental Emergencies  
Coagulopathies  
Endocrine Emergencies  
Lab Value Interpretation

### Neonatal Considerations

Delivery & Management of the Full-Term Newborn  
Delivery & Management of the Pre-Term Newborn  
Delivery Complications  
Neonatal Resuscitation Program  
PALS

### Trauma Considerations

Trauma Assessment  
Adult Thoracic Trauma  
Adult Abdominal Trauma  
Vascular Trauma  
Musculoskeletal Trauma  
Penetrating Trauma  
Blunt Trauma  
Burns  
Ocular Trauma  
Maxillofacial Trauma  
Distributive and Hypovolemic Shock States  
Trauma Systems  
Trauma Scoring  
Kinematics of Trauma  
Patterns of Injury

### Radiographic Interpretation, Bedside Testing and Pharmacology

Wherever appropriate, radiographic findings,  
pertinent laboratory and bedside testing,  
and pharmacological interventions

### Recommended Texts

Stewart, C. (2002). *Advanced Airway Management*: Prentice Hall  
Holleran, Renee Semonin. (2009). (4<sup>th</sup> ed.): St. Louis: Mosby  
CAMTS Accreditation Standards 9<sup>th</sup> Edition  
Pollack A. (Ed.). (2011). Massachusetts: Jones and Bartlett

- II. Nothing in the above listed content is meant to limit the Medical Director's ability to augment the didactic training to meet the specific needs of the permitted agency.
- III. The Applicant must submit the following documentation to the OEMSTS:
  - A. Letter of intent to utilize the Applicant as a Critical Care Paramedic from a permitted Agency with an Endorsement to provide Critical Care Transport;
  - B. An "*Application for Critical Care Paramedic Endorsement*;"
  - C. Payment of all required non-refundable, non-transferable fee(s);
  - D. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District's "*Skills Proficiency Record*;" and
  - E. All procedures as listed on the "*Physician Advisor Verification of Critical Care Paramedic Skills*" form.
- IV. Upon completion of all requirements listed in III., the OEMSTS will issue a letter to the Applicant's agency allowing the Applicant to complete an internship of no less than 120 hours of

Field experience and no less than 10 (ten) Critical Care Transport Patient contacts with a Clark County endorsed EMS Instructor who is an EMS RN or a Critical Care Paramedic.

- V. Upon completion of the internship, the agency's Medical Director shall send a letter to the OEMSTS documenting successful completion of all requirements listed in IV.
- VI. The Paramedic must pass the examination for certification by the Board for Critical Care Transport Paramedic Certification (BCCTPC, IBSC, its successor, or equivalent, as determined by the OEMSTS), and provide the OEMSTS with valid documentation of such certification.
- VII. Upon successful completion of all the above listed requirements, the OEMSTS will add a Critical Care Endorsement to the Applicant's License.
- VIII. The Critical Care Endorsement will expire on the date of expiration appearing on the License, the date of separation from employment as a Paramedic for a permitted EMS agency, or on the date the Certificate is suspended or revoked.
- IX. The Endorsement is renewable if the holder of the Endorsement fulfills all requirements as set forth in the **“District Procedure for Paramedic Recertification”** and the **“District Procedure for Renewal of Critical Care Endorsement.”**

**DISTRICT PROCEDURE FOR ENDORSEMENT AS A CRITICAL CARE  
PARAMEDIC VIA CHALLENGE**  
(EMS Regulations Section 400)

**PURPOSE:** To standardize the challenge process for all individuals applying for Endorsement as a Critical Care Paramedic within the Clark County EMS System.

**DEFINITION:** An Applicant for Endorsement as a Critical Care Paramedic via challenge has:

1. Training and experience equivalent to that of a Paramedic as defined in the **“District Procedure for Critical Care Paramedic Training & Endorsement;”** or
2. Current certification by the BCCTPC, IBSC, its successor, or equivalent, as determined by the OEMSTS; or
3. Previously held an Endorsement as a Critical Care Paramedic and failed to complete the required hours for renewal of Endorsement; or
4. Previously held an Endorsement as a Critical Care Paramedic that has been expired for more than two (2) years.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PREREQUISITES:**

1. Current Clark County certification as a Paramedic;
2. Proof of successful completion of an OEMSTS approved Critical Care Paramedic Course or a CECBEMS or CAPCE approved Critical Care Paramedic Course or equivalent, as determined by the OEMSTS; and
3. Current certification in CPR; Current certification in advanced cardiac life support procedures for patients who require ALS care; Current certification in life support procedures for pediatric patients who require ALS care; and certification of completion of training in prehospital trauma life support procedures.

**PROCEDURE:**

- I. An Applicant for Endorsement as a Critical Care Paramedic must submit the following prior to issuance of a letter allowing the Applicant to begin the internship:
  - A. Letter of intent to utilize the Applicant as a Critical Care Paramedic from a permitted Agency endorsed to provide Critical Care Transport;
  - B. An *“Application for Endorsement as a Critical Care Paramedic;”*
  - C. Payment of all required non-refundable, non-transferable fee(s);
  - D. Copy of skills (signed off within the last six (6) months) as defined on the Health District’s *“Skills Proficiency Record;”* and
  - E. Successfully demonstrate all skills as listed on the *“Physician Advisor Verification of Critical Care Paramedic Skills”* form.
- II. Upon completion of all requirements listed in I., the OEMSTS will issue a letter allowing the Applicant to begin an internship of no less than 120 hours of Field experience and no less than ten (10) Critical Care Transport Patient contacts with a Clark County endorsed EMS Instructor who is an EMS RN or a Critical Care Paramedic.

- III. Upon successful completion of the internship, the agency's Medical Director shall send a letter to the OEMSTS documenting successful completion of all requirements listed in II.
- IV. Upon successful completion of all the above listed requirements, the OEMSTS will add an Endorsement as a Critical Care Paramedic to the Applicant's License.
- V. The Critical Care Endorsement will expire:
  - A. On the date of expiration appearing on the Certificate, or
  - B. On the date of separation from employment as a Paramedic for a permitted EMS agency, or
  - C. On the date the Certificate is suspended or revoked.
- VI. The Endorsement is renewable if the holder of the Endorsement fulfills all requirements as set forth in the **"District Procedure for Paramedic Recertification"** and the **"District Procedure for Renewal of Endorsement as a Critical Care Paramedic."**



# DISTRICT PROCEDURE FOR ENDORSEMENT TO PROVIDE COMMUNITY PARAMEDICINE SERVICES

(EMS Regulations Section 400)

**PURPOSE:** To ensure uniformity of training for all Community Paramedicine programs in the Clark County EMS System.

**PREREQUISITE:**

1. Current licensure as an Attendant.
2. Three (3) years full time Field experience as a licensed Attendant in ground or air service.
3. Current certification in CPR.
4. If Paramedic, current certification in advanced cardiac life support procedures for patients who require ALS care; Current certification in life support procedures for pediatric patients who require ALS care; and certification of completion of training in prehospital trauma life support procedures.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

I. The minimum Course content shall include the following:

Module One: Role in the Health Care System	Hours
Introduction to Community Paramedicine	2
Understanding the Health Care System	4
Documentation	1
Module Two: Social Determinants	Hours
Social Determinants of Health	8
Documentation	1
Module Three: Public Health and Primary Care	Hours
Health Promotion and Prevention	6
Patient Support Techniques	6
Documentation	1
Module Four: Developing Cultural Competence	Hours
Developing Cultural Competence	1.5
Documentation	1
Module Five: Role Within the Community	Hours
Community Needs Assessment	1.5
Systems of Care	2.25
Pathways to Care	1.5
Negative Resources	.75
Introduction to Program Outreach	.75
Community Outreach	.75
Principles of Individual Outreach	.75
Interventional Techniques	1.5

System Navigation	1.5
Documentation	1
Module Six: Personal Safety and Wellness	Hours
Stress and Wellness	4
Personal Safety	4
<b>Total Didactic Hours:</b>	<b>51.5</b>

- II. The Applicant must complete a minimum of 24 clinical hours in a public health setting.
- III. Nothing in the above listed content is meant to limit the Medical Director’s ability to augment the didactic training to meet the specific needs of the permitted Agency.
- IV. The Applicant must submit the following documentation to the OEMSTS prior to Endorsement to provide Community Paramedicine Services:
  - A. Letter of intent to utilize the Applicant to provide Community Paramedicine Services from a permitted Agency;
  - B. An “*Application for Endorsement to Provide Community Paramedicine Services;*”
  - C. Payment of all required non-refundable, non-transferable fee(s); and
  - D. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District’s “*Skills Proficiency Record.*”
- V. Upon completion of all requirements listed in IV., the OEMSTS will add an Endorsement to the Applicant’s License, endorsing him/her to provide Community Paramedicine Services in Clark County.
- VI. The Endorsement to provide Community Paramedicine Services will expire:
  - A. On the date of expiration appearing on the License, or
  - B. On the date of separation from employment as a Licensed Attendant for a permitted EMS Agency, or
  - C. On the date the Certificate is suspended or revoked.
- VII. The Endorsement is renewable if the holder of the Endorsement fulfills all requirements as set forth in the appropriate district procedure for recertification.

# DISTRICT PROCEDURE FOR ENDORSEMENT TO PROVIDE COMMUNITY PARAMEDICINE SERVICES VIA CHALLENGE

(EMS Regulations Section 400)

**PURPOSE:** To standardize the challenge process for all individuals applying for Endorsement to provide Community Paramedicine Services within the Clark County EMS System.

**DEFINITION:** An Applicant for Endorsement to provide Community Paramedicine Services via challenge has:

1. Equivalent training and experience as defined in the “**District Procedure for Endorsement to Provide Community Paramedicine Services;**” or
2. Previously held an Endorsement to provide Community Paramedicine Services and failed to complete the required hours for renewal of the Endorsement; or
3. Previously held an Endorsement to provide Community Paramedicine Services that has been expired for more than two (2) years.

**Note:** The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PREREQUISITES:**

1. Current Clark County certification;
2. Proof of completion of an OEMSTS approved Community Paramedicine Course, or a CECBEMS or CAPCE approved Community Paramedicine Course or equivalent, as determined by the OEMSTS; and
3. Current certification in CPR; and
4. If paramedic, current certification in advanced cardiac life support procedures for patients who require ALS care; Current certification in life support procedures for pediatric patients who require ALS care; and certification of completion of training in prehospital trauma life support procedures.

**PROCEDURE:**

- I. An Applicant for Endorsement to provide Community Paramedicine Services must submit the following prior to the issuance of an Endorsement to Provide Community Paramedicine Services:
  - A. Letter of intent to utilize the Applicant to provide Community Paramedicine Services from a permitted Agency endorsed to provide Community Paramedicine Services;
  - B. An “*Application for Endorsement to Provide Community Paramedicine Services;*”
  - C. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District’s “*Skills Proficiency Record;*” and
  - D. Payment of all required non-refundable, non-transferable fee(s).
- II. After successful completion of all the above listed requirements, the OEMSTS may add an Endorsement to provide Community Paramedicine Services to the Applicant’s License.

- III. The Endorsement will expire:
  - A. On the date of expiration appearing on the Certificate, or
  - B. On the date of separation from employment as an Attendant for a permitted EMS agency, or
  - C. On the date the Certificate is suspended or revoked.
- IV. The Endorsement is renewable if the holder of the Endorsement fulfills all requirements as set forth in the **“District Procedure for Endorsement to Provide Community Paramedicine Services”** and the **“District Procedure for Renewal of Endorsement to Provide Community Paramedicine Services.”**

# DISTRICT PROCEDURE FOR EMS RN TRAINING & ENDORSEMENT

(EMS Regulations Section 400)

**PURPOSE:** To standardize EMS RN training programs conducted within the Clark County EMS System.

**DEFINITION:** The EMS RN Training Program is based on the Course published by the Association of Air Medical Services (AAMS) covering the advanced training of air medical crew.

