# EMERGENCY MEDICAL SERVICES PROCEDURE MANUAL

**October 20, 2020**
**(Replaces December 17, 2017 Version)**

# TERMS AND CONVENTIONS

| | |
|---|---|
| **AAMS** | means Association of Air Medical Services |
| **AEMT** | means Advanced Emergency Medical Technician |
| **AI/DM** | means Administer Immunizations/Dispense Medication |
| **ALS** | means Advanced Life Support |
| **APRN** | means Advanced Practice Registered Nurse |
| **BCCTPC** | means Board for Critical Care Transport Paramedic Certification |
| **BLS** | means Basic Life Support |
| **CAAHEP** | means Commission on Accreditation of Allied Health Education Programs |
| **CAPCE** | means Commission on Accreditation for Pre-Hospital Continuing Education |
| **CCT** | means Critical Care Transport |
| **CME** | means Continuing Medical Education |
| **CV** | means Curriculum Vitae |
| **DOT** | means U.S. Department of Transportation |
| **EMS** | means Emergency Medical Services |
| **EMS RN** | means Emergency Medical Services Registered Nurse |
| **EMT** | means Emergency Medical Technician |
| **IBSC** | means International Board for Specialty Certification |
| **NAC** | means Nevada Administrative Code |
| **NEMSEC** | means National EMS Educator Certification |
| **NHTSA** | means National Highway Traffic Safety Administration |
| **NR** | means the National Registry of EMTs |
| **NRS** | means Nevada Revised Statutes |
| **OEMSTS** | means Office of Emergency Medical Services & Trauma System |
| **PA** | means Physician Assistant |
| **PHE** | means Public Health Emergency |
| **RN** | means Registered Nurse |
| **SNHD** | means Southern Nevada Health District |

# TABLE OF CONTENTS

**TERMS AND CONVENTIONS** ..... **2**

**FOREWORD** ..... **5**

**DEFINITIONS** ..... **6**

**Authorization/Reauthorization as an EMS Training Center** ..... **12**
District Procedure for Initial Authorization as an EMS Training Center ..... 13
District Procedure for Reauthorization as an EMS Training Center ..... 15

**TRAINING PROCEDURES** ..... **16**
District Procedure for Initial Education ..... 17
District Procedure for Continuing Medical Education (CME) ..... 18
District Procedure for EMT Training ..... 19
District Procedure for Advanced EMT Training ..... 21
District Procedure for Paramedic Training ..... 23
District Procedure for Rural Volunteer Ambulance Driver Training ..... 25

**CERTIFICATION PROCEDURES** ..... **26**
District Procedure for Initial Certification/Licensure ..... 27
District Procedure for Renewal of an Expired Nevada Certificate ..... 29
District Procedure for Application for Upgrade/Addition of Agency ..... 30

**LICENSURE PROCEDURES** ..... **31**
District Procedure for Licensure ..... 32
District Procedure for Air Ambulance Attendant ..... 34
District Procedure for Provisional Licensure ..... 36

**ENDORSEMENT PROCEDURES** ..... **38**
District Procedure for EMS Instructor I Training and Endorsement ..... 39
District Procedure for EMS Instructor II Training and Endorsement ..... 40
District Procedure for Master EMS Instructor Endorsement ..... 42
District Procedure for EMS Instructor Endorsement via Challenge ..... 44
District Procedure for Critical Care Paramedic Training and Endorsement ..... 46
District Procedure for Endorsement as a Critical Care Paramedic via Challenge ..... 49
District Procedure for Community Paramedicine Training and Endorsement ..... 50
District Procedure for EMS RN Training and Endorsement ..... 52
District Procedure for Endorsement to Administer Immunizations and Dispense Medication (AI/DM) in Response to a Public Health Emergency ..... 55

**SKILLS PROCEDURE** ..... **56**
District Procedure for Skills Proficiency Verification ..... 57

**PERMIT PROCEDURES** ..... **58**
District Procedure for Initial Ambulance Permit ..... 59
District Procedure for Renewal of Ambulance Permit ..... 60

**RECERTIFICATION PROCEDURES** ..... **61**
District Procedure for Application for Recertification ..... 62
District Procedure for Educational Requirements for EMT Recertification ..... 63
District Procedure for Educational Requirements for Advanced EMT Recertification ..... 65
District Procedure for Educational Requirements for Paramedic Recertification ..... 67
District Procedure for Renewal of Endorsement as a Critical Care Paramedic ..... 69

District Procedure for Renewal of Endorsement to Provide Community Paramedicine Services ..... 70
District Procedure for Renewal of EMS Instructor Endorsement ..... 71

**REFRESHER COURSE PROCEDURES ..... 72**

District Procedure for EMT Refresher Course ..... 73
District Procedure for Advanced EMT Refresher Course ..... 74
District Procedure for Alternative Education Hours for Advanced EMT Refresher Course ..... 75
District Procedure for Paramedic Refresher Course ..... 76
District Procedure for Distributive Refresher Courses ..... 77
District Procedure for Prorating EMS CMEs ..... 78

**RECEIVING FACILITY PROCEDURES ..... 79**

District Procedure for Initial/Renewal Designation as an EMS Pediatric Destination Hospital ..... 80
District Procedure for Maintaining EMS Operations During Periods of Multiple Hospital Internal Disaster Declarations ..... 82
District Procedure for Designation as a Receiving Facility for Patients Placed on a Legal Hold for Mental Illness ..... 83
District Procedure for Designation as a Receiving Facility for Patients that Meet Remote Outpatient Emergency Department Alternate Destination Criteria ..... 84
District Procedure for Designation as a Receiving Facility for Public Intoxication ..... 85

**MISCELLANEOUS PROCEDURES ..... 86**

District Procedure for Administrative Corrective Action ..... 87
District Procedure for Managing Drug Shortages ..... 89
District Procedure for Special Event Medical Plan Approval ..... 90
District Procedure for Issuance of a National Registry Support Letter ..... 92

**APPENDIX A ..... 93**

Eligibility for Accommodations Due to Disability ..... 94

**APPENDIX B ..... 95**

District Procedure for Drug/Device/Procedure (DDP) Agenda Items to be Considered for Referral by the Medical Advisory Board ..... 96
District Procedure for Drug/Device/Procedure (DDP) Agenda Items to be Added, Changed, or Removed from the EMS Inventory ..... 98
Application for Petition for Addition/Change/Removal of Drug/Equipment To/From the EMS Inventory ..... 99

# 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 meet American Heart Association standards or equivalent, as approved by the OEMSTS. The BLS course must include 1- and 2-man rescuer for the adult, infant and child, and the automated external defibrillator. E-cards may be uploaded without the holder's signature. A copy of a valid class roster is acceptable in lieu of the provider card. If there is a signature block on the back of the card, the cardholder must sign the card prior to uploading both sides. 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.snhd.info.

OEMSTS Staff:

Christian Young, MD, EMSTS Medical Director
John Hammond, BS, Paramedic, EMSTS Manager
Laura Palmer, BS, Paramedic, EMSTS Supervisor
Chad Kingsley, MD, Regional Trauma Coordinator
Scott Wagner, BS, NRP, EMSTS Field Representative
Candace Toyama, NRP, EMSTS Field Representative
Rae Pettie, EMT, EMSTS Program/Project Coordinator
Judy Tabat, EMSTS Program/Project Coordinator
Michelle Stanton, BS, Senior Administrative Assistant

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.

# 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” permissive.

**"ADVANCED EMERGENCY MEDICAL TECHNICIAN (AEMT)"** 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 AEMT pursuant to NRS 450B.191.

**"ADVANCED PRACTICE REGISTERED NURSE"** means a Registered Nurse who:

I. Has specialized skill, knowledge, and experience 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 as an Authorized EMS Training Center, 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, Air 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, 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.

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

**"CERTIFICATE"** means a Nevada Certificate issued by the Health Officer as authorized by NRS 450B.180, 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 to provide Community Paramedicine Services.

**"COMMUNITY PARAMEDICINE SERVICES"** means services provided by a 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 ENDORSEMENT"** means a Paramedic Attendant who is endorsed by the Health Officer to provide Critical Care Transport services in accordance with subsection 400.050 of EMS Regulations.

**"CRITICAL CARE PARAMEDIC"** means a Paramedic Attendant who is endorsed by the Health Officer as having satisfactorily completed an approved Course of instruction in Critical Care Transport in accordance with subsection 400.025 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.

**"DEVELOPMENTAL DISABILITY"** means autism, cerebral palsy, epilepsy, or any other neurological condition diagnosed by a qualified professional that:

1. Is manifested before the person affected attains the age of 22 years;
2. Is likely to continue indefinitely;
3. Results in substantial functional limitations, as measured by a qualified professional, in three or more of the following areas of major life activity:
    a. Taking care of oneself;
    b. Understanding and use of language;
    c. Learning;
    d. Mobility
    e. Self-direction; and
    f. Capacity for independent living; and

4. Results in the person affected requiring a combination of individually planned and coordinated services, support, or other assistance that is lifelong or has an extended duration.

**"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 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 EMT, AEMT, 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 EMT pursuant to NRS 450B.1905.

**"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.

**"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.

**"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.

**"FIELD INTERNSHIP"** means time spent in the Field by a Paramedic student following completion of the didactic and clinical portions of a Paramedic Course. This time is spent under the supervision of a preceptor to develop team leading skills while managing the scene, Patient, and crew.

**"FIREFIGHTING AGENCY"** means a fire department or fire protection district of the State or a political subdivision that 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 that 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 as a Health Officer designee.

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

**"HOST ORGANIZATION"** means:

1. If a permit was obtained for a Special Event, the Person who obtained the permit; or
2. If a permit was not obtained for a Special Event, the Person who sponsored the Special Event.

**"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 Health Officer 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.