**PREREQUISITES:**

1. Currently licensed in Nevada as both a RN and EMS RN;
2. Five years of nursing experience that includes a minimum of three (3) years of critical care nursing experience in hospital, air, or ground critical care (both rotor and fixed wing/CCT);
3. Current certification in CPR;
4. Current certification in advanced cardiac life support procedures for Patients who require ALS care;
5. Current certification in life support procedures for pediatric Patients who require ALS care; and
6. Certification of completion of training in prehospital trauma life support procedures.

**Note:** The OEMSTS will accept Commission on Accreditation of Medical Transport Systems (CAMTS) certification provided the Applicant submits documentation of satisfactory completion of the didactic and clinical requirements.

The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

- I. The minimum didactic Course content to meet both AAMS and local requirements shall be as follows:

<u>MODULE</u>	<u>TOPIC</u>	<u>HOURS</u>
A.	CCT & EMS: Roles and Responsibilities	3.0
B.	Mass Casualty Incidents/Triage/Incident Command	2.0
C.	Hazardous Materials Awareness	4.0
D.	Airway Management and Ventilation to include: Advanced airways/RSI, ABG interpretation, ventilator management)	10.0
E.	Pharmacology to include all drugs listed on the most current ALS inventory/CCT drugs approved by the agency Medical Director	6.0
F.	Cardiac Emergencies to include: 12-Lead ECG interpretation and IABP/VAD management	10.0
G.	Respiratory Emergencies	3.0
H.	Neurological Emergencies	2.0
I.	Traumatic Emergencies ( <b>Note:</b> TNCC certification will fulfill this requirement)	10.0
J.	Abdominal Emergencies	2.0
K.	Endocrine Emergencies/Allergy & Anaphylaxis	2.0
L.	Environmental Emergencies	2.0

M.	Behavioral & Psychiatric Emergencies	2.0
N.	Pediatric Emergencies	8.0
O.	Obstetrical Emergencies	2.0
P.	The Patient in Shock to include all forms of vascular access	2.0

**TOTAL HOURS: 70.0**

**Note:** The documentation must include the date(s) and time(s) the training took place, and the instructors who monitored the training.

II. The minimum clinical Course content to meet both AAMS and local requirements shall be as follows:

<u>MODULE</u>	<u>TOPIC</u>	<u>HOURS</u>
A.	Labor and Delivery	24.0
B.	Neonatal ICU	24.0
C.	Emergency Department	24.0
D.	Operating Room	12.0
E.	Critical Care	24.0
<b>TOTAL HOURS:</b>		<b><u>108.0</u></b>

III. Nothing in the above listed content is meant to limit the Medical Director’s ability to augment the didactic training to meet the agency’s specific needs.

IV. The agency’s Medical Director may adjust the hours devoted to a specific clinical rotation, depending on the nurse’s background, but not the total number of required hours in each clinical area.

V. Upon completion of the didactic and clinical portions of the EMS RN Training Program, the EMS RN must successfully pass the Health District’s ALS Licensure Examination with a minimum score of 80% (within the last (6) months) if he/she plans to work for a permitted EMS agency. The EMS RN is allowed three (3) opportunities to successfully complete the Health District’s ALS Licensure Examination. Applicants who fail the examination must schedule subsequent examinations with the OEMSTS and pay all required non-refundable, non-transferable fee(s) for each examination.

VI. If unsuccessful, the EMS RN may not take the written licensure examination for at least one (1) year after the third failed attempt to be eligible for subsequent examinations.

VII. Rotorwing/CCT EMS RNs must complete an internship that consists of no less than 120 hours of Field experience under the direction of an EMS RN who, at a minimum, is endorsed as an EMS Instructor I.

VIII. The EMS RN must successfully demonstrate the following procedures:

- A. All procedures listed on the “*Physician Advisor Verification of EMS Registered Nurse Skills*” form as required by the agency Medical Director;
- B. All procedures as listed on the most current version of the Health District “*Skills Proficiency Record*” (signed off within the last six (6) months);
- C. Five (5) endotracheal intubations on a human Patient, live or simulated;
- D. Two (2) catheter thoracostomies, either live or simulated; and
- E. One (1) surgical cricothyroidotomy, either live or simulated.

- IX. Upon completion of the above listed requirements, the OEMSTS will issue an Endorsement card permitting the EMS RN to function as an EMS RN with a Clark County permitted Agency.
- X. The Endorsement will expire on the date that appears on the holder's RN and EMS RN Endorsement card, or on the date of separation from employment as an EMS RN.
- XI. The Endorsement is renewable if the holder:
  - A. Renews both the RN and EMS RN licenses;
  - B. Continues employment with the permitted EMS Agency;
  - C. Submits current certification in CPR;
  - D. Submits current certification in advanced cardiac life support procedures for Patients who require ALS care;
  - E. Submits current certification in life support procedures for pediatric Patients who require ALS care; and
  - F. Submits payment of all required non-refundable, non-transferable fee(s).
- VIII. An Applicant who has had a lapse in employment with a permitted Ambulance Service or Air Ambulance Service for more than six (6) months will be required to retake the licensure examination.

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**DISTRICT PROCEDURE FOR  
ENDORSEMENT TO ADMINISTER IMMUNIZATIONS AND  
DISPENSE MEDICATION (AI/DM) IN RESPONSE TO A  
PUBLIC HEALTH EMERGENCY**

(EMS Regulations Section 400.600)

**PURPOSE:** To standardize the training process for Clark County AEMTs and Paramedics for Endorsement to administer immunizations and dispense medication in response to a Public Health Emergency (PHE).

**PREREQUISITES:** Current Clark County certification as an AEMT or Paramedic.

**PROCEDURE:**

Application Process

- I. An Applicant for AI/DM Endorsement shall:
  - A. Complete the “*Application for AI/DM Endorsement.*”
  - B. Pay all required non-refundable, non-transferable fee(s).
  - C. Provide proof of successful completion of a training program for administering immunizations and dispensing medications in response to a PHE, as approved by the OEMSTS.
  - D. Submit a copy of current certification in CPR.
  - E. If Paramedic, submit a copy of current certification in advanced cardiac life support procedures for Patients who require ALS care.
  - F. If Paramedic, submit a copy of current certification in life support procedures for pediatric Patients who require ALS care.
- II. Upon successful completion of the above listed requirements, the OEMSTS will add an Endorsement to the Applicant’s AEMT or Paramedic Certificate.
- III. The holder of an AI/DM Endorsement may participate in a public vaccination clinic or training exercise sponsored by a local public health authority if:
  - A. A list of the AEMT and Paramedic Persons who are participating in the clinic or training exercise is approved by the District before the clinic or training exercise begins; and
  - B. The holder of the Endorsement is under the direct supervision of the Health Officer or his designee.
- IV. The holder of an AI/DM Endorsement may participate in a public vaccination clinic in response to a PHE if:
  - A. A list of the AEMT and Paramedic Persons who are participating in the clinic is provided to the District within 48 hours after the event begins; and
  - B. The holder of the Endorsement is under the direct supervision of the Health Officer or his designee.

Renewal Process

- I. An Applicant for renewal of an AI/DM Endorsement shall:
  - A. Complete all requirements for recertification, and
  - B. Pay all required non-refundable, non-transferable fee(s).

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# **SKILLS PROCEDURE**

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## **DISTRICT PROCEDURE FOR SKILLS PROFICIENCY VERIFICATION**

- PURPOSE:** To standardize proficiency in the performance of EMS skills appropriate to the level of Certification/Endorsement within the Clark County EMS System.
- DEFINITION:** An EMS skill is any skill which is taught as a part of the most current National EMS Education Standards, as approved by the Health District, and identified on the applicable *“Skills Proficiency Record.”*
- PROCEDURE:**
- I. All levels of Emergency Medical Care providers are required to have their skills signed off as defined on the *“Skills Proficiency Record”* prior to:
    - A. Licensure
    - B. Added Endorsement to current Certificate or License
    - C. Renewal of Expired Nevada Certificate
  - II. All EMS RNs are required to have their skills signed off as defined on the *“Skills Proficiency Record”* prior to:
    - A. Endorsement as an EMS RN; or
    - B. Endorsement as an EMS Instructor
  - III. All other Applicants listed above must have their skills signed off (within the last six (6) months) as defined on the *“Skills Proficiency Record.”*
  - IV. All skills on the *“Skills Proficiency Record”* must be signed off by a currently Endorsed Clark County EMS Instructor appropriate to the level of certification.
  - V. Completed *“Skills Proficiency Records”* shall be retained for three (3) years by a Health District approved Authorized EMS Training Center.

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# **LICENSURE PROCEDURES**

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# DISTRICT PROCEDURE FOR LICENSURE

(EMS Regulations Section 500)

**PURPOSE:** To standardize the process for all licensure Applicants while maintaining appropriate quality control for the licensing agency.

**DEFINITION:** A licensure Applicant is an individual who:

1. Is currently certified as an EMT, AEMT, or Paramedic in Clark County; and
2. Has a letter from a Clark County permitted Ambulance Service, Air Ambulance Service, or Firefighting Agency verifying employment or intent for employment at the specific level the Applicant will be utilized, not to exceed the Applicant's level of certification.

**Note:**

If Reciprocity Applicant, please also refer to the “**District Procedure for Certification via Reciprocity.**”

Paramedic Applicants who have not held a License within the past year, please also refer to the “**District Procedure for Provisional Licensure.**”

The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

Application Process

- I. The following documentation must be submitted to the OEMSTS prior to EMS licensure testing:
  - A. Complete the “*Application for Initial Certification/Licensure;*”
  - B. Payment of all required non-refundable, non-transferable fee(s);
  - C. Copy of government-issued photo identification card;
  - D. Copy of current certification in CPR;
  - E. Paramedic Applicants must submit:
    1. Copy of current certification in advanced cardiac life support procedures for Patients who require ALS care.
    2. Copy of current certification in life support procedures for pediatric Patients who require ALS care; and copy of current certification in prehospital trauma life support procedures.

**Note:** Reciprocity Applicants will be required to complete this requirement within twelve (12) months of initial Clark County Paramedic certification. Failure to do so will result in the certification being withdrawn by the Health Officer.
    3. Evidence of completion of a course in prehospital trauma life support procedures.

**Note:** Reciprocity Applicants will be required to complete this requirement within twelve (12) months of initial Clark County Paramedic certification. Failure to do so will result in the certification being withdrawn by the Health Officer.
  - F. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District's “*Skills Proficiency Record.*”

Exception:

1. Applicant passed the National Registry practical examination at the appropriate level within the past six months; or
  2. Applicant's name appears on a Course Completion Record at the appropriate level within the last six months.
- G. A form documenting a physical examination (within the last twelve (12) months) completed by a physician, PA, or APRN licensed in the State of Nevada verifying the Applicant's suitability for clinical practice.
- H. A form documenting the results of a TB test (signed off within the last twelve (12) months).
- Note:** If the Applicant has a history of a positive TB skin test, a chest x-ray must be done prior to the physical examination to be evaluated by the physician, PA, or APRN performing the physical examination to determine the Applicant is free of disease.
- I. Two complete sets of fingerprints and written permission authorizing the Health District to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report, unless documentation already on file within the past two (2) years.

Testing Process

- I. Testing is scheduled by the OEMSTS at the Health District or predesignated location for individuals applying for EMS licensure.
- II. Successfully pass the Health District's appropriate licensure examination with a minimum score of 80% (within the last six (6) months). Applicants who fail the examination must schedule subsequent examinations with the OEMSTS and pay all required non-refundable, non-transferable fee(s) for each examination.

**Note:** The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least three (3) weeks prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to "**Eligibility for Accommodations Due to Disability**" or contact the OEMSTS.
- III. An Applicant is allowed three (3) opportunities to successfully complete the written licensure examination. Applicants requesting a fourth attempt must submit to the OEMSTS, at a minimum, written documentation from the Applicant's sponsoring agency of successful completion of remedial training on *Emergency Medical Care Protocols* for the Clark County EMS System. The remedial training must be conducted by a Clark County endorsed EMS Instructor.
- IV. The remedial training must be successfully completed before the fourth attempt. A maximum of six (6) attempts will be allowed.
- V. If unsuccessful, the Applicant may not take the written licensure examination for at least one (1) year after the sixth failed attempt to be eligible for subsequent examinations.
- VI. An Applicant who has had a lapse in licensure with a permitted Ambulance Service for more than six (6) months will be required to retake the licensure examination prior to obtaining a new License.

**DISTRICT PROCEDURE FOR  
AIR AMBULANCE ATTENDANT**  
(EMS Regulations Section 500)

**PURPOSE:** To standardize the process for licensure of all Air Ambulance Attendant Applicants while maintaining appropriate quality control for the licensing agency.

**DEFINITION:** An Air Ambulance Attendant Applicant is an individual who:

1. Is currently certified as a Paramedic in Clark County;
2. Has evidence of three (3) years of Field experience at the Paramedic level; and
3. Has a letter from an Air Ambulance Service verifying employment or intent for employment as an Air Ambulance Attendant.

**Note:**

If Reciprocity Applicant, please also refer to the “**District Procedure for Certification via Reciprocity.**”

If Paramedic Applicant who has not held a Paramedic License within the past year, please also refer to the “**District Procedure for Provisional Licensure.**”

A Paramedic Applicant for a Fixed Wing Ambulance Agency is exempt from completing a 120-hour internship. The Paramedic will be required to successfully complete a 120-hour internship if the Paramedic goes to work for a 9-1-1 responding Agency.

The Applicant will be given six (6) months to complete the process before the file is destroyed.

**PROCEDURE:**

Application Process

- I. The following documentation must be submitted to the OEMSTS prior to EMS licensure testing:
  - A. Résumé outlining evidence of three (3) years of Field experience as a Paramedic (unless currently meets the requirement as a Clark County Paramedic).

**Note:** Contact information for all listed employers must be provided.
  - B. Copy of government-issued photo identification card.
  - C. Complete the “*Application for Initial Certification/Licensure.*”
  - D. Payment of all required non-refundable, non-transferable fee(s).
  - E. Copy of current certification in CPR.
  - F. Copy of current certification in advanced cardiac life support procedures for Patients who require ALS care.
  - G. Copy of current certification in life support procedures for pediatric Patients who require ALS care; and copy of current certification in prehospital trauma life support procedures.

**Note:** Reciprocity Applicants will be required to complete this requirement within twelve (12) months of initial Clark County Paramedic certification. Failure to do so will result in the certification being withdrawn by the Health Officer.
  - H. Evidence of completion of a District approved Air Ambulance Attendant Course that includes:

1. Documentation of all clinical skills performed and didactic material covered, including date(s) and time(s);
  2. Names of all instructors who signed off on each skill performed; and
  3. Copy of the Applicant's signed Medical Flight Crew Orientation completion certificate signed by the Clinical Education Coordinator.
- J. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District's "*Skills Proficiency Record.*"

Exception:

1. Applicant passed the National Registry practical examination at the appropriate level within the past six months; or
  2. Applicant's name appears on a Course Completion Record at the appropriate level within the last six months.
- K. A form documenting a physical examination (within the last twelve (12) months) completed by a physician, PA, or APRN licensed in the State of Nevada verifying the Applicant's suitability for clinical practice.
- L. A form documenting the results of a TB test (signed off within the last twelve (12) months).
- Note:** If the Applicant has a history of a positive TB skin test, a chest x-ray must be done prior to the physical examination to be evaluated by the physician, PA, or APRN performing the physical examination to determine the Applicant is free of disease.
- M. Two complete sets of fingerprints and written permission authorizing the Health District to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report, unless documentation already on file within the past two (2) years.

Testing Process:

- I. Testing is scheduled by the OEMSTS at the Health District or predesignated location for individuals applying for EMS licensure.
- II. Successfully pass the Health District's ALS Licensure Examination with a minimum score of 80% (within the last six (6) months). Applicants who fail the examination must schedule subsequent examinations with the OEMSTS and pay the required non-refundable, non-transferable fee(s) for each examination.

**Note:** The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least three (3) weeks prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to "**Eligibility for Accommodations Due to Disability**" or contact the OEMSTS.

- III. An Applicant is allowed three (3) opportunities to successfully complete the written licensure examination. Applicants requesting a fourth attempt must submit to the OEMSTS, at a minimum, written documentation from the Applicant's sponsoring agency of successful completion of remedial training on *Emergency Medical Care Protocols* for the Clark County EMS System. The remedial training must be conducted by an EMS Instructor.

- IV. The remedial training must be successfully completed before the fourth attempt. A maximum of six (6) attempts will be allowed.
- V. If unsuccessful, the Applicant may not take the written licensure examination for at least one (1) year after the sixth failed attempt to be eligible for subsequent examinations.
- VI. An Applicant who has had a lapse in licensure will be required to retake the licensure examination if it has been more than six (6) months since they have been licensed with a permitted Ambulance Service.

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# DISTRICT PROCEDURE FOR PROVISIONAL LICENSURE

(EMS Regulations Section 500.400)

**PURPOSE:** To standardize the process for Paramedic Applicants applying for provisional licensure within the Clark County EMS System.

**DEFINITION:** A provisional licensure Applicant is an individual who:

1. Has a letter of intent to hire or letter of sponsorship from an Authorized EMS Training Center or a Clark County permitted Ambulance Service, Air Ambulance Service, or Firefighting Agency; and
2. Has successfully completed the didactic and clinical sections of a national standard Paramedic Course curriculum and needs to complete the internship portion of the Paramedic training program; or
3. Has completed the Health District's "*Application for Initial Certification/Licensure*" for Paramedic reciprocity and needs to complete the Field internship; or
4. Is certified in Clark County as a Paramedic and has not held a License within the last year.

## **PROCEDURE:**

- I. Complete the Health District's "*Application for Initial Certification/Licensure*," along with:
  - A. Payment of all required non-refundable, non-transferable fee(s).
  - B. Copy of current certification in CPR.
  - C. Copy of current certification in advanced life support procedures for Patients who require ALS care.
  - D. Copy of current certification in life support procedures for pediatric Patients who require ALS care; and copy of current certification in prehospital trauma life support procedures.

**Note:** Any Paramedic Applicant who has not previously completed these courses will be required to do so within twelve (12) months of initial Clark County Paramedic certification. Failure to do so will result in the certification being withdrawn by the Health Officer.

- E. Copy of government-issued photo identification card.
- F. Copy of skills (signed off within the last six (6) months) appropriate to the level of certification as defined on the Health District's "*Skills Proficiency Record*."
- G. A form documenting a physical exam completed by a physician, PA or APRN licensed in the State of Nevada verifying the Applicant's suitability for clinical practice (within the last twelve (12) months).
- H. A form documenting the results of a TB test (within the last twelve (12) months).

**Note:** If the Applicant has a history of a positive TB skin test, a chest x-ray must be done prior to the physical examination to be evaluated by the physician, PA or APRN performing the physical examination to determine the Applicant is free of disease.

- I. Two complete sets of fingerprints and written permission authorizing the Health District to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report, unless documentation already on file within the past two (2) years.
- II. Successfully pass the Health District's ALS Licensure Examination with a minimum score of 80% (within the last six (6) months).

**Note:** The Health District will offer reasonable and appropriate accommodations for written examinations for those persons with documented disabilities. Applicants requesting accommodations should apply at least three (3) weeks prior to the test date. Special considerations will be made on a case-by-case basis. For eligibility information, please refer to "**Eligibility for Accommodations Due to Disability**" or contact the OEMSTS.
- III. A Paramedic student or out-of-state Intern who holds a Provisional License must complete a period of Field evaluation with a permitted 9-1-1 responding agency under the direction of an Authorized EMS Training Center and the permittee's EMS Instructor. The period of Field evaluation shall not be less than 360 hours and the student/Intern must demonstrate competency in accordance with the "**District Procedure for Paramedic Training and Endorsement.**"
- IV. Paramedic reciprocity Applicants and Clark County certified Paramedics who have not held a Paramedic License within the last year must complete, at a minimum, 120 hours of Field evaluation, as approved by the OEMSTS, under the direction of the permitted agency's EMS Instructor and demonstrate competency. If the OEMSTS determines that the Field experience was not adequate, the Applicant may be required to complete additional shifts as deemed appropriate.

**Note:** A Clark County Certified Paramedic who is hired by a permitted agency that doesn't respond to 9-1-1 calls will be required to complete the 120 hours of Field evaluation if the Paramedic is hired by a permitted agency that responds to 9-1-1 calls.
- V. The holder of a Provisional License may only perform approved procedures under the direct supervision of an EMS Instructor until successful completion of the Field internship.
- VI. The Paramedic Intern must sign the Provisional License prior to issuance.
- VII. A Provisional License will expire at the completion of a training Course and/or the issuance of a Clark County Certificate and/or License.
- VIII. A Provisional License shall not be valid for more than one (1) year from the date of issuance and is not renewable.



# **PERMIT PROCEDURES**

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**DISTRICT PROCEDURE FOR  
INITIAL AMBULANCE PERMIT**  
(EMS Regulations Section 800)

**PURPOSE:** To establish a standard guideline for issuance of an Initial Ambulance Permit.

**DEFINITION:** An Applicant is any Person who proposes to operate an Ambulance Service, Air Ambulance Service or Firefighting Agency at the EMT, AEMT, or Paramedic Endorsement level, including Critical Care Transport and Community Paramedicine.

**PROCEDURE:**  
I. Complete the Health District's "*Application for Initial Ambulance Permit*" that contains at least the following information:

A. Section 1: Applicant Information

1. Owner(s) name/ mailing address/ phone number.
2. Name of corporation/partnership/department.
3. Trade name or fictitious name of service or volunteer service (if applicable).
4. Resident managing agency of service or volunteer service (if applicable).
5. Name, address, title, and percent ownership of officers, partners, directors, managing agents and other owners. If the Applicant is a corporation or partnership of any type, include the business interest of the Persons listed.
6. Registered owner of the Ambulance Units (if other than the Applicant).
7. Legal owner of the Ambulance Units (if other than the Applicant).
8. Type of Permit, i.e. commercial ground Ambulance Service, commercial Air Ambulance Service, Firefighting Agency, Rotorwing, Fixed Wing, Special Purpose, Critical Care Transport.
9. Insurance carrier, and amount.
10. Address and description of main location of Ambulance Service.
11. Address of all substations.
12. Number of red lights and sirens permits as issued by the Nevada Highway Patrol.
13. Radio system(s) used to contact the receiving facilities.
14. Description of all Ambulance/Air Ambulance Units.