**"LETTER OF AUTHORIZATION TO OPERATE AS A DRIVER FOR A RURAL VOLUNTEER AMBULANCE AGENCY"** means a letter issued by the Health Officer that authorizes that a Person has met the requirements of subsections 1100.300 and 1100.400 of EMS Regulations to operate as a Rural Volunteer Ambulance Driver. The Letter of Authorization to Operate as a Driver for a Rural Volunteer Ambulance Service 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 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 as set forth in EMS Regulations.

**"NATIONAL REGISTRY (NREMT)"** 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 certification.

**"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.

**"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 2nd or 3rd 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 to provide:

I. Emergency Medical Care to sick or injured Persons at the scene of an Emergency; and

II. 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 and the EMS Procedure Manual.

III. Endorsements may be added to qualified permits.

No Permit is transferrable. A change in majority ownership or substantive change in structural organization shall require an application for a new Permit.

**"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.

**"PLAN REVIEW AUTHORITY"** means the Health Officer or agency authorized by the Health District to review and approve of the Host Organization's Special Event Medical Plan. The Letter of Approval will be issued by the Health Officer.

**"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.

**"RECEIVING FACILITY"** means a medical facility, as approved by the Health Officer.

**"RECIPROCITY"** means a recognition by the Health District of the validity of certification/licensure granted by the National Registry of Emergency Medical Technicians or another U.S. state, and includes certification/ licensure by the State of Nevada.

**"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.

**"RURAL"** means the areas of Blue Diamond, Bunkerville, Cal-Nev-Ari, Cold Creek, Good Springs, Indian Springs, Logandale, Moapa, Mountain Springs, Overton, Sandy Valley, and Searchlight.

**"RURAL VOLUNTEER AMBULANCE DRIVER"** means a qualified Person who has received a Letter of Authorization to Operate as a driver for a Rural Volunteer Ambulance Service in a "driver only" capacity, and:

I. Is responsible for the operation of an Ambulance over the streets, roads, and highways within this State; and

II. Possesses evidence that the Person has successfully completed training pursuant to a national standard for the operation of an emergency vehicle or equivalent standard approved by the Health District.

**"RURAL VOLUNTEER AMBULANCE SERVICE"** means an Ambulance Service permitted by the District which is based in a Rural community and staffed by volunteers who are licensed, one of which must be an Attendant. A Rural Volunteer Ambulance Service may be wholly or partly subsidized by a public agency and may be compensated to defray the actual expenses of providing the services.

**"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.

# AUTHORIZATION/ REAUTHORIZATION AS AN EMS TRAINING CENTER

# DISTRICT PROCEDURE FOR INITIAL AUTHORIZATION AS AN EMS TRAINING CENTER

(EMS Regulations Section 200)

**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 receiving Authorization as an EMS Training Center:

A. Complete the Health District's "*Application for Initial Authorization as an EMS Training Center*" via the portal on the EMS webpage.

B. The Applicant may need to be processed for 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. **Exception:** The Applicant has been fingerprinted by the OEMSTS within the last two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

**Note**: The OEMSTS may suspend or revoke a Letter of Authorization upon receipt of a positive fingerprint response.

C. The Applicant must schedule a site inspection with the OEMSTS to ensure that all requirements listed on the EMS Training Center Guidelines have been met.

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. The training center will receive an invoice for payment of all required non-refundable, non-transferable fee(s).

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 30th following the date of issuance and may be renewed annually on July 1st.

V. To renew the Authorization as an EMS Training Center, please refer to the **"District Procedure for Reauthorization as an EMS Training Center."**

VI. A Letter of Authorization to conduct a Paramedic Course shall be issued in accordance with the most recent "Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions" 2015 version, or its successor organization and/or revision.

**Note**: 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**: Any Person who proposes to conduct any EMS training other than educational offerings such as conferences, symposia, or other similar opportunities as determined by the OEMSTS, shall first obtain a Letter of Authorization from the OEMSTS, unless otherwise provided for in the **"District procedure for Continuing Medical Education (CME)."**

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

# DISTRICT PROCEDURE FOR
# REAUTHORIZATION AS AN EMS TRAINING CENTER

(EMS Regulations Section 200)

**DEFINITION:** An Applicant is an EMS Training Center that:

1. 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; and
3. Is applying for Reauthorization as an EMS Training Center.

**PROCEDURE:**

I. The following requirements must be met prior to procuring Reauthorization as an EMS Training Center:

   A. The Applicant must complete the Health District's "*Application for Reauthorization as an EMS Training Center*" via the portal on the EMS webpage

   B. The Applicant must schedule a site inspection with the OEMSTS to ensure the Applicant has met all requirements in the EMS Training Center Guidelines.

I. Upon successful completion of the above, the OEMSTS will issue a Letter of Reauthorization to conduct EMS training at the level identified in the letter. The training center will receive an invoice for payment of all required non-refundable, non-transferable fee(s).

II. 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.

III. The Letter of Authorization expires on June 30th following the date of issuance and may be renewed annually on July 1st.

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

# TRAINING PROCEDURES

# DISTRICT PROCEDURE FOR INITIAL EDUCATION

(EMS Regulations Section 200)

**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 via the portal on the EMS webpage at least thirty (30) days prior to the Course start date.

II. All instruction must be by an 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.

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

IV. Upon successful completion of the training program, the Course coordinator shall submit the *"EMS Course Completion Record"* via the portal on the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

**Note:** The Course coordinator shall add the names of the students who successfully passed the Course via the portal on the EMS webpage.

V. For EMT Courses, the Course coordinator shall submit the OEMSTS approved practical examinations to the OEMSTS within ten (10) days of Course completion via the portal on the EMS webpage

VI. All initial training Courses must have the Health District's "*EMS Course/Instructor Evaluation*" form completed by each student. The completed forms must be submitted to the OEMSTS within ten (10) days of Course completion via the portal on the EMS webpage

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. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online Course unless the instructor developed the Class/Course in its entirety.

IX. 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.

X. 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.

XI. 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)

**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 request for training via the portal on the EMS webpage at least seven (7) days prior to the Class start date. **Note**: CME requests submitted by an entity other than an Authorized EMS Training Center may be hand-delivered or submitted via email ems@snhd.org or fax 702-759-1413.

**A.** The first time the Class is offered, submit a copy of the Class lesson plan along with the request for training.

**Note: Any modifications to previously approved Classes need to go through a new approval process.**

II. All instruction must be by an 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 Class with inadequate faculty.

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

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

V. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online Class unless the instructor developed the Class in its entirety.

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 or Authorized EMS Training Center.

IX. 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.

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

# DISTRICT PROCEDURE FOR
# EMT TRAINING

(EMS Regulations Section 200.200 & 200.210)

**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 EMT pursuant to NRS 450B.1905.

**PREREQUISITE:** Current BLS certification, unless the training is included in the EMT Course.

**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. All EMT Courses must include District approved training concerning persons with a Developmental Disability (see definitions).

III. Upon successful completion of the training program, the Course coordinator shall submit the following via the portal on the EMS webpage AND via email to ems@snhd.org, within ten (10) days of Course completion:

A. The *"EMS Course Completion Record"* signed by the Course coordinator and Medical Director.

**Note:** The Course coordinator shall add the names of the students who successfully passed the Course via the portal on the EMS webpage.

B. The NREMT psychomotor examinations or District approved practical examinations for each student.

C. The Health District's "*EMS Course/Instructor Evaluation*" form completed by each student.

IV. If the training center's intent is to have the student attain NREMT certification:

A. The student shall schedule and successfully pass the NREMT cognitive examination, per the National Registry procedure, within two years of Course completion.

**Note:** The NREMT psychomotor and cognitive examinations remain valid as per National Registry guidelines.

B. Upon successful completion of both the NREMT psychomotor and cognitive examinations, the student will be eligible to apply for EMT certification in accordance with the **"District Procedure for Certification/Licensure via Reciprocity."**

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

A. The student shall successfully pass the Clark County certification examination and EMT practical examination within two years of Course completion.

B. The student shall submit an "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

# DISTRICT PROCEDURE FOR ADVANCED EMT TRAINING

(EMS Regulations Section 200.300 & 200.310)

**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 AEMT pursuant to NRS 450B.1915.

**PREREQUISITES:**

1. Current certification as an EMT. (The student must maintain EMT certification throughout the AEMT course.)
2. Current BLS certification.

**PROCEDURE:**

I. All AEMT Courses must include District approved training concerning persons with a Developmental Disability.

II. The Course coordinator shall submit the Course roster within ten (10) days after the Course start date, via the portal on the EMS webpage AND via email to ems@snhd.org, along with a copy of each student's current, valid BLS card. If the student is not Clark County certified, proof of the student's current out-of-state or NREMT Certificate must be submitted.

III. Upon successful completion of the training program, the Course coordinator shall submit the following to the OEMSTS within ten (10) days of Course completion via the portal on the EMS webpage AND via email to ems@snhd.org:

A. The *"EMS Course Completion Record"* signed by the Course coordinator and Medical Director.

**Note:** The Course coordinator shall add the names of the students who successfully passed the Course via the portal on the EMS webpage.

B. The Health District's "*EMS Course/Instructor Evaluation*" form completed by each student.

IV. If the training center's intent is to have the student attain National Registry AEMT certification:

A. The student shall schedule and successfully pass the NREMT cognitive examination, per the National Registry procedure, within two years of Course completion.

**Note:** The NREMT psychomotor and cognitive examinations remain valid as per National Registry guidelines.

B. Upon successful completion of both the NR AEMT psychomotor and cognitive examinations, the student will be eligible to apply for AEMT certification in accordance with the **"District Procedure for Certification/Licensure."**

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

A. The student shall submit an "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

**Note:** If currently certified/licensed at the EMT level, the student shall submit an *"Application for Upgrade/Addition of Agency"* via the portal on the EMS webpage.

# DISTRICT PROCEDURE FOR PARAMEDIC TRAINING

(EMS Regulations Section 200.400 & 200.410)

**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.

**PREREQUISITES:**

1. An Applicant for admission to a Paramedic training program shall be currently certified as an EMT or AEMT. The student must maintain current EMT or AEMT certification throughout the Paramedic course.
2. Current BLS certification.