B. Section 2: Background

1. Has the Applicant ever been issued a Permit for Ambulance or Air Ambulance Service in any other state or jurisdiction?
2. Has the Applicant ever had a Permit for Ambulance or Air Ambulance Service revoked or suspended in any other state or jurisdiction?

- C. Section 3: Additional information
  - 1. A “*Personal Information Request*” form completed by the agency’s medical director.
  - 2. Two complete sets of fingerprints for each Applicant. If the Applicant is a corporation, partnership, or sole proprietor, two sets of fingerprints for each Person named under A.5. above must be provided.
  - 3. A schedule of rates charged for transport as outlined in NRS 450B.235.
- D. Section 4: Signature and Date
  - 1. The Applicant’s signature certifying that all their Attendants and Air Ambulance Attendants are Licensed at the appropriate level by the Health District.
  - 2. The Applicant’s signature certifying that the Applicant has received, read, and understands the EMS Regulations and will fully comply with all sections included therein.
  - 3. The Applicant’s signature certifying that each air/ground Ambulance has been inspected by a professional mechanic who has found it to be in safe operating condition, and each ground Ambulance meets the most current standards established by the U.S. Department of Transportation.
  - 4. The Applicant’s signature and date certifying that all information on the application is true and correct, and the Applicant must provide any additional information needed to clarify the above related to the Applicant’s pending Permit which the OEMSTS has requested.
- II. Applicant must schedule all Ambulance/Air Ambulance Units to be inspected for compliance with EMS Regulations.
- III. Submit payment of the required non-refundable, non-transferable fee(s).
- IV. An initial Permit expires on June 30<sup>th</sup> following the date of issuance, and may be renewed annually on July 1<sup>st</sup>.
- V. A Permit may be renewed if the Applicant submits an “*Application for Renewal of Ambulance Permit*” at least sixty (60) days prior to the date on which the current Permit expires, and:
  - A. Has had all Ambulance/Air Ambulance Units inspected within the past twelve (12) months for compliance with EMS Regulations; and
  - B. Has submitted payment of all required non-refundable, non-transferable fee(s).

**DISTRICT PROCEDURE FOR  
RENEWAL OF AMBULANCE PERMIT**  
(EMS Regulations Section 800)

**PURPOSE:** To establish a standard guideline for Renewal of Ambulance Permit.

**DEFINITION:** An Applicant is any Person who proposes to renew the Ambulance Permit to operate an Ambulance Service, Air Ambulance Service or Firefighting Agency at the EMT, AEMT, or Paramedic Endorsement level, including Critical Care Transport and Community Paramedicine.

**PROCEDURE:**

- I. Complete the Health District's "*Application for Renewal of Ambulance Permit*" that contains at least the following information:
  - A. Section 1: Applicant Information
    1. Owner(s) name/ mailing address/ phone number.
    2. Name of corporation/partnership/department.
    3. Trade name or fictitious name of service or volunteer service (if applicable).
    4. Resident managing agency of service or volunteer service (if applicable).
    5. Name, address, title, and percent ownership of officers, partners, directors, managing agents and other owners. If the Applicant is a corporation or partnership of any type, include the business interest of the Persons listed.
    6. Registered owner of the Ambulance Units (if other than the Applicant).
    7. Legal owner of the Ambulance Units (if other than the Applicant).
    8. Type of Permit, i.e. commercial ground Ambulance Service, commercial Air Ambulance Service, Firefighting Agency, Rotorwing, Fixed Wing, Special Purpose, Critical Care Transport.
    9. Insurance carrier, and amount.
    10. Address and description of main location of Ambulance Service.
    11. Address of all substations.
    12. Number of red lights and sirens permits as issued by the Nevada Highway Patrol.
    13. Radio system(s) used to contact the receiving facilities.
    14. Description of all Ambulance/Air Ambulance Units.
  - B. Section 2: Background
    1. Has the Applicant ever been issued a Permit for Ambulance or Air Ambulance Service in any other state or jurisdiction?
    2. Has the Applicant ever had a Permit for Ambulance or Air Ambulance Service revoked or suspended in any other state or jurisdiction?

- C. Section 3: Additional information
  - 1. A “*Personal Information Request*” form completed by the agency’s medical director.
  - 2. A schedule of rates charged for transport as outlined in NRS 450B.235.
- D. Section 4: Signature and Date
  - 1. The Applicant’s signature certifying that all employed Attendants and Air Ambulance Attendants are Licensed at the appropriate level by the Health District.
  - 2. The Applicant’s signature certifying that the Applicant has received, read, and understands the EMS Regulations and will fully comply with all sections included therein.
  - 3. The Applicant’s signature certifying that each air/ground Ambulance has been inspected by a professional mechanic who has found it to be in safe operating condition, and each ground Ambulance meets the most current standards established by the U.S. Department of Transportation.
  - 4. The Applicant’s signature and date certifying that all information on the application is true and correct, and the Applicant must provide any additional information needed to clarify the above related to the Applicant’s pending Permit which the OEMSTS has requested.
- II. Applicant must schedule all Ambulance/Air Ambulance Units to be inspected for compliance with EMS Regulations.
- III. Submit payment of the required non-refundable, non-transferable fee(s).
- IV. The renewal Permit expires on June 30 following the date of issuance, and may be renewed annually on July 1.
- V. A Permit may be renewed if the Applicant submits an “*Application for Renewal of Ambulance Permit*” at least sixty (60) days prior to the date on which the current Permit expires, and has had all Ambulance/Air Ambulance Units inspected within the past twelve (12) months for compliance with EMS Regulations

# **RECERTIFICATION PROCEDURES**

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# DISTRICT PROCEDURE FOR APPLICATION FOR RECERTIFICATION

(EMS Regulations Section 300)

**PURPOSE:** To standardize the application process for all EMTs, Advanced EMTs and Paramedics applying for recertification within the Clark County EMS System.

**DEFINITION:** An Applicant is an individual who is currently certified as an EMT, Advanced EMT or Paramedic in Clark County and is applying for recertification.

## PROCEDURE:

- I. Complete the Health District's "*Application for Recertification*" that contains at least the following information:
  - A. Section 1 - Applicant Information
    1. Name
    2. Mailing/home address
    3. Telephone number
    4. Date of birth
    5. Gender
    6. Last 4 digits of Social Security number
  - B. Section 2 - Background
    1. Has your current out-of-state EMS Certificate/License been under any investigation or review, if applicable?
    2. Have you ever surrendered any type of EMS Certificate/License in any state or local EMS authority that had issued you a License, if applicable?
    3. Have you ever been subject to limitation, suspension, or revocation of an EMS Certificate/License, including your right to practice in a health care occupation?
    4. Have you ever been denied any type of EMS Certificate/License in any state or local EMS authority by a state agency?
  - C. Section 3 - Criminal Background
    1. Have you ever received deferred adjudication for a felony or misdemeanor?
    2. Have you ever been convicted of a felony?
    3. Have you ever been convicted of a gross misdemeanor?
    4. Have you ever been convicted of a misdemeanor other than a minor traffic violation, e.g. speeding ticket or parking violation?
  - D. Section 4 - Military Background (if applicable)
    1. Branch of service
    2. Length of service
    3. Military Occupational Specialty
  - E. Section 5 - Signature and Date
    1. The Applicant's signature and date are required affirming that:
      - a. All information on the application is true and correct. The Applicant must

provide any additional information needed to clarify the above relative to the Applicant's pending certification which the OEMSTS has requested.

- b. The required CME hours have been completed.
- c. The Applicant has knowledge of, and is compliant with, the guidelines concerning safe and appropriate injection practices as set forth in NRS 450B.165.
- d. The Applicant understands his/her obligation as a Certified or Licensed Person providing medical services to report any findings of abuse, neglect, or exploitation of children, elderly, or vulnerable Persons within 24 hours from occurrence as set forth in NRS 432B.220, NRS 200.5093, and NRS 200.50935.

F. Section 5 - Child Support Information

The Applicant must provide a statement indicating compliance with child support payment in accordance with NRS 450B.183.

- II. Submit payment of all required non-refundable, non-transferable fee(s).

# DISTRICT PROCEDURE FOR EMT RECERTIFICATION

(EMS Regulations Section 300.110)

**PURPOSE:** To define continuing education requirements for EMTs in the Clark County EMS System to keep up with the rapid changes in emergency medical care and to respond to needs that are identified by quality improvement programs.

**DEFINITION:** Recertification for EMT status requires completion of 24 hours of required continuing medical education biennially and current certification in CPR.

## SECTION I: REQUIRED CONTINUING MEDICAL EDUCATION (CME)

The following table outlines the required topics and hours of CME that must be completed to recertify at the EMT level:

TOPICS*	HOURS
PREPARATORY	1 Hour
AIRWAY	2 Hours
OB, INFANTS, CHILDREN	2 Hours
PATIENT ASSESSMENT	3 Hours
MEDICAL/BEHAVIORAL	4 Hours
TRAUMA	4 Hours
ELECTIVE	8 Hours

\* Go to [www.nremt.org](http://www.nremt.org) for suggested topics for each listed category

In addition to the above, you must submit documentation of completion of a Health District approved CPR course. The CPR card must be current and shall not expire the same month your Clark County Certificate expires. Verification may be in the form of an instructor’s signature on the course roster or copies of both sides of the CPR card. **Note:** The CPR course may not be applied toward CME hours.

## PROCEDURE:

- I. Submit a completed “*Application for Recertification.*”
- II. Submit proof of residency or EMS employment within Clark County.
- III. Submit payment of all required non-refundable, non-transferable fee(s).
- IV. Submit one (1) of the following:
  - A. Current National Registry EMT card.  
**Note:** If you have not received your updated National Registry EMT card at the time your Clark County Certificate expires you will be required to submit copies of the paperwork given to National Registry for recertification; or
  - B. Certificate of completion of a Health District approved EMT (24 hour) Refresher Course; or

- C. An “*EMT Recertification Report*” listing all Health District or CECBEMS or CAPCE approved CME classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator. Certificates of completion for all Health District approved distributive education must be included, if applicable.
- V. Submit proof of completion of a course of instruction in Weapons of Mass Destruction as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)
- VI. Submit proof of completion of a course of instruction in Health Alert Network training as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)

**SECTION II: ADMINISTRATIVE CRITERIA — EMT**

- I. All CME Courses/Classes must be Health District, CECBEMS, or CAPCE approved.
- II. Each certified individual is responsible for maintaining documentation of their CME activities. This documentation must be kept on file for a minimum of three (3) years for audit purposes. If employed by a permitted agency, CME documentation must be provided to the agency for placement in the individual’s CME file.
- III. Permitted EMS agencies and training centers must maintain CME files for their employees that include copies of rosters, tests, and skills proficiency records from CME Classes and/or refresher Course completion certificates. These copies must be retained for at least three (3) years for audit purposes.
- IV. If an EMT is attending a SNHD approved AEMT or Paramedic training program and his/her EMT Certificate will expire prior to completing the training, the EMT may recertify at the current level provided the recertification requirement has been met.
- V. All required documentation of CME hours must be received by the OEMSTS at least sixty (60) days prior to Certificate expiration with audit procedures to be conducted by the OEMSTS within thirty (30) days of submission of recertification documentation. False statements or submission of false documents may be sufficient cause for forfeiture of the right to recertification by the Southern Nevada Health District.
- VI. Should an audit identify a deficiency in recertification documentation, the provider shall be immediately eligible to recertify if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration, the Certificate holder shall be decertified.