**PROCEDURE:**

I. All Paramedic Courses must include District approved training concerning persons with a Developmental Disability.

II. The Course coordinator shall submit the Course roster within ten (10) days after the Course start date, along with a copy of each student's current, valid BLS card. If the student is not Clark County certified, proof of the student's current out-of-state or NR EMT Certificate must be submitted.

III. Upon successful completion of the didactic and clinical portions of the Paramedic training program, the training center must submit to the OEMSTS the "*Paramedic Didactic/Clinical Course Completion"* form via the portal on the EMS webpage AND via email to ems@snhd.org, 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.

**Note:** The Course coordinator shall add the names of the students who successfully completed the didactic and clinical portions of the training program via the portal on the EMS webpage.

IV. The Paramedic student must follow the procedure as outlined in the **"District Procedure for Provisional Licensure."**

V. 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.

VI. Upon successful completion of the internship, the training center will submit an "*EMS Course Completion Record"* via the portal on the EMS webpage AND via email to ems@snhd.org, signed by the Course coordinator and Medical Director documenting the student's successful completion of the entire Paramedic training program, along with the Health District's "*EMS Course/Instructor Evaluation*" form completed by each student.

**Note:** The Course coordinator shall add the names of the students who successfully passed the Course and mark the status as "Pass" via the portal on the EMS webpage.

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 NR Paramedic psychomotor and cognitive examinations remain valid as per National Registry guidelines.

A. The Authorized EMS Training Center shall notify NREMT that the student has passed the Paramedic Course.

B. The student shall schedule the NR Paramedic cognitive examination, per the National Registry procedure, within two years of Course completion.

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. The student shall contact the OEMSTS to schedule the Health District approved Paramedic certification examination within two years of Course completion.

C. Upon successful completion of both the Health District approved practical and Paramedic certification examination, the student will be eligible 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 Health District approved Paramedic certification examination. If after six total attempts (any combination of the two exams) 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.

# DISTRICT PROCEDURE FOR
# RURAL VOLUNTEER AMBULANCE DRIVER TRAINING

(EMS Regulations Section 1100)

**DEFINITION:** An Applicant is a member of a Rural Volunteer Ambulance Service who will be employed in a "driver only" capacity and is at least eighteen (18) years of age at time of application.

**PROCEDURE:**

I. The Applicant must complete the Health District's *"Application for Rural Volunteer Ambulance Driver"* via the portal on the EMS webpage.

II. The Rural Volunteer Ambulance Service will be emailed via the portal on the EMS webpage to confirm there has been an offer of employment.

III. Upon successful completion of the above, the OEMSTS will issue Written Authorization as a Rural Volunteer Ambulance Driver.

IV. The Written Authorization as a Rural Volunteer Ambulance Driver expires on the same date the Applicant's health care provider BLS card expires.

V. To renew the authorization, the Applicant must complete the Health District's *"Application for Rural Volunteer Ambulance Driver"* via the portal on the EMS webpage.

VI. The Rural Volunteer Ambulance Service shall submit a letter of intent to hire via the portal on the EMS webpage.

VII. After receipt of the above, the OEMSTS will issue a Written Authorization as a Rural Volunteer Ambulance Driver.

**Note:** 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.

# CERTIFICATION PROCEDURES

# DISTRICT PROCEDURE FOR APPLICATION FOR INITIAL CERTIFICATION/LICENSURE

(EMS Regulations Section 300)

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

1. Is at least 18 years of age; and
2. Is applying for initial certification; or
3. Is applying for initial licensure; or
4. If applying for Reciprocity, has current certification from the State of Nevada, NR, or another state; or
5. Needs to renew a Clark County or State of Nevada Certificate that has been expired less than two (2) years.

**Note**: The Applicant must either have proof of residency in Clark County (State of Nevada I.D., military I.D., or Clark County University/College ID), or an offer of employment from a Clark County permitted agency.

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

**PROCEDURE:**

**APPLICANTS FOR CERTIFICATION ONLY**

I. The Applicant must complete the Health District's "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage

II. After successful completion of the above, the Applicant must submit payment of all required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

III. After review of the submitted documentation, the Applicant may need to be processed for 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. **Exception:** The Applicant has been fingerprinted by the OEMSTS within the last two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

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

IV. Applicants who do not have current certification (at the level of application) from the State of Nevada or NR but do possess a current recognized certification from another state will need to schedule and successfully pass the Health District approved certification examination.

1. Applicants will be given the option of either gaining National Registry certification or successfully passing the Health District approved certification exam.
2. The Applicant will be given a total of six (6) attempts (any combination of the two exams) to pass either examination. Example: If the Applicant has three (3) failed attempts on the National Registry Cognitive Examination, the Applicant will have three (3) remaining attempts to pass either the National Registry Cognitive Examination or the Health District approved certification examination.
3. If the Applicant chooses to take the Health District approved certification examination, he/she will be given instructions to set up a student account to

purchase the exam. Once the account is established and the examinations have been purchased by the Applicant, they must then call the EMS office to schedule to take the examination. All certification examinations are proctored by EMS office staff. The examination may not be scheduled more than seven (7) days in advance. Note: The Applicant will have six (6) months from the date of application to complete the process.

V. After successful completion of the above, a Clark County EMS Certificate will be issued to the Applicant.

# DISTRICT PROCEDURE FOR RENEWAL OF AN EXPIRED NEVADA CERTIFICATE

(EMS Regulations Section 300.322)

**DEFINITION:** An Applicant for renewal of an expired Nevada Certificate is an EMT, AEMT, or Paramedic who held a Nevada Certificate that expired within the last two (2) years and wants to regain certification in Clark County. This process must be completed within the two year period following the expiration of a Nevada certificate.

**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 Initial Certification."**

**PROCEDURE:**

I. The Applicant must complete an "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

II. The Applicant must submit payment of all required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

III. After review of the documentation, the OEMSTS will send an automated email to the Applicant giving further instructions on the status of the application.

IV. The Applicant may need to be processed for 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.

**Exception:** The Applicant has been fingerprinted by the OEMSTS within the past two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

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

V. 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. (See Appendix A-1)

VI. After completion of the above, a Clark County EMS Certificate will be issued to the Applicant.

# DISTRICT PROCEDURE FOR APPLICATION FOR UPGRADE/ADDITION OF AGENCY

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

1. Needs to upgrade their current License and/or Certificate;
2. Needs to add an additional Clark County permitted agency to the current License; or
3. Has a current Clark County certification as an EMT, AEMT, or Paramedic and is being hired by a Clark County permitted agency.

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

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for Upgrade/Addition of Agency*" via the portal on the EMS webpage

II. If the Applicant is applying for licensure, the Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm there has been an offer of employment.

III. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After review of the submitted documentation, the Applicant may need to be processed for 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. **Exception:** The Applicant submits two (2) complete sets of fingerprint cards to the OEMSTS.

**Note:** Applicants who have not been fingerprinted by the OEMSTS within the last two (2) years will be required to submit fingerprints to the OEMSTS.

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

V. After successful completion of the above requirements, the Applicant may schedule to take the protocol exam appropriate to the level of application.

# LICENSURE PROCEDURES

# DISTRICT PROCEDURE FOR LICENSURE

(EMS Regulations Section 500)

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

1. Is currently certified as an EMT, AEMT, or Paramedic in Clark County, or is in the process of concurrently applying for both certification and licensure in Clark County; and
2. Is being hired by a Clark County permitted Ambulance Service, Air Ambulance Service, or Firefighting Agency.

**Note:** Refer to the **"District Procedure for Application for Upgrade/Addition of Agency:"**

1. If applying for a higher level of certification/licensure; or
2. If adding another permitted agency to the current License; or
3. If held a License in the last six (6) months and currently being hired by a permitted agency.

**Note:** If being hired by an Air Ambulance Service, refer to the **"District Procedure for Air Ambulance Attendant."**

**Note:** Initial Paramedic Applicants and Paramedic Applicants who have not held a License within the past year, please also refer to the **"District Procedure for Provisional Licensure."**

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

**PROCEDURE:**

I. The Applicant must submit the District's *"Application for Initial Certification/Licensure"* via the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

II. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm there has been an offer of employment.

III. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After review of the submitted documentation, the Applicant may need to be processed for 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. **Exception:** The Applicant has been fingerprinted by the OEMSTS within the last two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

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

V. After successful completion of the above, the Applicant may schedule to take the Health District approved licensure examination appropriate to the level of certification. (See Appendix A)

A. The Applicant must 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 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."** (See Appendix A-1)

B. The 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.

C. The remedial training must be successfully completed before the fourth attempt. A maximum of six (6) attempts will be allowed.

D. 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.

**Note:** 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 Health District's licensure examination prior to obtaining a new License.

E. Upon successful completion of the above, the Applicant will be issued an Attendant License appropriate to the level of application.

# DISTRICT PROCEDURE FOR
# AIR AMBULANCE ATTENDANT

(EMS Regulations Section 500.100)

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

1. Is currently certified as a Paramedic in Clark County, or is in the process of concurrently applying for both Paramedic certification and licensure in Clark County; and
2. Has an offer of employment from an Air Ambulance Service.

**Note**:

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.

**PROCEDURE:**

I. The Applicant for licensure as an Air Ambulance Attendant must complete the Health District's *"Application for Initial Certification/Licensure"* via the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

II. The Applicant must submit evidence of completion of a District approved Air Ambulance Course that includes:

   a. Documentation of completion of all clinical skills performed, and didactic material covered, including date(s) and time(s);
   b. Names of all instructors who signed off on each skill performed; and
   c. Copy of the Applicant's signed Medical Flight Crew Orientation completion certificate signed by the Clinical Education Coordinator.

   1. The Health District's *"Physician's Statement"* 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, unless already on file.

III. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm there has been an offer of employment.

IV. An automated email will be sent to the Applicant giving further instructions on the status of the application.

V. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

VI. The Applicant may need to be processed for 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. **Exception:** The Applicant has been fingerprinted by the OEMSTS within the last two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

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

VII. After successful completion of the above, the Applicant may schedule to take the Health District's ALS Licensure Examination, unless currently licensed as a Paramedic in Clark County.

**Note:** 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 Health District's licensure examination prior to obtaining a new License.

A. The Applicant must 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 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."** (See Appendix A-1)

B. 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.

C. The remedial training must be successfully completed before the fourth attempt. A maximum of six (6) attempts will be allowed.

D. 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.

VIII. Upon successful completion of the above, the Applicant will be issued an Air Ambulance Attendant License.

# DISTRICT PROCEDURE FOR PROVISIONAL LICENSURE

(EMS Regulations Section 500.400)

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

1. Is being hired, or sponsored for internship by 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. Is certified in Clark County as a Paramedic and has not held a License within the last year.

**Note:** The Applicant will have one year from completion of the didactic and clinical sections of the Paramedic Course to obtain a Provisional License.

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for Initial Certification/Licensure*" via the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

A. If an account does not already exist, the Applicant shall create an account via the portal on the EMS webpage.

B. If not currently certified/licensed at a lower level, the Applicant shall submit an *"Application for Initial Certification/Licensure"* via the portal on the EMS webpage.

C. If currently certified/licensed at a lower level, the Applicant shall submit an *"Application for Upgrade/Addition of Agency"* via the portal on the EMS webpage.

II. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm there has been an offer of employment or sponsorship of internship.

III. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After review of the submitted documentation, the Applicant may need to be processed for 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. **Exception:** The Applicant has been fingerprinted by the OEMSTS within the last two (2) years.

**Note:** If fingerprints are obtained outside the OEMSTS, the Applicant will need to submit two (2) complete sets of fingerprint cards to the OEMSTS.

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

V. After successful completion of the above, the Applicant may schedule to take the Health District's ALS Licensure Examination. The Applicant must successfully pass 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 30 (thirty) 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."** (See Appendix A-1)

VI. Upon passing the ALS Licensure Examination a Provisional License may be issued by the OEMSTS allowing the Applicant to start the Field internship. The Applicant must sign the Provisional License prior to issuance to be kept on file at the OEMSTS.

VII. A Paramedic student/Intern who holds a Provisional License must complete a Field evaluation with a permitted 911 responding agency. The Field evaluation 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 student/Intern must be evaluated under the direct observation of a Paramedic EMS Instructor. The Paramedic student/Intern must be a third-rider and be with the Paramedic EMS Instructor at all times when providing care.

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

VIII. 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 911 calls will be required to complete the 120 hours of Field evaluation if the Paramedic is hired by a permitted agency that responds to 911 calls.

IX. The SNHD Paramedic Mentorship/Internship Program consists of three phases of structured training which every new Paramedic student/Intern must successfully complete in its entirety as outlined in the Southern Nevada Health District Paramedic Mentorship/Internship Program.

X. The holder of a Provisional License may only perform approved procedures under the direct supervision of a Clark County Endorsed EMS Instructor until successful completion of the Field internship.

XI. A Provisional License shall not be valid for more than one (1) year from the date of issuance and is not renewable.

XII. A Provisional License will expire at the completion of a training Course or the issuance of a Clark County Certificate and License, if applicable.

# ENDORSEMENT PROCEDURES

# DISTRICT PROCEDURE FOR EMS INSTRUCTOR I TRAINING AND ENDORSEMENT

(EMS Regulations Section 400)

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

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

**Note**: An Applicant who shows documentation of successful completion of a Fire Instructor I Course will be exempt from taking the EMS Instructor I Course.

**Note:** The Applicant must successfully complete the SNHD Preceptor Program, if not already on file.

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

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for EMS Instructor*" via the portal on the EMS webpage.

II. The OEMSTS will verify successful completion of a Health District approved EMS Instructor Course, unless the Applicant can show documentation of completion of a Fire Service Instructor I Course, including proof of successful completion of the SNHD Preceptor Program. The required minimum Course content shall meet or exceed the most recent Guidelines for Educating the EMS Instructor.

III. The Clark County permitted agency or Authorized EMS Training Center will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as an EMS Instructor.

IV. The OEMSTS will bill the permitted agency or Authorized EMS Training Center as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

V. Upon successful completion of the above, 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.

VI. An Endorsement as 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.

**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," "District Procedure for Master EMS Instructor Endorsement," or "District Procedure for EMS Instructor Endorsement via Challenge."** The Applicant must meet all prerequisites.

# DISTRICT PROCEDURE FOR EMS INSTRUCTOR II TRAINING AND ENDORSEMENT

(EMS Regulations Section 400)

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

**Exception:** An Applicant who is certified as an EMT or higher may serve as the lead instructor for a program of training in Emergency Medical Services, not to exceed the level of EMS certification, if the Applicant has a license as a Nevada Educator from the Nevada State Board of Education and fulfills all other requirements for Instructor II Endorsement.

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

**Note**: An Applicant who shows documentation of successful completion of a Fire Instructor II Course will be exempt from taking the EMS Instructor II Course provided they have documentation of successful completion of the SNHD Preceptor Program.

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

**ELIGIBIITY:** If currently endorsed as an EMS Instructor I:

1. Successful completion of an EMS Instructor II Course, or
2. A Fire Service Instructor II Certificate, including proof of successful completion of the SNHD Preceptor Program, or
3. Successful completion of the entire Health District approved EMS Instructor Course; and
4. An offer of employment from an Authorized EMS Training Center outlining the intent to utilize the Applicant as an EMS Instructor II.

If not currently endorsed as an EMS Instructor I:

1. A Fire Service Instructor II Certificate, including proof of successful completion of the SNHD Preceptor Program, or
2. Successful completion of the entire Health District approved EMS Instructor Course, and
3. An offer of employment from an Authorized EMS Training Center outlining the intent to utilize the Applicant as an EMS Instructor II.

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

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for EMS Instructor*" via the portal on the EMS webpage.

II. The Clark County permitted agency or Authorized EMS Training Center will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as an EMS Instructor II.

III. The OEMSTS will bill the permitted agency or Authorized EMS Training Center as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. Upon successful completion of the above, 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.

V. An Endorsement as 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.

**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
# MASTER EMS INSTRUCTOR ENDORSEMENT

(EMS Regulations Section 400)

**DEFINITION:** A Master EMS Instructor is a Person who 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.

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

**PROCEDURE:**

I. The Applicant must submit an "*Application for EMS Instructor*" via the portal on the EMS webpage.

II. The Applicant will be prompted to upload successful completion of:

A. The NEMSEC examination; or

B. A course of study with the awarding of at least a bachelor's degree in education or other related field, as approved by OEMSTS; or

C. Submit a portfolio that includes a CV that delineates courses developed by the Applicant, i.e. course objectives, lesson plans, course evaluations, rosters, and any other documentation that shows the instructor both developed and taught the course.

II. Applicants who do not have A. and B. above must upload, or submit to the OEMSTS, a portfolio that includes the following:

A. Resume or CV that includes 100 hours of original content to include 84 hours in medical, trauma, or operations; and

B. Courses developed that includes course objectives, lesson plans, course evaluations, rosters, and any other documentation that shows the instructor both developed and taught the course.

III. The OEMSTS will verify successful completion of a Health District approved EMS Instructor Course, unless the Applicant can show documentation of completion of a Fire Service Instructor II course, including proof of successful completion of the SNHD Preceptor Program. The required minimum Course content shall meet or exceed the most recent Guidelines for Educating the EMS Instructor.

IV. The Clark County permitted agency or Authorized EMS Training Center will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as a Master EMS Instructor.

V. The OEMSTS will bill the permitted agency or Authorized EMS Training Center as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

VI. Upon approval by the OEMSTS, the Applicant must develop and teach a 16-hour Instructor Course as the capstone project to be evaluated and signed off by a Master EMS Instructor.

VII. 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 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.

VIII. A Master EMS Instructor Endorsement 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.

**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 400.500)

**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, EMS Instructor II, or Master EMS Instructor as defined in this procedure manual; or
2. Has held an Endorsement as an EMS Instructor I, EMS Instructor II, or Master EMS Instructor that has been expired for more than two (2) years; and
3. Has an offer of employment from an Authorized EMS Training Center outlining the intent to utilize the Applicant as an EMS Instructor I, EMS Instructor II, or Master EMS Instructor.

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

**ELIGIBILITY:**

1. Current Clark County certification as an AEMT or Paramedic; or
2. Current State of Nevada licensure as a Physician, PA, APRN, or RN.

**PROCEDURE:**

I. The Applicant must submit an "*Application for EMS Instructor*" via the portal on the EMS webpage.

II. The Applicant will be prompted to submit documentation of training and experience equivalent to that of an EMS Instructor at the applicable level being requested. If not considered equivalent training, the Applicant must complete a Health District approved EMS Instructor Course.

III. The OEMSTS will verify successful completion of a Health District approved EMS Instructor Course, unless the Applicant can show documentation of completion of the equivalent Fire Service Instructor course, including proof of successful completion of the SNHD Preceptor Program. The required minimum Course content shall meet or exceed the most recent Guidelines for Educating the EMS Instructor.

IV. The Clark County permitted agency or Authorized EMS Training Center will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as an EMS Instructor.

V. The OEMSTS will bill the permitted agency or Authorized EMS Training Center as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

VI. Upon successful completion of the above, the OEMSTS may:

A. Add an Endorsement as an EMS Instructor I, EMS Instructor II, or Master EMS Instructor to the Applicant's AEMT or Paramedic Certificate; or

B. Issue a Letter of Authorization as an EMS Instructor I, EMS Instructor II, or Master EMS Instructor to a Nevada licensed Physician, PA, APRN, or RN.