**DISTRICT PROCEDURE FOR  
ADVANCED EMT RECERTIFICATION**  
(EMS Regulations Section 300.210)

**PURPOSE:** To define continuing education requirements for Advanced EMTs in the Clark County EMS System to keep up with the rapid changes in emergency medical care and to respond to needs that are identified by quality improvement programs.

**DEFINITION:** Recertification for Advanced EMT status requires completion of 36 hours of continuing medical education biennially and current certification in CPR.

**SECTION I: REQUIRED CONTINUING MEDICAL EDUCATION (CME)**

The following table outlines the required topics and hours of CME that must be completed to recertify at the AEMT level:

TOPICS*	HOURS
OPERATIONAL TASKS	1 Hour
TRAUMA	5 Hours
MEDICAL EMERGENCIES	6 Hours
AIRWAY/BREATHING/CARDIOLOGY	12 Hours
OB/PEDS	12 Hours

\* Go to [www.nremt.org](http://www.nremt.org) for suggested topics for each listed category

In addition to the above, you must submit documentation of completion of a Health District approved CPR course. The CPR card must be current and shall not expire the same month your Clark County Certificate expires. Verification may be in the form of an instructor’s signature on the course roster or copies of both sides of the CPR card. **Note:** The CPR course may not be applied toward CME hours.

**PROCEDURE:**

- I. Submit a completed “*Application for Recertification.*”
- II. Submit proof of residency or EMS employment within Clark County.
- III. Submit payment of all required non-refundable, non-transferable fee(s).
- IV. Submit one (1) of the following:
  - A. Current National Registry AEMT card.  
**Note:** If you have not received your updated National Registry AEMT card at the time your Clark County Certificate expires you will be required to submit copies of the paperwork given to National Registry for recertification; or
  - B. Certificate of completion of a Health District approved Advanced EMT (36 hour) Refresher Course; or
  - C. An “*AEMT Recertification Report*” listing all Health District or CECBEMS or CAPCE approved CME Classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator. Certificates of completion for all Health District approved distributive education must be included, if applicable.

- V. Submit proof of completion of a course of instruction in Weapons of Mass Destruction as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)
- VI. Submit proof of completion of a course of instruction in Health Alert Network training as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)

**SECTION II: ADMINISTRATIVE CRITERIA—AEMT**

- I. All CME Courses/Classes must be Health District, CECBEMS, or CAPCE approved. Each certified individual is responsible for maintaining documentation of their CME activities. This documentation must be kept on file for a minimum of three (3) years for audit purposes. If employed by a permitted agency, CME documentation must be provided to the agency for placement in the individual's CME file.
- II. Permitted EMS agencies and training centers must maintain CME files for their employees that include copies of rosters, tests, and skills proficiency records from CME Classes, and refresher Course completion certificates. These copies must be retained for at least three (3) years for audit purposes.
- III. If an AEMT is attending a SNHD approved Paramedic training program and his/her AEMT Certificate will expire prior to completing the Paramedic training, the AEMT may recertify provided the recertification requirement has been met.
- IV. All required documentation of CME hours must be received by the OEMSTS at least sixty (60) days prior to Certificate expiration with audit procedures to be conducted by the OEMSTS within thirty (30) days of submission of recertification documentation. False statements or submission of false documents may be sufficient cause for forfeiture of the right to recertification by the Southern Nevada Health District.
- V. Should an audit identify a deficiency in recertification documentation, the provider shall be immediately eligible to recertify if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration, the Certificate holder shall be decertified.

# DISTRICT PROCEDURE FOR PARAMEDIC RECERTIFICATION

(EMS Regulations Section 300.310)

**PURPOSE:** To define continuing education requirements for Paramedics in the Clark County EMS System to keep up with the rapid changes in emergency medical care and to respond to needs that are identified by quality improvement programs.

**DEFINITION:** Recertification for Paramedic status requires completion of sixty (60) hours of continuing medical education biennially and current certification in CPR, advanced cardiac life support procedures, and life support procedures for pediatric Patients who require ALS care.

## SECTION I: REQUIRED CONTINUING MEDICAL EDUCATION (CME)

The following table outlines the required topics and hours of CME that must be completed to recertify at the Paramedic level:

TOPICS*	HOURS
OPERATIONAL TASKS	2 Hours
TRAUMA	6 Hours
MEDICAL EMERGENCIES	8 Hours
AIRWAY/BREATHING/CARDIOLOGY	16 Hours
OB/PEDS	16 Hours
ELECTIVE**	12 Hours

\* Go to [www.nremt.org](http://www.nremt.org) for suggested topics for each listed category

\*\* If licensed provider, content to be determined by agency's Medical Director

In addition to the above, you must submit documentation of completion of a Health District approved CPR course. The CPR card must be current and shall not expire the same month your Clark County Certificate expires. Verification may be in the form of an instructor's signature on the course roster or copies of both sides of the CPR card. **Note:** The CPR course may not be applied toward CME hours.

### PROCEDURE:

- I. Submit a completed "Application for Recertification."
- II. Submit proof of residency or EMS employment within Clark County.
- III. Submit payment of all required non-refundable, non-transferable fee(s).
- IV. Submit one (1) of the following:

A. Current National Registry Paramedic card.

**Note:** If you have not received your updated National Registry Paramedic card at the time your Clark County Certificate expires you will be required to submit copies of the paperwork given to National Registry for recertification; or

B. Certificate of completion of a Health District approved Paramedic (60 hour) Refresher Course; or

- C. A “*Paramedic Recertification Report*” listing all Health District or CEBEMS or CAPCE approved CME Classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator. Certificates of completion for all Health District approved distributive education must be included, if applicable.
- V. Submit proof of completion of a course of instruction in Weapons of Mass Destruction as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)
- VI. Submit proof of completion of a course of instruction in Health Alert Network training as defined in NRS 450B.180, unless already on file at the OEMSTS. (This course is available on the SNHD website free of charge.)

## **SECTION II: ADMINISTRATIVE CRITERIA — PARAMEDIC**

- I. All CME Courses/Classes must be Health District, CECBEMS, or CAPCE approved. Each certified individual is responsible for maintaining documentation of their CME activities. This documentation must be kept on file for a minimum of three (3) years for audit purposes. If employed by a permitted agency, CME documentation must be provided to the agency for placement in the individual’s CME file.
- II. Each certified individual must submit documentation of completion of a course in advanced cardiac life support procedures for Patients who require ALS care. The provider card must be current and shall not expire the same month the Clark County Certificate expires. Verification may be in the form of an instructor’s signature on the course roster or copies of both sides of the provider card.
- III. Each certified individual must submit documentation of completion of a course in life support procedures for pediatric Patients who require ALS care. The provider card must be current and shall not expire the same month the Clark County Certificate expires. Verification may be in the form of an instructor’s signature on the course roster or copies of both sides of the provider card.
- IV. Permitted EMS agencies and training centers must maintain CME files for their employees that include copies of rosters, tests, skills proficiency records from CME Classes, and refresher Course completion certificates. These copies must be retained for at least three (3) years for audit purposes.
- V. All required documentation of CME hours must be received by the OEMSTS at least sixty (60) days prior to Certificate expiration with audit procedures to be conducted by the OEMSTS within thirty (30) days of submission of recertification documentation. False statements or submission of false documents may be sufficient cause for forfeiture of the right to recertification by the Southern Nevada Health District.
- VI. Should an audit identify a deficiency in recertification documentation, the provider shall be immediately eligible to recertify if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration, the Certificate holder shall be decertified.



# DISTRICT PROCEDURE FOR RENEWAL OF ENDORSEMENT AS A CRITICAL CARE PARAMEDIC

(EMS Regulations Section 400)

**PURPOSE:** To define continuing education requirements for renewal of Endorsement as a Critical Care Paramedic in the Clark County EMS System.

**DEFINITION:** Renewal of Endorsement as a Critical Care Paramedic requires completion of twelve (12) hours of continuing education specific to critical care topics in addition to the requirements for Paramedic recertification as defined in the **“District Procedure for Paramedic Recertification.”**

**PROCEDURE:**

- I. An Applicant for renewal of Endorsement as a Critical Care Paramedic must submit the following:
  - A. A *“Critical Care Paramedic Renewal Report”* sixty (60) days prior to Certificate expiration documenting twelve (12) hours of continuing education specific to critical care topics (this is in addition to the CMEs required for Paramedic recertification):
    1. If the CCT Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.
    2. If the CCT Endorsement was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is six (6) hours.
    3. If the CCT Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is twelve (12) hours.
  - B. Verification of participation as a Critical Care Paramedic with a permitted EMS agency; and
  - C. Payment of all required non-refundable, non-transferable fee(s).
- II. Upon successful completion of the above listed requirements, the OEMSTS will renew the Critical Care Endorsement on the Applicant’s Paramedic License.

**ADMINISTRATIVE CRITERIA — CRITICAL CARE PARAMEDIC**

- I. Each endorsed Critical Care Paramedic is responsible for maintaining documentation of continuing education. This documentation must be kept on file for a minimum of three (3) years for audit purposes.
- II. Permitted EMS agencies and training centers must maintain CME files for their employees/students that include copies of rosters, tests, and skills proficiency records. These copies must be retained for at least three (3) years for audit purposes.
- III. Supporting documentation must accompany the Health District approved *“Critical Care Paramedic Renewal Report”* form and be submitted to the OEMSTS at least sixty (60) days prior to Certification expiration. The OEMSTS will conduct random audits of documentation of continuing education. False statements or submission of false documents may be sufficient cause for forfeiture of the right of Endorsement as a Critical Care Paramedic.
- IV. Should an audit identify a discrepancy in the renewal documentation, the provider shall be immediately eligible to renew the Endorsement if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration the Applicant will no longer be endorsed as a

Critical Care Paramedic in the Clark County EMS System. Subsequently, the provider may apply for Endorsement via challenge in accordance with the **“District Procedure for Endorsement as a Critical Care Paramedic via Challenge.”**

# DISTRICT PROCEDURE FOR RENEWAL OF ENDORSEMENT TO PROVIDE COMMUNITY PARAMEDICINE SERVICES

(EMS Regulations Section 400.135)

**PURPOSE:** To define continuing education requirements for Paramedics endorsed to provide Community Paramedicine Services in the Clark County EMS System.

**DEFINITION:** Renewal of Endorsement to Provide Community Paramedicine Services requires twelve (12) hours of continuing education specific to community paramedicine in addition to the requirements for Paramedic recertification as defined in the “**District Procedure for Paramedic Recertification.**”

## **PROCEDURE:**

- I. An Applicant for renewal of Endorsement to Provide Community Paramedicine Services must submit the following:
  - A. A “*Community Paramedicine Services Renewal Report*” sixty (60) days prior to Certificate expiration documenting twelve (12) hours of continuing education specific to critical care topics (this is in addition to the CMEs required for Paramedic recertification:
    1. If the Endorsement to provide Community Paramedicine Services was issued less than six (6) months prior to the expiration date, there is no CME requirement.
    2. If the Endorsement to provide Community Paramedicine Services was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is six (6) hours.
    3. If the Endorsement to provide Community Paramedicine Services was issued more than one (1) year prior to the expiration date, the CME requirement is twelve (12) hours.
  - B. Verification of participation as a Paramedic Endorsed to provide Community Paramedicine Services with a permitted EMS agency; and
  - C. Payment of all required non-refundable, non-transferable fee(s).
- II. Upon successful completion of the above listed requirements, the OEMSTS will renew the Endorsement to provide Community Paramedicine Services on the Applicant’s Paramedic License.

## **ADMINISTRATIVE CRITERIA — Endorsement to Provide Community Paramedicine Services**

- I. Each Paramedic Endorsed to provide Community Paramedicine Services is responsible for maintaining documentation of continuing education. This documentation must be kept on file for a minimum of three (3) years for audit purposes.
- II. Permitted EMS agencies and training centers must maintain CME files for their employees/students that include copies of rosters, tests, and skills proficiency records. These copies must be retained for at least three (3) years for audit purposes.
- III. Supporting documentation must accompany the Health District approved “*Community Paramedicine Services Renewal Report*” form and submitted to the OEMSTS at least sixty (60) days prior to Certification expiration. The OEMSTS will conduct random audits of documentation of continuing education. False statements or submission of false documents may be sufficient cause for forfeiture of the right of Endorsement as a Paramedic to provide Community Paramedicine Services.

- IV. Should an audit identify a discrepancy in the renewal documentation, the provider shall be immediately eligible to renew the Endorsement if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration the Applicant will no longer be endorsed to provide Community Paramedicine Services in the Clark County EMS System. Subsequently, the provider may apply for Endorsement via challenge in accordance with the **“District Procedure for Endorsement to Provide Community Paramedicine Services via Challenge.”**

# **DISTRICT PROCEDURE FOR RENEWAL OF EMS INSTRUCTOR ENDORSEMENT**

(EMS Regulations Section 400.450)

**PURPOSE:** To define continuing education requirements for EMS Instructors in the Clark County EMS System to keep up with the rapid changes in emergency medical training and education and to respond to needs that are identified by quality improvement programs.

**DEFINITION:** Renewal of EMS Instructor Endorsement requires completion of four (4) hours of Health District approved continuing education specific to education.

**PROCEDURE:**

- I. Submit the “*EMS Instructor Renewal Report*” form sixty (60) days prior to certification expiration;
- II. Submit payment of all required non-refundable, non-transferable fee(s);
- III. Submit documentation of completion of four (4) hours of continuing education, specific to education, sixty (60) days prior to Certificate expiration:
  1. If the EMS Instructor Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.
  2. If the EMS Instructor Endorsement was issued more than six (6) months, but less than one (1) year prior to the expiration date, the CME requirement is two (2) hours.
  3. If the EMS Instructor Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is four (4) hours.
- IV. Submit verification of participation as an instructor in good standing with an Authorized EMS Training Center; and
- V. Submit all documentation for recertification at the appropriate level (EMS providers only).

**ADMINISTRATIVE CRITERIA—EMS INSTRUCTOR**

- I. Each endorsed EMS Instructor is responsible for maintaining documentation of continuing education. If employed by a permitted EMS agency or Authorized EMS Training Center, copies of continuing education documents must be kept on file for audit purposes.
- II. Permitted EMS agencies will maintain continuing education files for their employees that include copies of rosters, tests, and skills proficiency records from continuing education Classes, and certificates of completion. These copies must be retained for at least three (3) years for audit purposes.
- III. Supporting documentation must accompany the Health District approved “*EMS Instructor Renewal Report*” form and be submitted to the OEMSTS at least sixty (60) days prior to certification expiration. The OEMSTS will conduct random audits of documentation of continuing education. False statements or submission of false documents may be sufficient cause for forfeiture of the right of Endorsement as an EMS Instructor.
- IV. Should an audit identify a discrepancy in renewal documentation, the provider shall be immediately eligible to renew if documentation addressing any deficiencies is submitted prior to Certificate expiration. If such documentation is not submitted prior to Certificate expiration the Applicant will no longer be endorsed as an EMS Instructor in the Clark County EMS System. Subsequently, the provider may apply for Endorsement via challenge in accordance with the “**District Procedure for Endorsement as EMS Instructor via Challenge.**”

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# **REFRESHER COURSE PROCEDURES**

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# DISTRICT PROCEDURE FOR EMT REFRESHER COURSE

(EMS Regulations Section 300)

**PURPOSE:** To define the refresher education requirements for EMTs in the Clark County EMS System.

**DEFINITION:** Refresher training for EMT status requires the successful completion of a minimum of 24 hours of training conforming to the most recent National EMS Education Standards.

## SECTION I: REQUIRED MINIMUM COURSE CONTENT

<u>TOPIC</u>	<u>HOURS</u>
Preparatory	1.0
Airway	2.0
OB, Infants, Children	2.0
Patient Assessment	3.0
Medical/Behavioral	4.0
Trauma	4.0
Elective	8.0
<b>TOTAL HOURS:</b>	<b><u>24.0</u></b>

## SECTION II: ADMINISTRATIVE CRITERIA

- I. All required information must be submitted on the Health District “*Notice of Intent to Conduct EMS Training Course*” form at least thirty (30) days prior to the scheduled start date.
- II. Courses must be submitted for approval thirty (30) days prior to the first day of the Course.
- III. The Course coordinator shall submit the “*EMS Course Completion Record*” to the OEMSTS within ten (10) days of Course completion.
- IV. The training center will maintain an EMS training file which will include the Course outlines, rosters, and tests for a minimum of three (3) years.
- V. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Course.

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# DISTRICT PROCEDURE FOR ADVANCED EMT REFRESHER COURSE

(EMS Regulations Section 300)

**PURPOSE:** To define the refresher education requirements for Advanced EMTs in the Clark County EMS System.

**DEFINITION:** Refresher training for Advanced EMT status requires the successful completion of a minimum of 36 hours of training conforming to the most recent National EMS Education Standards.

## SECTION I: REQUIRED MINIMUM COURSE CONTENT

<u>TOPIC</u>	<u>HOURS</u>
Operational Tasks	1.0
Trauma	5.0
Medical Emergencies	6.0
Airway/Breathing/Cardiology	12.0
OB/Peds	12.0
<b>TOTAL HOURS:</b>	<b><u>36.0</u></b>

## SECTION II: ADMINISTRATIVE CRITERIA

- I. All required information must be submitted on the Health District “*Notice of Intent to Conduct EMS Training Course*” form at least thirty (30) days prior to the scheduled start date.
- II. The Course coordinator shall submit the “*EMS Course Completion Record*” to the OEMSTS within ten (10) days of Course completion.
- III. The training center shall maintain an EMS training file which will include the Course outlines, rosters, skills proficiency records, and tests for a minimum of three (3) years.
- IV. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Course.

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# DISTRICT PROCEDURE FOR ALTERNATIVE EDUCATION HOURS FOR ADVANCED EMT REFRESHER COURSE

**PURPOSE:** To define an alternative refresher education option for Advanced EMTs who have successfully completed an approved EMT Refresher Course in the Clark County EMS System.

**DEFINITION:** Refresher training for Advanced EMT status requires the successful completion of a minimum of 24 hours of EMT training and 12 hours of Advanced EMT training conforming to the most recent National EMS Education Standards.

## **SECTION I: EDUCATION ALTERNATIVE**

As an alternative, the AEMT may choose to take an EMT Refresher Course (see “**District Procedure for EMT Refresher Course**”). Upon successful completion of that Course, the AEMT will need to take an additional 12 hours of AEMT level training, not to exceed the maximum in the listed categories, as defined in the “**District Procedure for AEMT Recertification.**” Upon successful completion, the required total of 36 hours of AEMT refresher training will have been satisfied.

## **SECTION II: ADMINISTRATIVE CRITERIA**

- I. All required information must be submitted on the Health District “*Notice of Intent to Conduct EMS Training Course*” form at least thirty (30) days prior to the scheduled start date.
- II. The Course coordinator shall submit the “*EMS Course Completion Record*” to the OEMSTS within ten (10) days of Course completion.
- III. The training center shall maintain an EMS training file which will include the Course outline, rosters, skills proficiency records, and tests for a minimum of three (3) years.
- IV. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Course.

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# DISTRICT PROCEDURE FOR PARAMEDIC REFRESHER COURSE

(EMS Regulations Section 300.321)

**PURPOSE:** To define the refresher education requirements for Paramedics in the Clark County EMS System.

**DEFINITION:** Refresher training for Paramedic status requires the successful completion of a minimum of sixty (60) hours of training conforming to the most recent National EMS Education Standards.

## SECTION I: REQUIRED MINIMUM COURSE CONTENT

<u>TOPIC</u>	<u>HOURS</u>
Operational Tasks	2.0
Trauma	6.0
Medical Emergencies	8.0
Airway/Breathing/Cardiology	16.0
OB/Peds	16.0
Elective	12.0
<b>TOTAL HOURS:</b>	<b><u>60.0</u></b>

## SECTION II: ADMINISTRATIVE CRITERIA

- I. All required information must be submitted on the Health District “*Notice of Intent to Conduct EMS Training Course*” form at least thirty (30) days prior to the scheduled start date.
- II. The Course coordinator shall submit the “*EMS Course Completion Record*” to the OEMSTS within ten (10) days of Course completion.
- III. The training center shall maintain an EMS training file which will include the Course outline, rosters, skills proficiency records, and tests for a minimum of three (3) years.
- IV. Individuals who do not adhere to the policies of the Authorized EMS Training Center, as approved by the OEMSTS, will not receive credit for the Course.

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## DISTRICT PROCEDURE FOR DISTRIBUTIVE REFRESHER COURSES

- PURPOSE:** To establish a standard guideline for approving distributive refresher Course training.
- DEFINITION:** Distributive refresher training includes online, Distance Learning, and video/print media education that is approved by CECBEMS or CAPCE, or pre-approved by the OEMSTS.
- PROCEDURE:**
- I. All required information must be submitted on the Health District “*Notice of Intent to Conduct EMS Training Course*” form at least thirty (30) days prior to the scheduled start date.
  - II. Distributive refresher Courses will be pre-approved on a case-by-case basis by the OEMSTS.
  - III. The Authorized EMS Training Centers and permitted agencies shall maintain an EMS training file which will include the distributive Course outlines, rosters, skills proficiency records, and tests for a minimum of three (3) years.

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**DISTRICT PROCEDURE FOR  
PRORATING EMS CMEs**  
(EMS Regulations Section 300.321)

**PURPOSE:** To standardize the required CME for EMS providers with a Certificate issued for less than two full years.

**DEFINITION:** Each EMS provider is required to earn a specific number of CME hours to be eligible for recertification. Those persons whose initial Certificate is issued for less than two full years will use the guideline below to identify the recertification requirements.

**Note:** If your Clark County Certificate was issued for less than one (1) year AND your National Registry Certificate expires in less than one (1) year, you will be required to provide documentation of the full CME requirement at time of Certificate expiration.

I. EMT:

- A. If the EMT Certificate has been issued for a period of less than one (1) year, there is no CME requirement. The EMS provider must submit:
  - 1. An “*Application for Recertification*”; and
  - 2. A copy of current certification in CPR.
- B. If the EMT Certificate has been issued for a period of more than one (1) year, but less than two (2) years, the EMS provider must submit:
  - 1. An “*Application for Recertification*”;
  - 2. Twelve (12) hours of CME; and
  - 3. A copy of current certification in CPR.

II. ADVANCED EMT:

- A. If the AEMT Certificate has been issued for a period of less than one (1) year, there is no CME requirement. The EMS provider must submit:
  - 1. An “*Application for Recertification*,” and
  - 2. A copy of current certification in CPR.
- B. If the AEMT Certificate has been issued for a period of more than one (1) year, but less than two (2) years, the EMS provider must submit:
  - 1. An “*Application for Recertification*”; and
  - 2. A copy of current certification in CPR.