VII. The EMS Instructor Endorsement will expire:

A. On the date of expiration appearing on the Certificate for an 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.

# DISTRICT PROCEDURE FOR CRITICAL CARE PARAMEDIC TRAINING & ENDORSEMENT

(EMS Regulations Section 400)

**PREREQUISITES:**

1. Current Paramedic certification.
2. Proof of successful completion of an OEMSTS approved CCT Course.
3. Current certification in BLS; Current certification in advanced cardiac life support procedures for Patients who require ALS care; and current certification in life support procedures for pediatric Patients who require ALS care.

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

**PROCEDURE:**

I. The minimum Course content shall be no less than eighty (80) hours and 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 $CO_2$

Cardiovascular

Cardiac Pathophysiology
Acute Coronary Syndromes
Cardiogenic Shock
Vascular Emergencies
Pacemakers
Invasive Hemodynamic Monitoring
Intra-Aortic Balloon Pump Theory and Transport
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). (4th ed.): St. Louis: Mosby
CAMTS Accreditation Standards 9th Edition
Pollack A. (Ed.). (2011). Massachusetts: Jones and Bartlett

**Note:** 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.

II. The Applicant must complete the Health District's "*Application for Critical Care Paramedic Endorsement*" via the portal on the EMS webpage.

III. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as a CCT Paramedic.

IV. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

V. Upon successful completion of the above, 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.

VI. Upon completion of the internship, the agency's Medical Director shall send a letter to the OEMSTS documenting successful completion of all requirements in V above, along with all completed evaluations of the Critical Care internship.

VII. Upon successful completion of the above, the OEMSTS will add a Critical Care Endorsement to the Applicant's License.

VIII. The Critical Care Paramedic Endorsement will expire:

A. On the date of expiration appearing on the Certificate/License; or

B. On the date of separation from employment as a Critical Care Paramedic; or

C. On the date the Certificate/License is suspended or revoked.

# DISTRICT PROCEDURE FOR ENDORSEMENT AS A CRITICAL CARE PARAMEDIC VIA CHALLENGE

(EMS Regulations Section 400)

**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

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

**PREREQUISITES:**

1. Current Clark County certification as a Paramedic;
2. Proof of successful completion of an OEMSTS approved Critical Care Paramedic Course or a CAPCE approved Critical Care Paramedic Course, or equivalent, as determined by the OEMSTS.

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for Critical Care Paramedic Endorsement*" via the portal on the EMS webpage.

II. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as a CCT Paramedic.

III. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. Upon successful completion of the above, 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 that includes a minimum of 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, along with all completed evaluations of the Critical Care internship.

VI. Upon successful completion of the above, the OEMSTS will add a Critical Care Endorsement to the Applicant's License.

VII. The Critical Care Paramedic Endorsement will expire:

A. On the date of expiration appearing on the Certificate/License; or

B. On the date of separation from employment as a Critical Care Paramedic; or

C. On the date the Certificate/License is suspended or revoked.

# DISTRICT PROCEDURE FOR COMMUNITY PARAMEDICINE TRAINING AND ENDORSEMENT

(EMS Regulations Section 400)

**PREREQUISITES:**

1. Current licensure as a Paramedic Attendant.

**Note**: The Applicant will be given six months to complete the process.

**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 |
| **Total Didactic Hours:** | **51.5** |

**Note:** 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.

II. The Applicant must complete the Health District's *"Application for Community Paramedicine Endorsement"* via the portal on the EMS webpage.

III. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized to provide Community Paramedicine Services.

IV. Upon successful completion of the above, the OEMSTS will add a Community Paramedicine Endorsement to the Applicant's License.

V. The Community Paramedicine Endorsement will expire:

   A. On the date of expiration appearing on the Certificate/License; or

   B. On the date of separation from employment to provide Community Paramedicine Services; or

   C. On the date the Certificate/License is suspended or revoked.

# DISTRICT PROCEDURE FOR
# EMS RN TRAINING & ENDORSEMENT

(EMS Regulations Section 400)

**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. Current certification in BLS;
3. Current certification in advanced cardiac life support procedures for Patients who require ALS care;
4. Current certification in life support procedures for pediatric Patients who require ALS care; and
5. Certification of completion of training in prehospital trauma life support procedures.

**Note**: The OEMSTS will accept training conducted by an agency accredited by CAMTS (Accreditation of Medical Transport Systems) provided the Applicant submits documentation of satisfactory completion of the didactic and clinical requirements.

**Note**: The Applicant will be given six months to complete the process.

**PROCEDURE:**

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

| MODULE | TOPIC | HOURS |
|---|---|---|
| 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 (**Note**: 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 include the instructors who monitored the training.

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

| MODULE | TOPIC | HOURS |
|---|---|---|
| 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 |
| | **TOTAL HOURS:** | **108.0** |

IV. 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.

V. The agency's Medical Director may adjust the hours devoted to a specific clinical rotation, depending on the nurse's background.

VI. All didactic and clinical course content must meet both AAMS and local requirements.

VII. As part of the training requirements, the EMS RN must successfully demonstrate the following procedures:

A. Five (5) endotracheal intubations on a human Patient, live or simulated.

B. Five (5) central venous line placements, either live or simulated.

C. Two (2) catheter thoracostomies, either live or simulated.

D. One (1) surgical cricothyroidotomy, either live or simulated.

E. All procedures as listed on the *"Physician Advisor Verification Form."*

F. All procedures as listed on the *"Skills Proficiency Record."*

VIII. An Applicant for an EMS RN Endorsement card must complete the "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

IX. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as an EMS RN.

X. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

XI. Upon completion of the above, the EMS RN must successfully pass the Health District's ALS Licensure Examination with a minimum score of 80% (within the last six (6) months). The EMS RN is allowed six 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.

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

**Note:** An Applicant who has had a lapse in employment with a permitted Ambulance Service or Air Ambulance Service for more than six months will be required to retake the Health District's ALS Licensure Examination.

XII. After successful completion of the above, the OEMSTS will issue an Endorsement card permitting the EMS RN to function as an EMS RN with a Clark County Fixed Wing or Rotorwing Air Ambulance agency.

A. The Endorsement will expire on the date that appears on the holder's EMS RN Endorsement card, or on the date of separation from employment as an EMS RN.

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

(EMS Regulations Section 400.600)

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

**PROCEDURE:**

Application Process

I. The Applicant must submit the District's *"Application for AI/DM Endorsement"* via the portal on the EMS webpage.

II. The Applicant will be prompted to upload the following:

   A. Proof of successful completion of a training program for administering immunizations and dispensing medications in response to a PHE, as approved by the OEMSTS.

   B. Copy of current certification in BLS. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides.

   C. If Paramedic, submit a copy of current certification in advanced cardiac life support procedures for Patients who require ALS care. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides.

   D. If Paramedic, submit a copy of current certification in life support procedures for pediatric Patients who require ALS care. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides.

III. Upon successful completion of the above, the OEMSTS will add an Endorsement to the Applicant's AEMT or Paramedic Certificate.

IV. 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 AEMTs and Paramedics 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 the Health Officer's designee.

V. 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 AEMTs and Paramedics 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 the Health Officer's designee.

# SKILLS PROCEDURE

# DISTRICT PROCEDURE FOR
# SKILLS PROFICIENCY VERIFICATION

**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 Health District's "*Skills Proficiency Record*" prior to:

   A. Completion of a Health District approved EMS Course; and

   B. Endorsement as an EMS RN

II. 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.

III. Completed "*Skills Proficiency Records*" must be retained for three (3) years by a Health District approved Authorized EMS Training Center.

# PERMIT PROCEDURES

# DISTRICT PROCEDURE FOR
# INITIAL AMBULANCE PERMIT

(EMS Regulations Section 800)

**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. The Applicant must complete the Health District's "*Application for Ambulance Permit/Permit Renewal*" via the portal on the EMS webpage.

II. The Applicant must schedule all Ambulance/Air Ambulance Units to be inspected for compliance with EMS Regulations.

III. The Applicant will be responsible for paying all required non-refundable, non-transferable fee(s).

IV. An initial Permit expires on June 30th following the date of issuance and may be renewed annually on July 1st.

# DISTRICT PROCEDURE FOR
# RENEWAL OF AMBULANCE PERMIT

(EMS Regulations Section 800)

**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. The Applicant must complete the Health District's *"Application for Ambulance Permit/Permit Renewal"* via the EMS webpage.

II. The Applicant must schedule all Ambulance/Air Ambulance Units to be inspected for compliance with EMS Regulations.

III. The Applicant must submit payment of the required non-refundable, non-transferable fee(s).

IV. The renewal Permit expires on June 30th following the date of issuance and may be renewed annually on July 1st.

# RECERTIFICATION PROCEDURES

# DISTRICT PROCEDURE FOR APPLICATION FOR RECERTIFICATION

(EMS Regulations Section 300)

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

**PROCEDURE:**

I. The Applicant must complete the Health District's "*Application for Recertification/Licensure*" via the EMS webpage.

II. The Applicant must upload continuing medical education and refresher course completion certificates to the "Documents" section via the portal on the EMS webpage.

III. The Applicant will be responsible for paying the required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After successful completion of the above, a Clark County EMS Certificate will be issued to the Applicant. If applicable, a License will be issued with the same expiration date.

## SECTION II: ADMINISTRATIVE CRITERIA

I. All CME Courses/Classes must be Health District 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 from CME Classes or refresher Course completion certificates. These copies must be retained for at least three (3) years for audit purposes.

IV. EMS Instructors may receive one-time credit for a Class or Course taught during the recertification period.

V. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online Course unless the instructor developed the Class/Course in its entirety.

VI. 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 30 (30) days of submission of recertification documentation. False statements or submission of false statements may be sufficient cause for forfeiture of the right to recertification by the Southern Nevada Health District.