III. PARAMEDIC:

- A. If the Paramedic Certificate has been issued for a period of less than one (1) year, there is no CME requirement. The EMS provider must submit:
  - 1. An “*Application for Recertification*,” and
  - 2. Copies of current certification in CPR, advanced life support procedures for Patients who require ALS care, and life support procedures for pediatric Patients who require ALS care.

- B. If the Paramedic Certificate has been issued for a period of more than one (1) year, but less than two (2) years, the EMS provider must submit:
1. An *“Application for Recertification”*; and
  2. Copies of current certification in CPR, advanced life support procedures for Patients who require ALS care, and life support procedures for pediatric Patients who require ALS care.

# **MISCELLANEOUS PROCEDURES**

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**DISTRICT PROCEDURE FOR  
ADMINISTRATIVE CORRECTIVE ACTION**  
(EMS Regulations Sections 1800 & 1900)

**PURPOSE:** To establish a guideline for administrative corrective action and discipline for Permittees, Authorized EMS Training Centers, Host Organizations, Certified Persons, Licensed Persons, and Endorsed Persons within the Clark County EMS System.

**DEFINITION:** Corrective action is a progressive process. Coaching, counseling, and sanction are included in the process. Actions rising to the level of immediate threat to public safety as defined in EMS Regulations Section 1800.100 II. are not included in this process. The Administrative Corrective Action Procedure is independent of, but may be included in Quality Assurance activities performed by the OEMSTS.

**CRITERIA:**

- I. For Certified, Licensed, and Endorsed Persons the following examples may require entry into the corrective action procedure (this list is not exhaustive and serves only as a guide):
  - A. Any violation of the Clark County EMS Regulations, Emergency Medical Care Protocols, or EMS Procedure Manual.
  - B. Fraud, deceit, or inaccuracy of information on applications, Patient care reports, medication logs, or other documentation pertinent to the execution or administration of duties.
  - C. Any unlawful conviction.
  - D. Incompetence or negligence in carrying out EMS functions.
  - E. Failure to comply with any corrective action ordered by the Health Officer.
  - F. Unprofessional Conduct (see definition on pg. 13).
  - G. Any other action, conduct, or circumstance deemed severe enough by the Health Officer to warrant corrective action.
  
- II. For Permittees, Authorized EMS Training Centers, and Host Organizations the following examples may require entry into the corrective action procedure (this list is not exhaustive and serves only as a guide):
  - A. Any violation of the Clark County EMS Regulations, Emergency Medical Care Protocols, or EMS Procedure Manual.
  - B. Fraud, deceit, or inaccuracy of information on applications, CME records, Class rosters, skills proficiency documentation, Course completion records, or other documentation pertinent to the execution or administration of duties.
  - C. Failure to train in accordance with the most recent National EMS Education Standards.
  - D. Failure to ensure that persons entering an EMS training Course are eligible to do so.
  - E. Failure to maintain a current roster of Licensed employees or volunteers.
  - F. Failure to comply with any corrective action ordered by the Health Officer.
  - G. Unprofessional conduct (see definition on pg. 13).
  - H. Any other action, conduct or circumstance deemed severe enough by the Health Officer to warrant corrective action.

**PROCEDURE:**

The following steps may be taken for those situations that warrant entry into the Administrative Corrective Action Procedure:

1. The first violation will result in a coaching session applied to determine the cause of the violation and, if needed, a corrective action plan will be assigned.
2. The second similar violation will result in a counseling session and a corrective action plan will be assigned.
3. The third similar violation will result in sanctions being levied against the Person, Agency, or Training Center. The sanction levied will be commensurate with the severity of the violation and comply with EMS Regulations Sections 1800 and 1900 inclusive.



**DISTRICT PROCEDURE FOR  
RURAL VOLUNTEER AMBULANCE DRIVER TRAINING**  
(EMS Regulations Section 1100)

**PURPOSE:** To establish a standard guideline for Rural Volunteer Ambulance Drivers.

**DEFINITION:** An Applicant is a member of a Rural Volunteer Ambulance Service who will be employed in a “driver only” capacity, and is eighteen (18) years of age, or older, as of the date of application.

**PROCEDURE:**

- I. The following requirements must be met prior to issuance of Written Authorization as a Rural Volunteer Ambulance Driver:
  - A. The permitted agency/applicant must submit the following to the OEMSTS:
    1. Letter of intent to hire from a Rural Volunteer Ambulance Service;
    2. Copy of current health care provider CPR card, as approved by the OEMSTS. (Online classes must include a verifiable documentation of the skills component.);
    3. Copy of current, valid Nevada Class C driver’s license, or its equivalent, issued by this state or another state; and
    4. Documentation of successful completion of a Certified Emergency Vehicle Operations Course.
- II. Upon completion of the above, the OEMSTS will issue Written Authorization as a Rural Volunteer Ambulance Driver.
- III. Per EMS Regulations, a Rural Volunteer Ambulance Driver is not Licensed as an Attendant and is prohibited from acting as such.

**Note:** The OEMSTS may audit for compliance.

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**DISTRICT PROCEDURE FOR  
AUTHORIZATION/REAUTHORIZATION  
AS AN EMS TRAINING CENTER**

(EMS Regulations Section 200)

**PURPOSE:** To establish a standard guideline for authorization/reauthorization as an EMS Training Center.

**DEFINITION:** An Applicant is:

1. A training center that provides initial or refresher EMS Courses, or continuing medical education Classes to persons other than their own employees, or the employees of another permitted EMS agency; and
2. Has a license or a letter of licensure exemption to conduct EMS training issued by the State of Nevada Commission on Postsecondary Education.

**PROCEDURE:**

I. The following requirements must be met prior to authorization/reauthorization as an EMS Training Center:

- A. Complete the Health District “*Application for Authorization/Reauthorization as an EMS Training Center*” that contains at least the following information:
1. Owner(s) name/ mailing address/ phone number/ email address.
  2. Name of designated Medical Director.
  3. Name of corporation, partnership, sole proprietorship.
  4. Trade name or fictitious name (if applicable).
  5. Copy of business license from the appropriate jurisdiction.
  6. Training center address, phone number, fax number.
  7. List of all Courses/Classes that will be offered.

Background questions:

8. Has the Applicant ever been endorsed to operate an Authorized EMS Training Center?
  9. Has the Applicant ever had an Endorsement to operate an Authorized EMS Training Center revoked or suspended in any other state or jurisdiction?
  10. Has the Applicant ever been convicted of a felony, gross misdemeanor or misdemeanor?
- B. Submit payment of all required non-refundable, non-transferable fee(s).
- C. Submit copy of license or letter of licensure exemption from Nevada Commission on Postsecondary Education.
- D. Submit two complete sets of fingerprints for each Applicant, and written permission authorizing the OEMSTS to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report, if not already on file.
- E. Schedule a site inspection with the OEMSTS to ensure Applicant has met all requirements as listed on the EMS Training Center Guidelines.

- II. Upon successful completion of the above, the OEMSTS will issue a Letter of Authorization to conduct EMS training at the level identified in the letter.
- III. A change in majority ownership or substantive change in structural organization of an existing Authorized EMS Training Center shall require a new application and Letter of Authorization.
- IV. The Letter of Authorization expires on June 30<sup>th</sup> following the date of issuance and may be renewed annually on July 1<sup>st</sup>.
- V. An Authorized EMS Training Center may submit an “*Application for Authorization/Reauthorization as an EMS Training Center*” at least sixty (60) days prior to expiration.

**Note:** A Letter of Authorization to conduct a Paramedic Course may only be issued to:

- 1) A Receiving Facility licensed by the Nevada Division of Public and Behavioral Health; or
- 2) A college or university, accredited by the Department of Education, in affiliation with a Receiving Facility licensed by the Nevada Division of Public and Behavioral Health.

Any Authorized EMS Training Center holding a Letter of Authorization to conduct a Paramedic Course shall attain and maintain CAAHEP accreditation within 24 months of the issuance of the initial Letter of Authorization.

**Note:** The OEMSTS may audit for compliance.

## **DISTRICT PROCEDURE FOR INITIAL/RENEWAL DESIGNATION AS A PEDIATRIC DESTINATION HOSPITAL**

**PURPOSE:** To establish a standard guideline for initial/renewal designation as a pediatric destination hospital.

**DEFINITION:** An Applicant is a hospital seeking initial/renewal designation as an EMS pediatric destination hospital. Certain conditions must be met prior to becoming a pediatric destination facility.

**PROCEDURE:**

- I. The Applicant must meet the following requirements prior to initial designation as an EMS pediatric destination hospital:
  - A. Complete the Health District's "*Application for Initial/Renewal Designation as an EMS Pediatric Destination Hospital*" that contains at least the following information:
    1. Name, address, and telephone number of institution
    2. Owner of facility
    3. Hospital administrator/director
    4. Contact Person for application processing
  - B. Complete an attestation that the hospital is compliant with the following conditions:
    1. Provides 24/7 in-house coverage for the emergency department with one of the following:
      - a. A Board Certified/Board Eligible pediatric emergency medicine physician.
      - b. A Board Certified/Board Eligible emergency medicine physician.
      - c. A Board Certified/Board Eligible general pediatrician, at the discretion of the pediatric medical director of the facility.
    2. Has a Pediatric Intensive Care Unit that provides 24/7 coverage with a Board Certified/Board Eligible Pediatric Critical Care Specialist available on site within 30 minutes by contract.
    3. Provides nursing services:
      - a. 80% of pediatric emergency department nurses must have Emergency Nursing Pediatric Course (ENPC) certification.
      - b. At least one ENPC nurse must always be present.
      - c. All pediatric emergency department nurses shall possess a current Pediatric Advanced Life Support card.
    4. Has a medical director who is Board Certified/Board Eligible in pediatric emergency medicine.
    5. Provides quality improvement activities conducted by the medical director or Pediatric Critical Care Physician or their designee.

- II. The Applicant's signature and date is required affirming that all information on the application is true and correct. The Applicant must provide any additional information needed to clarify the above relative to the Applicant's pending application.
- III. The Applicant's signature further attests that the Applicant agrees to comply with the conditions set forth in the application.
  - Required signatures:
    - 1. Hospital Chief Executive Officer
    - 2. Printed name of hospital Administrator or owner
    - 3. Title of Person signing the application
- IV. Payment of all required non-refundable, non-transferable fee(s).
- V. Upon completion of the above requirements, the Health Officer shall issue a letter of approval for designation as an EMS pediatric destination hospital, or a letter outlining the reason(s) for denial of the application.
- VI. Designation as an EMS pediatric destination hospital expires on December 31<sup>st</sup> following the date of issuance and may be renewed annually on January 1<sup>st</sup>.
- VII. A hospital may submit an "*Application for Initial/Renewal Designation as an EMS Pediatric Destination Hospital*" at least sixty (60) days prior to expiration, along with payment of all required non-refundable, non-transferable fee(s).

**Note:** The OEMSTS may audit for compliance.

**DISTRICT PROCEDURE FOR  
SPECIAL EVENT MEDICAL PLAN APPROVAL**  
(EMS Regulations Section 1150)

**PURPOSE:** To establish a standard guideline for approving medical plans for Special Events conducted in Clark County.

**DEFINITION:** Pursuant to Nevada Revised Statute (NRS) 450B.650 - 450B.700 and Clark County EMS Regulation Section 1150, certain organizations hosting certain special events in Clark County must provide emergency medical services under certain circumstances.

**PROCEDURE:**

I. The Host Organization must submit a “*Host Organization Application for Special Event Medical Plan Approval*” at least thirty (30) days prior to the first day of the event.

**Note:** Under unusual circumstances, the Chief Health Officer may waive the time limitation for filing a “*Host Organization Application for Special Event Medical Plan Approval*” if sufficient justification can be provided an expedited review of the Special Event Medical Plan is necessary and warranted. The application must be submitted a minimum of seven (7) calendar days prior to the first day of the Special Event.

II. The Special Event Medical Plan submitted by the Host Organization must contain at least the following information:

- A. Name of the Host Organization;
- B. Type and date of the event, location, length, and anticipated attendance;
- C. Name of the Permit holder contracted to provide Emergency Medical Care;
- D. How the Applicant will meet all requirements as outlined in the *Minimum EMS Requirements Algorithms* for the anticipated number of attendees;
- E. Number of Licensed EMS providers, RNs, PAs, APRNs, or Physicians scheduled to provide Emergency Medical Care;
- F. Description of the First Aid Station(s) or other treatment facilities, including maps of the Special Event site which depict points of ingress/egress;
- G. Emergency Medical Care equipment as defined in the “*Official Special Event Inventory*;”
- H. Description of the on-site emergency medical communications capabilities;
- I. Plan to inform Special Event attendees regarding access to Emergency Medical Care, and specific hazards such as inclement or severe weather;
- J. Plan for emergency evacuation of the Special Event; and
- K. Any additional information as determined by the Plan Review Authority.

III. Payment of all required non-refundable, non-transferable fee(s).

IV. Upon completion of the above requirements, the Health Officer shall issue, within fifteen (15) days of application, either a Letter of Approval of the Special Event Medical Plan, or a letter outlining the reason(s) for denial of the Special Event Medical Plan.

V. The Host Organization must complete and submit a report to the Plan Review Authority within thirty (30) days following the last day of a Special Event. The report must include at least the following information:

- A. The estimated peak number of attendees at the Special Event.
- B. The estimated total number of attendees at the Special Event.

- C. The number of Patient contacts at the Special Event.
  - D. The number of Transports from the Special Event.
- VI. Based on the information provided in the Host Organization's post Special Event report, the Plan Review Authority will verify if a Significant Number of Patient Contacts or a Significant Number of Patient Transports occurred during the Special Event. The OEMSTS will maintain a database of this information to be used when approving subsequent Special Event Medical Plans submitted by a Host Organization.



## **DISTRICT PROCEDURE FOR MANAGING DRUG SHORTAGES**

**PURPOSE:** To ensure continuation of high quality prehospital care and to maximize patient safety during the current national drug shortage.

**SCOPE:** This procedure must be implemented whenever a Clark County EMS provider agency is unable to maintain current par levels of a drug as listed in the Southern Nevada Health District (SNHD) official drug inventories.

**DURATION:** This procedure shall remain in effect until the persistent national drug shortages of formulary drugs have been abated.

**PROCEDURE:**

- I. An EMS provider agency who wishes to use an alternative drug(s), as approved by the Medical Advisory Board, must submit their training program for alternative drug(s) to [ems@snhd.org](mailto:ems@snhd.org) including a copy of the relevant protocol(s).
- II. If the request meets the defined standards, a 90-day exception to EMS Regulations Section 1300.530 I.C.3. will be granted, and a letter from the OEMSTS will be issued to the EMS provider agency.
- III. Upon receipt of the letter from the OEMSTS, the EMS provider agency must submit proof of training of at least 90% of the agency's licensees to [ems@snhd.org](mailto:ems@snhd.org) prior to implementation of the alternative drug(s).
- IV. The EMS provider agency is responsible for notifying the OEMSTS and any other responding provider agency of the start and stop date for alternative drug(s).
- V. An EMS provider agency that cannot obtain a sufficient supply of a drug because of the national drug shortage may lower the par level as described in the SNHD official drug inventories to one (1) therapeutic dose for an average adult male in Clark County.  
**Note:** Per the CDC Behavioral Risk Factor Surveillance System Survey Questionnaire from 2003 to 2009, the average male adult weight in Clark County is 90 kg.
- VI. An EMS provider agency that cannot obtain at least one (1) therapeutic dose of a drug must provide documentation of a good faith effort to obtain a required drug that includes the following:
  - A. The contact information, including date of contact, for three (3) sources through which the EMS provider agency attempted to obtain the drug. The source can be distributors, other health care providers, or any other reseller that could reasonably be expected to be able to sell drugs to the EMS provider agency.
  - B. An attestation statement: "I attest that I have made a good faith effort to obtain [name of drug] from the sources described herein for use by [EMS provider agency name], but was unable to obtain the minimum supply required in the SNHD [name of specific drug inventory]. I will continue to attempt to obtain a complete complement of all required drugs." The attestation statement must be signed and dated by the EMS provider agency's medical director.
- VII. If routine and/or random inspections occur during this period, a copy of the EMS provider agency's good faith effort attestation statement and the letter documenting SNHD approval of an exception to EMS Regulation 1300.530 I.C.3. must be readily available.

VIII. Under no circumstance will the documentation required by III.A. be accepted retroactively after a notice of violation for a deficiency is given.

# **DISTRICT PROCEDURE FOR MAINTAINING EMS OPERATIONS DURING PERIODS OF MULTIPLE HOSPITAL INTERNAL DISASTER DECLARATIONS**

**PURPOSE:** To establish a standard guideline for EMS personnel to address periods of multiple hospital declarations of internal disaster in Clark County.

**DEFINITION:** To afford hospitals the opportunity to decompress from instances of increased volume and acuity while maintaining an effective EMS response for everyone in the community.

- I. The hospital resources in the valley will be placed in one of four regions:
  - A. Northwest
    1. Centennial Hills Hospital Medical Center
    2. MountainView Hospital
    3. Summerlin Hospital Medical Center
  - B. Southwest
    1. Southern Hills Hospital & Medical Center
    2. Spring Valley Hospital Medical Center
    3. St. Rose Dominican Hospital - San Martin Campus
  - C. Central
    1. Valley Hospital Medical Center
    2. University Medical Center
    3. North Vista Hospital
    4. Sunrise Hospital & Medical Center
    5. Desert Springs Hospital Medical Center
  - D. South
    1. St. Rose Dominican Hospital - Siena Campus
    2. St. Rose Dominican Hospital - Rose de Lima Campus
    3. Boulder City Hospital
    4. Henderson Hospital
- II. Northwest, Southwest and South Regions:
  - A. If one hospital in any one region declares internal disaster, that facility will be bypassed by ambulances as outlined in the protocol manual.
  - B. If more than one hospital in any one region declares internal disaster, all hospitals in the region will be considered open.
- III. Central Region:
  - A. If one or two hospitals in the Central region declare internal disaster, those facilities will be bypassed by ambulances as outlined in the Emergency Medical Care Protocols.
  - B. If more than two hospitals in the Central region declare internal disaster, all hospitals in the region will be considered open.
- IV. If any hospital is on internal disaster because of physical plant disruptions (e.g., fire, flood, active shooter, building damage rendering the facility unsafe, etc.), that facility will be bypassed by all ambulance traffic.
- V. The reason for all internal disaster declarations will be documented in EMResource at the time the internal disaster is declared.

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## **DISTRICT PROCEDURE FOR ISSUANCE OF A NATIONAL REGISTRY SUPPORT LETTER**

**PURPOSE:** To standardize the process for Nevada Paramedics seeking National Registry Certification through the National Registry Re-Entry/Entry Policy.

**DEFINITION:** An Applicant for Issuance of a National Registry Support Letter is an individual who once held a Paramedic Certificate in the State of Nevada that has expired, and wants to regain certification in Clark County.

**Note:** If action has been taken against the certification or licensure of an individual by the OEMSTS or the Nevada Division of Public and Behavioral Health, the letter of support may be denied.

**PROCEDURE:**

- I. Applicants must meet the following requirements at time of request for issuance of a support letter:
  - A. Submit payment of all required non-refundable, non-transferable fee(s).
  - B. Submit documentation evidencing completion of a DOT Paramedic Training Program after January 1, 1977.
  - C. Submit proof of current or previous Nevada certification at the Paramedic level.
  - D. Submit proof of Clark County residency, or current EMS employment in Clark County.
  - E. Submit the required continuing medical education hours as defined in the recertification procedure as follows;
    1. A state approved Paramedic refresher course within the last two years or,
    2. State approved continuing education, or no less than 48 hours covering the mandatory and flexible core content topics as specified by the National Registry, completed within the last two years.
  - F. Submit a copy of a current CPR card.
  - G. Submit a copy of current certification in advanced cardiac life support procedures for Patients who require ALS care; copy of current certification in life support procedures for pediatric Patients who require ALS care; and documentation of certification in PHTLS or ITLS, per National Registry, within the past two years.
  - H. Submit documentation of completion of a course of instruction in both WMD Surveillance and Health Alert Network training, if not already on file. (Both are available on the SNHD website free of charge.)
- II. After the OEMSTS receives all required documentation, a letter of support may be written to allow the Applicant to take the National Registry Paramedic psychomotor and cognitive examinations.
- III. After the Applicant attains certification as a National Registry Paramedic, he/she may apply for Clark County Paramedic certification as defined in the **“District Procedure for Certification via Reciprocity.”**

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# **APPENDIX**

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## SNHD CERTIFICATION EXAMINATION INSTRUCTIONS

### EMT and Advanced EMT Applicants

- 1) Applicants for initial certification who hold a current out of state certificate will be required to successfully pass either the SNHD approved certification examination, or the National Registry Assessment Examination. Exempt: Applicant has a current National Registry or State of Nevada certificate at the level he/she is applying.
- 2) The applicant will be given six total attempts to pass either examination. Ex: If the applicant fails to pass the National Registry Assessment Examination after three attempts and now wants to take the SNHD approved certification examination, the applicant will have three remaining attempts, and vice versa.
- 3) If the applicant chooses to take the SNHD approved certification examination, he/she will be given instructions to set up a student account to purchase the exam. The EMS office will be notified when the exam has been purchased. The student must then call the office to schedule to take the exam at the EMS office. The exam cannot be scheduled more than seven days in advance. The non-refundable fee for the online examination is \$21 for EMTs, and \$26.25 for Advanced EMTs. Each purchase price allows for two opportunities to test. If the applicant doesn't pass the test on the first try, he/she must wait at least one day to schedule a retest. You will be emailed a review of the areas missed. Note: The applicant will have six months from the date of application to complete the process.
- 4) The National Registry Assessment Examination must be scheduled by the applicant at nremt.org.

### Paramedic Applicants

- 1) Applicants for initial certification who hold a current out of state certificate will be required to successfully pass either the SNHD approved certification examination, the National Registry Assessment Examination, or the National Registry Cognitive Examination. Exempt: Applicant has a current National Registry or State of Nevada certificate at the level he/she is applying.
- 2) The applicant will be given six total attempts to pass either examination. Ex: If the applicant fails to pass the National Registry Assessment Examination or Cognitive Examination after three attempts and now wants to take the SNHD approved certification examination, the applicant will have three remaining attempts, and vice versa.
- 3) If the applicant chooses to take the SNHD approved certification examination, he/she will be given instructions to set up a student account to purchase the exam. The EMS office will be notified when the exam has been purchased. The student must then call the office to schedule to take the exam at the EMS office. The exam cannot be scheduled more than seven days in advance. The non-refundable fee for the online examination is \$26.25. Each purchase price allows for two opportunities to test. If the applicant doesn't pass the test on the first try, he/she must wait at least one day to schedule a retest. You will be emailed a review of the areas missed. Note: The applicant will have six months from the date of application to complete the process.
- 4) The National Registry Assessment and Cognitive Examination must be scheduled by the applicant at nremt.org.