VII. Should an audit identify a deficiency in the recertification documentation, the Applicant 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 EDUCATIONAL REQUIREMENTS FOR EMT RECERTIFICATION

(EMS Regulations Section 300.110)

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

## 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 for suggested topics for each listed category

In addition to the above, you must submit documentation of completion of a Health District approved BLS course. The BLS card must be current and shall not expire the same month your Clark County Certificate expires. **Note:** The BLS course may not be applied toward CME hours.

**PROCEDURE:**

I. The Applicant must submit an *"Application for Recertification/Licensure"* via the portal on the EMS webpage sixty (60) days prior to certification expiration. (Please refer to the **"District Procedure for Application for Recertification."**)

II. The Applicant will be prompted to upload one (1) of the following to the "Documents" section via the portal on the EMS webpage:

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. EMT (24 hour) Refresher Course Completion Certificate; or

C. An "*EMT Recertification Report"* listing all Health District or CAPCE approved CME classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator, if applicable. Certificates of completion for all Health District approved distributive education must be included, if applicable; or

D. The Applicant will verify that all necessary training hours have been uploaded into their account on the portal.

III. Submit payment of all required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After successful completion of the above, the OEMSTS will renew the Applicant's EMT Certificate. If applicable, a License will be issued with the same expiration date.

**SECTION II: ADMINISTRATIVE CRITERIA — EMT**

I. 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.

# DISTRICT PROCEDURE FOR EDUCATIONAL REQUIREMENTS FOR ADVANCED EMT RECERTIFICATION

(EMS Regulations Section 300.210)

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

## 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 for suggested topics for each listed category

In addition to the above, you must submit documentation of completion of a Health District approved BLS course. The BLS card must be current and shall not expire the same month your Clark County Certificate expires. **Note:** The BLS course may not be applied toward CME hours.

**PROCEDURE:**

I. The Applicant must submit an "*Application for Recertification/Licensure*" via the portal on the EMS webpage sixty (60) days prior to certification expiration. (Please refer to the **"District Procedure for Application for Recertification."**)

II. The Applicant will be prompted to upload one (1) of the following to the "Documents" section via the portal on the EMS webpage:

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. AEMT (36 hour) Refresher Course Completion Certificate; or

C. An "*AEMT Recertification Report*" listing all Health District or CAPCE approved CME Classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator, if applicable. Certificates of completion for all Health District approved distributive education must be included, if applicable; or

D. The Applicant will verify that all necessary training hours have been uploaded into their account on the portal.

III. Submit payment of all required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After successful completion of the above, the OEMSTS will renew the Applicant's AEMT Certificate. If applicable, a License will be issued with the same expiration date.

**SECTION II: ADMINISTRATIVE CRITERIA—AEMT**

I. 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.

# DISTRICT PROCEDURE FOR EDUCATIONAL REQUIREMENTS FOR PARAMEDIC RECERTIFICATION

(EMS Regulations Section 300.310)

**DEFINITION:** Recertification for Paramedic status requires completion of sixty (60) hours of continuing medical education biennially and current certification in BLS, 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 | 10 Hours |
| OB/PEDS | 10 Hours |
| ELECTIVE** | 12 Hours |

* Go to 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 BLS course. The BLS card must be current and shall not expire the same month your Clark County Certificate expires. **Note:** The BLS course may not be applied toward CME hours. An additional 12 hours of training in the appropriate categories will be added by submitting current ACLS and PALS cards.

**PROCEDURE:**

I. The Applicant must submit a completed "*Application for Recertification/Licensure*" via the portal on the EMS webpage sixty (60) days prior to certification expiration. (Please refer to the **"District Procedure for Application for Recertification"**)

II. The Applicant will be prompted to upload one (1) of the following to the "Documents" section via the portal on the EMS webpage:

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. Paramedic (48 hour) Refresher Course Completion Certificate; or

C. A "*Paramedic Recertification Report*" listing all Health District or CAPCE approved CME Classes taken during the recertification period. The report must include the signature of the Applicant and Course coordinator, if applicable. Certificates of

completion for all Health District approved distributive education must be included, if applicable; or

D. The Applicant will verify that all necessary training hours have been uploaded into their account on the portal.

III. Submit payment of all required non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

IV. After successful completion of the above, the OEMSTS will renew the Applicant's Paramedic Certificate. If applicable, a License will be issued with the same expiration date.

**SECTION II: ADMINISTRATIVE CRITERIA — PARAMEDIC**

I. Each certified individual must submit documentation of completion of a course in advanced cardiac life support procedures for Patients who require ALS care. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides. 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.

II. Each certified individual must submit documentation of completion of a course in life support procedures for pediatric Patients who require ALS care. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides. 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.

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

(EMS Regulations Section 400)

**DEFINITION:** Renewal of Endorsement as a Critical Care Paramedic requires completion of 12 hours of continuing education specific to critical care topics. These hours can be used towards total hourly requirements for certification level.

**PROCEDURE:**

I. The Applicant must submit the *"Application for Recertification/Licensure"* via the portal on the EMS webpage and enter the demographics information. (Please refer to the **"District Procedure for Application for Recertification"**)

II. The Applicant will be prompted to upload a copy of the "*Critical Care Paramedic Renewal Report*" which can be utilized as documentation of completion of Critical Care Paramedic continuing education hours, and completed within the certification period, if education not already on file with the OEMSTS:

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.

III. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized as a CCT Paramedic.

IV. The OEMSTS will bill the permitted agency as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

V. Upon successful completion of the above, 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. Supporting documentation must be uploaded via the EMS webpage 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.

III. 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 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)

**DEFINITION:** Renewal of Endorsement to Provide Community Paramedicine Services requires twelve (12) hours of continuing education specific to community paramedicine. These hours can be used towards total hourly requirements for certification level.

**PROCEDURE:**

I. The Applicant must submit the *"Application for Recertification/Licensure"* via the portal on the EMS webpage sixty (60) days prior to Certificate expiration. (Please refer to the **"District Procedure for Application for Recertification"**)

II. The Applicant will be prompted to upload documentation of 12 hours of hours of continuing education specific to community paramedicine topics completed within the recertification period :

1. If the Community Paramedicine Endorsement was issued less than six (6) months prior to the expiration date, there is no CME requirement.
2. If the Community Paramedicine 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 Community Paramedicine Endorsement was issued more than one (1) year prior to the expiration date, the CME requirement is twelve (12) hours.

III. The Clark County permitted agency will be emailed via the portal on the EMS webpage to confirm the Applicant will be utilized to provide Community Paramedicine Services.

IV. Upon successful completion of the above, the OEMSTS will renew the Community Paramedicine Endorsement on the Applicant's Paramedic License.

**ADMINISTRATIVE CRITERIA — Renewal of 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. 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 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)

**DEFINITION:** Renewal of Endorsement for EMS Instructor requires four (4) hours of continuing education specific to instructor education.

**PROCEDURE:**

I. The Applicant must submit the "*Application for Instructor Recertification*" via the EMS webpage sixty (60) days prior to certificate expiration.

II. The Applicant will be prompted to upload a copy of the "EMS *Instructor Renewal Report*" which can be utilized as documentation of completion of Instructor continuing education hours, and completed within the certification period, if education not already on file with the OEMSTS:

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.

III. The Applicant must submit an "*Application for Recertification/Licensure*" (please refer to the **"District Procedure for Application for Recertification"**).

IV. The Clark County permitted agency or Authorized EMS Training Center will be emailed via the portal on the EMS webpage to confirm continued employment as an EMS Instructor.

V. The OEMSTS will bill the permitted agency or Authorized EMS Training Center as appropriate. The Applicant will be responsible for paying all remaining non-refundable, non-transferable fee(s) via the portal on the EMS webpage.

VI. Upon successful completion of all above requirements, the OEMSTS will renew the Applicant's EMS Instructor Endorsement at the appropriate level.

**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. Supporting documentation must accompany the Health District approved "*EMS Instructor Renewal Report*" via the EMS webpage 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.

III. 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 must apply for Endorsement via challenge in accordance with the appropriate **"District Procedure for EMS Instructor Endorsement via Challenge."**

# REFRESHER COURSE PROCEDURES

# DISTRICT PROCEDURE FOR EMT REFRESHER COURSE

(EMS Regulations Section 300)

**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**

| TOPIC | HOURS |
|---|---|
| **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** |
| **TOTAL HOURS:** | **24.0** |

**SECTION II: ADMINISTRATIVE CRITERIA**

I. All requests for training must be submitted to the OEMSTS via the portal on the EMS webpage as outlined in the **"District Procedure for Initial Education"** and the **"District Procedure for Continuing Medical Education (CME)."**

II. The Course coordinator shall submit the *"EMS Course Completion Record"* via the portal on the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

III. 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.

IV. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online course unless the instructor developed the Class/Course in its entirety.

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.

# DISTRICT PROCEDURE FOR ADVANCED EMT REFRESHER COURSE

(EMS Regulations Section 300)

**DEFINITION**: Refresher training for AEMT 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**

| TOPIC | HOURS |
|---|---|
| **Operational Tasks** | **1.0** |
| **Trauma** | **5.0** |
| **Medical Emergencies** | **6.0** |
| **Airway/Breathing/Cardiology** | **12.0** |
| **OB/Peds** | **12.0** |
| **TOTAL HOURS:** | **36.0** |

**SECTION II: ADMINISTRATIVE CRITERIA**

I. All requests for training must be submitted to the OEMSTS via the portal on the EMS webpage at least thirty (30) days prior to the scheduled start date.

II. The Course coordinator shall submit the *"EMS Course Completion Record"* via the portal on the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

III. 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.

IV. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online course unless the instructor developed the Class/Course in its entirety.

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.

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

**DEFINITION**: Refresher training for AEMT 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 (Please refer to the **"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 requests for training must be submitted to the Health District via the portal on the EMS webpage at least thirty (30) days prior to the scheduled start date.

II. The Course coordinator shall submit the "*EMS Course Completion Record*" via the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

III. The training center must maintain an EMS training file which will include the Course outline, rosters, and tests for a minimum of three (3) years.

IV. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online course unless the instructor developed the Class/Course in its entirety.

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.

# DISTRICT PROCEDURE FOR PARAMEDIC REFRESHER COURSE

(EMS Regulations Section 300.321)

**DEFINITION**: Refresher training for Paramedic status requires the successful completion of a minimum of forty-eight (48) hours of training conforming to the most recent National EMS Education Standards.

**Note:** An additional twelve (12) hours of training is required for a total of sixty (60) hours. This can be covered by submitting current ACLS and PALS cards.

**SECTION I: REQUIRED MINIMUM COURSE CONTENT**

| TOPIC | HOURS |
|---|---|
| **Operational Tasks** | **2.0** |
| **Trauma** | **6.0** |
| **Medical Emergencies** | **8.0** |
| **Airway/Breathing/Cardiology** | **10.0** |
| **OB/Peds** | **10.0** |
| **Elective** | **12.0** |
| **TOTAL HOURS:** | **48.0** |

**SECTION II: ADMINISTRATIVE CRITERIA**

I. All requests for training must be submitted to the Health District via the portal on the EMS webpage at least thirty (30) days prior to the scheduled start date.

II. The Course coordinator shall submit the "*EMS Course Completion Record*" via the portal on the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

III. The training center will maintain an EMS training file which will include the Course outline, rosters, and tests for a minimum of three (3) years.

IV. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online course unless the instructor developed the Class/Course in its entirety.

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.

# DISTRICT PROCEDURE FOR DISTRIBUTIVE REFRESHER COURSES

**DEFINITION**: Distributive refresher training includes online, Distance Learning, and video/print media education that is approved by CAPCE, or pre-approved by the OEMSTS.

**PROCEDURE:**

I. All requests for training must be submitted to the Health District via the portal on the EMS webpage at least thirty (30) days prior to the scheduled start date.

II. The Course coordinator shall submit the "*EMS Course Completion Record*" via the portal on the EMS webpage AND via email to ems@snhd.org within ten (10) days of Course completion.

III. Distributive refresher Courses will be pre-approved on a case-by-case basis by the OEMSTS.

IV. The Authorized EMS Training Centers and permitted agencies must 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.

V. Instructors will be awarded hour for hour CME credit for live classroom education. No CME credit will be awarded for an instructor who serves as the facilitator of an online course unless the instructor developed the Class/Course in its entirety.

VI. Independent education using CAPCE-approved courses is permitted. Certificates of successful completion of these courses can be submitted via the portal or attached to the *"Application for Recertification"*.

# DISTRICT PROCEDURE FOR PRORATING EMS CMEs

(EMS Regulations Section 300.321)

**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.

All Levels:

1. If the certificate has been issued for a period of less than one (1) year, there is no CME requirement. The EMS provider must submit an *"Application for Recertification/Licensure"* via the portal on the EMS webpage. All provider cards submitted must expire after the expiration date of the certificate.

2. If the certificate has been issued for a period of more than one (1) year but less than two (2) years, the EMS provider must submit half of the required hours of CME. EMTs will be required to submit twelve (12) hours of CME, AEMTs will be required to submit eighteen (18) hours of CME, and Paramedics will be required to submit thirty (30) hours of CME. All provider cards submitted must expire after the expiration date of the certificate.

# RECEIVING FACILITY PROCEDURES

# DISTRICT PROCEDURE 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 the institution
2. Owner of the 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. After review of the submitted documentation, the Health Officer may 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.

V. Designation as an EMS pediatric destination hospital expires on December 31st following the date of issuance and may be renewed annually on January 1st.

VI. A hospital may submit an "*Application for Initial/Renewal Designation as an EMS Pediatric Destination Hospital*" at least sixty (60) days prior to expiration.

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

**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. Boulder City Hospital
      3. 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.

# DISTRICT PROCEDURE FOR DESIGNATION AS A RECEIVING FACILITY FOR PATIENTS PLACED ON A LEGAL HOLD FOR MENTAL ILLNESS

(EMS Regulations Section 100)

**DEFINITION:** A Receiving Facility for Legal 2000 patients may include hospitals, off-site emergency departments, micro hospitals, mental health facilities or other similar facilities. Each Receiving Facility is approved by the Health Officer.

**PROCEDURE:**

I. A facility must meet the following requirements for designation as a Receiving Facility for Legal 2000 Patients:

A. The facility must be able to provide 24-hour service seven days a week including holidays, internal disaster, or capacity issues notwithstanding.

B. A facility must accept all payor types.

C. A facility must be capable of receiving communication from EMS crews via a recordable line at the Fire Alarm Office or other appropriate primary of secondary public safety answering point (this may be by phone patch or via telemetry radio).

D. A facility must notify the Fire Alarm Office or other appropriate primary or secondary public safety answering point if the facility is unable to provide service to EMS crews. This notification must include the reason for the service disruption.

E. A facility must be capable of providing medical clearance for Legal 2000 Patients as provided in NRS and NAC.

F. The facility must provide relevant data to the OEMSTS for quality assurance functions as requested.

II. The Health Officer may withdraw Receiving Facility status for violations of this procedure.

III. A Receiving Facility may voluntarily withdraw from receiving EMS transports at any time but must first notify the OEMSTS.

# DISTRICT PROCEDURE FOR DESIGNATION AS A RECEIVING FACILITY FOR PATIENTS THAT MEET REMOTE OUTPATIENT EMERGENCY DEPARTMENT ALTERNATE DESTINATION CRITERIA

(EMS Regulations Section 100)

**DEFINITION:** A Receiving Facility for patients that meet the remote outpatient emergency department alternate destination criteria protocol may include hospitals, off-site emergency departments, micro hospitals, or other similar facilities. Each Receiving Facility is approved by the Health Officer.

**PROCEDURE:**

I. For designation as a Receiving Facility for **"Remote Outpatient Emergency Department Alternate Destination Criteria Protocol"** patients, a facility must meet the following requirements.

A. The facility must be able to provide 24-hour service seven days a week including holidays, internal disaster, or capacity issues notwithstanding.

B. The facility must be staffed with a board-certified, board eligible Emergency Medicine physician (Nevada State licensed MD or DO) on site during hours of operation.

C. The facility must accept all payor types.

D. The facility must be capable of receiving communication from EMS crews via telemetry radio.

E. The facility must notify the Fire Alarm Office or other appropriate primary or secondary public safety answering point if the facility is unable to provide service to EMS crews. This notification must include the reason for the service disruption.

F. The facility must provide relevant data to the OEMSTS for quality assurance functions as requested.

II. The Health Officer may withdraw Receiving Facility status for violations of this procedure.

III. A Receiving Facility may voluntarily withdraw from receiving EMS transports at any time but must first notify the OEMSTS.

# DISTRICT PROCEDURE FOR DESIGNATION AS A RECEIVING FACILITY FOR PUBLIC INTOXICATION

(EMS Regulations Section 100)

**DEFINITION:** A Receiving Facility for public intoxication patients may include sobering centers, community crisis centers, or other facility designed to provide sobering services to the community. Each Receiving Facility is approved by the Health Officer.

**PROCEDURE:**

I. For designation as a Receiving Facility for patients who meet the "Public Intoxication Protocol" a facility must meet the following requirements.

A. The facility must be able to provide 24-hour service seven days, a week including holidays, internal disaster, or capacity issues notwithstanding.

B. A facility must accept all payor types.

C. A facility must be capable of receiving communication from EMS crews via a recordable line at the Fire Alarm Office or other appropriate primary of secondary public safety answering point (this may be by phone patch or via telemetry radio).

D. A facility must notify the Fire Alarm Office or other appropriate primary or secondary public safety answering point if the facility is unable to provide service to EMS crews. This notification must include the reason for the service disruption.

E. The facility must provide relevant data to the OEMSTS for quality assurance functions as requested.

II. The Health Officer may withdraw Receiving Facility status for violations of this procedure.

III. A Receiving Facility may voluntarily withdraw from receiving EMS transports at any time but must first notify the OEMSTS.

# MISCELLANEOUS PROCEDURES

# DISTRICT PROCEDURE FOR ADMINISTRATIVE CORRECTIVE ACTION

(EMS Regulations Sections 1800 & 1900)

**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 Persons, Licensed Persons, 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).

   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 individuals 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).

   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 an action that will be commensurate with the severity of the violation and comply with EMS Regulations 1800 and 1900 inclusive.

# DISTRICT PROCEDURE FOR MANAGING DRUG SHORTAGES

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

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

**PROCEDURE:**

I. If an EMS provider agency's 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.

II. 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).

III. 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.

IV. 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.

V. 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.

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

# DISTRICT PROCEDURE FOR
# SPECIAL EVENT MEDICAL PLAN APPROVAL

(EMS Regulations Section 1150)

**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 Air Ambulance, Ground Ambulance, and Firefighting Agency 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. The Host Organization will be responsible for payment of all required non-refundable, non-transferable fee(s).

IV. Upon completion of the above, 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 ISSUANCE OF A NATIONAL REGISTRY SUPPORT LETTER

**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 an "*Application for Initial Certification/Licensure*" via the portal on the EMS webpage. (Please refer to the **"District Procedure for Initial Certification/Licensure"**)

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 with a Clark County permitted agency.

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 BLS card. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides.

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. If there is a signature block on the back of the card, the card holder must sign the card prior to uploading both sides.

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.)

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

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. The Applicant may apply for Clark County Paramedic certification after attaining certification as a National Registry Paramedic as defined in the **"District Procedure for Application For Initial Certification/Licensure"**.

# APPENDIX A

Appendix A-1

## 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 a written 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 to allow the Health District to review the documentation.

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.

# APPENDIX B

## PROCEDURE FOR DRUG/DEVICE/PROTOCOL (DDP) AGENDA ITEMS TO BE CONSIDERED FOR REFERRAL BY THE MAB

I. Individuals wanting an agenda item to be considered for inclusion on the MAB consent agenda for referral to the DDP must contact either the OEMSTS Manager or MAB Chairman.

A. If the request related to a drug or device is confirmed:

1. The individual making the request will be asked to complete an *"Application for Petition for Addition/Change/Removal of Drug/Equipment to/from the EMS Inventory,"* to submit with the MAB meeting packet.

2. The MAB will vote to allow or disallow the agenda item to proceed to the DDP for consideration.

3. If the consent agenda item is approved by the MAB, it will be placed on the DDP agenda for discussion at the next appropriate DDP meeting.

B. If the request related to a protocol is confirmed:

1. The individual making the request may be asked to draft a protocol for discussion at the next appropriate DDP meeting.

2. If the DDP arrives at a decision on the draft protocol, it will be placed on the MAB agenda for discussion at the next appropriate MAB meeting.

3. The MAB will review the protocol, make revisions as appropriate, and vote to allow or disallow the protocol to be placed in the Emergency Medical Care Protocol Manual.

**Note:** The finalized Emergency Medical Care Protocol Manual will be released the first week in January and July. If no changes are required, the current Emergency Medical Care Protocol Manual will remain in effect.

4. Clark County permitted agencies will have 90 days to train a minimum of 90% of their licensed EMS providers on any newly released protocol(s).

A. The mandatory training will apply to the level of EMS Provider who will be utilizing the finalized protocol(s).

**Example:** If a newly released protocol pertains to Paramedics only, the agency will need to submit documentation of successful completion of training for 90% of their Paramedics.

B. Following completion of the required training, the permitted agencies shall submit the training rosters to the OEMSTS for verification.

C. If the OEMSTS determines the training to be adequate, an approval letter will be sent authorizing the permitted agency to employ the new protocol(s).

5. Draft protocols presented as requiring immediate implementation shall be reviewed by the OEMSTS Medical Director and assessed on a case-by-case basis.

A. The OEMSTS Medical Director may schedule an ad hoc MAB meeting to discuss the need for immediate implementation.

B. If an ad hoc meeting cannot be held in a timely manner, the OEMSTS Medical Director will consult with the Health Officer to discuss the need for immediate implementation.

## PROCEDURE FOR DRUG/DEVICE/PROTOCOL (DDP) AGENDA ITEMS TO BE ADDED, CHANGED, OR REMOVED FROM THE EMS INVENTORY

I. A Clark County permitted agency may submit a written proposal for any change to the EMS inventory. The proposal shall include the signatures of both the Medical Director and EMS Operations Director.

   A. If applicable, an *"Application for Petition for Addition/Change/Removal of Drug/Equipment to/from the EMS Inventory,"* shall accompany the written proposal. (See Appendix B-3)

   B. The OEMSTS will review the information provided, including cost estimates, and determine if the submitted information is adequate to be placed on the MAB consent agenda.

   C. The MAB will consider the proposal and determine:

      1. If further action/investigation of the proposal is desired; and

      2. If the assignment of specialists to the proposal is necessary (e.g. cardiologist, anesthesiologist, etc.).

   D. If the consent agenda item is approved, it will be placed on the DDP agenda for discussion at the next appropriate DDP meeting.

II. In consideration of the request for addition/change/removal of drug/equipment to/from the EMS Inventory, the DDP will at a minimum:

   A. Evaluate the medical value to the community;

   B. Evaluate the financial impact to the community, if adopted;

   C. Review and/or modify the proposed implementation plan;

   D. Assess the information provided and classify the proposal based on the nationally recognized medical associations using evidenced-based criterion; and

   E. Make recommendations for approval or rejection of the proposal.

III. The OEMSTS will review the findings of the DDP and may refer education related issues to the Education Committee to:

   A. Review and/or revise the draft protocol;

   B. Review the implementation plan including any education materials; and

   C. Develop an evaluation process, if needed.

IV. The MAB will hear the evaluation from the DDP and Education Committee, if applicable, along with the classification based on the nationally recognized medical associations using evidence-based criterion.

V. After review, the MAB will then approve or reject implementation of the proposal, including drafts of protocols, education materials, and the evaluation process.

VI. The Quality Directors Improvement (Q.I.) Committee will review the preliminary findings of implementation at 90 days and determine whether revisions are necessary.

VII. The QI Committee will review the preliminary findings of implementation at one year.

VIII. The MAB will hear the findings from the QI Committee and determine if revisions are necessary.

Appendix B-3

**APPLICATION FOR PETITION FOR**
**ADDITION/CHANGE/REMOVAL**
**OF DRUG/EQUIPMENT TO/FROM THE EMS INVENTORY**

This form should be filled out and submitted to the Health District OEMSTS Office by the 15th of the month prior to the next scheduled Medical Advisory Board Committee meeting for consideration. Please attach any materials that you consider useful in this discussion.

Specify one: ☐ Addition ☐ Change ☐ Removal

Agency requesting:_____

Name of drug/device:_____

What is the classification/action of the drug?_____

What is the type of device? _____

What is the proposed change, if applicable? _____

What is the proposed benefit of the addition/change/removal of this drug/device?_____

_____

Specify the number of Patient encounters this change would affect:_____

What drug/device is currently being used to manage this problem? (Provide supporting statistical data)_____

_____

Are you aware of any other EMS system using this drug/device in the prehospital setting? Yes _____No _____

EMS System:_____ Contact person:_____

Summarize their experience/use of the drug/device:_____

_____

Manufacturer(s)/Supplier(s):_____

Is training required? Yes____ No ____ If yes, explain education program in detail on separate sheet, including projected cost of program. (Refer to back of page for "Cost Calculations".)

Is an IRB required? Yes____ No ____

Please disclose any past or present affiliation/relationship with the vendor/supplier.

ATTACH:

1. DRAFT PROTOCOL
2. LIST OF OTHER AGENCIES USING DRUG/ITEM
3. DOCUMENTATION, ARTICLES AND/OR STATISTICAL DATA ON PRODUCT EFFECTIVENESS FOR EVIDENCE-BASED REVIEW
4. ADDITIONAL COMMENTS ON A SEPARATE SHEET

_____ _____
Medical Director EMS Operations Director

# COST CALCULATIONS

INITIAL COST

| | | | |
|---|---|---|---|
| Cost per Dose/Device | $_____ | x | |
| Proposed Number of Doses/Devices per Vehicle | $_____ | x | |
| Number of Vehicles (per SNHD) | _____ | = | |
| **Total Initial Cost** | | | $_____ |

ANNUAL COST

| | | | |
|---|---|---|---|
| Cost per Dose/Device | $_____ | x | |
| Estimated Number of Doses/Devices Used Annually | _____ | = | |
| **Total Annual Cost** | | | $_____ |

TRAINING COST

| | | | |
|---|---|---|---|
| Number of Personnel to Train (per SNHD) | _____ | x | |
| Number of Man-Hours | _____ | x | |
| Estimated Cost per Hour | $_____ | x | |
| Estimated Cost of Materials | $_____ | = | |
| **Estimated Training Cost** | | | $_____ |

# Drug/Device/Protocol Evaluation for the MAB

Does the issue need to be studied?

NO

System-wide Implemenation?
Complete "Application for Petition for Addition/Removal of Drug/Equipment To/From the EMS Inventory"

Review by OEMSTS and MAB Chairman

Item placed on MAB agenda to be sent to Drug/Device/Protocol Committee

Drug/Device/Protocol Committee:

1. Review/edit protocol
2. Determine endorsement of protocol
3. Coordination with:
   a. Education Committee
   b. QI Directors Committee
4. Make final recommendation to MAB once QA process, educational plan and final protocol completed

Address the need to revise/update the following:

1) Protocol Manual (effective date/review all affected protocols)
2) Inventory lists (equipment/drug)
3) Inspection form
4) Website posting

YES

1. Complete "Application for Petition for Addition/Removal of Drug/ Equipment To/From the EMS Inventory"
2. Review by OEMSTS and MAB Chairman

Item placed on MAB agenda:

1. Endorse moving forward with study
2. Send study to QI Directors Committee for coordination and oversight

QI Directors Committee Review:

1. Objective – to determine:
   a. Ethical/safe
   b. Is the study question narrow and precise?
   c. Primary outcome measure
      i. Secondary measures
   d. Study protocol (recommend changes)
      i. Sample size calculations
   e. Timeline to report results back to QI Directors Committee

QI Directors Committee Presentation:

1. Agency/Investigator presents study results in writing, along with a10-minute presentation to QI Directors Committee
2. QI Directors Committee determines:
   a. Final answer to study question
   b. Report back results and make recommendation to MAB

MAB votes to endorse for EMS system

## DRUG/DEVICE/PROTOCOL COMMITTEE EVIDENCE-BASED GUIDELINES

1. Gather available evidence from credible sources and predetermined criteria (e.g. human studies only) and assess the power of methodology:

    a. Level 1 – Large randomized clinical trials
    b. Level 2 – Smaller randomized clinical trials
    c. Level 3 – Prospective, controlled, nonrandomized cohort studies
    d. Level 4 – Historic, non-randomized cohort, or case-controlled studies
    e. Level 5 – Case series, no control group
    f. Level 6 – Animal or mechanical model
    g. Level 7 – Extrapolations from existing data, theoretical analyses
    h. Level 8 – Rational conjecture (common sense); common practice

2. Assess quality of evidence and execution of methodology:

    a. Excellent
    b. Good
    c. Fair
    d. Poor

3. Determine the proposal class/recommendation based on available information:

    a. Class I: Definite, excellent Level 1 evidence
    b. Class II: Acceptable and useful; no harm
    c. Class IIa: good supportive evidence
    d. Class IIb: Fair supportive evidence
    e. Class IIg: Historical precedent or consensus
    f. Class III: Not acceptable; may be harmful
    g. Indeterminate: Insufficient data