Chapter 60. Emergency Medical Transportation Services

Subchapter A. General Provisions

§6001. Definitions

Advanced Life Support (ALS)—emergency medical care administered to at least the level of an emergency medical technician-paramedic's scope of practice.

Air Ambulance—any aircraft, either fixed-winged or rotary-winged, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual, or which is advertised or otherwise held out to the public as such.

Air Ambulance Service—any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in air ambulances, individuals who may need medical attention during transport.

Ambulance—any authorized emergency vehicle, equipped with warning devices, designed and operated as a part of a
regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such.

1. For purposes of these provisions, ambulance shall not mean a hearse or other funeral home vehicle utilized for the transportation of the dead.

Ambulance Service or Ambulance Provider—any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in ambulances, individuals who may need medical attention during transport.

1. Ambulance services/providers shall not include any of the following:
   a. an agency of the federal government;
   b. a volunteer nonprofit organization or municipal nonprofit organization operating an invalid coach or coaches;
   c. an entity rendering assistance to a licensed ambulance or ambulances in the case of a major disaster;
   d. a licensed hospital providing nonemergency, noncritical, inter-hospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital;
   e. an entity operating an ambulance(s) from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside of the state to a location outside of the state; or
   f. an entity providing transportation to employees, who become sick or injured during the course of their employment, from a job site to the nearest appropriate medical facility.

Auto-Injector—a spring-loaded needle and syringe with a single dose of epinephrine that will automatically release and inject the medicine.

Basic Life Support (BLS)—emergency medical care administered to the EMT-basic scope of practice.

Bureau—the Department of Health and Hospitals, Office of Public Health, Bureau of Emergency Medical Services.

Certified Emergency Medical Technician—an individual who is certified as any one of the following:
   1. a certified emergency medical technician-basic;
   2. a certified emergency medical technician-intermediate; or
   3. a certified emergency medical technician-paramedic.

Certified Emergency Medical Technician-Basic—an individual who has successfully completed the emergency medical technician-basic training program adopted by the bureau, who is nationally registered and who is certified by the bureau.

Certified Emergency Medical Technician-Intermediate—an individual who has successfully completed the emergency medical technician-intermediate training program adopted by the bureau, who is nationally registered and who is certified by the bureau.

Certified Emergency Medical Technician-Paramedic—an individual who has successfully completed the emergency medical technician-paramedic training program adopted by the bureau, who is nationally registered and who is certified by the bureau.

Certified First Responder—an individual who has successfully completed a training course adopted by the bureau for first responders and who is certified by the bureau.

Change of Ownership (CHOW)—the sale or transfer (whether by purchase, lease, gift or otherwise) of an ambulance service by a person/entity with controlling interest that results in a change of ownership, or control of 30 percent or greater of either the voting rights or assets of a provider, or that results in the acquiring person/corporation holding a 50 percent or greater interest in the ownership or control of the provider.

Commission—the Louisiana Emergency Medical Services Certification Commission.

Department—the Louisiana Department of Health and Hospitals (DHH).

Emergency Medical Personnel or Emergency Service Person—an individual who is a certified first responder or a certified emergency medical technician.

Emergency Medical Response Vehicle—a marked emergency vehicle with fully visual and/or audible warning signals, operated by a certified ambulance service, whose primary purpose is to respond to the scene of a medical emergency to provide emergency medical stabilization or support, command, control, and communications, but which is not an ambulance designed or intended for the purpose of transporting a victim from the scene to a medical facility, regardless of its designation.

1. Included are such vehicles referred to, but not limited to, the designation as "sprint cars", "quick response vehicle", "special response vehicle", "triage trucks", "staff cars", "supervisor units", and other similar designations.

2. Emergency medical response vehicles shall not include fire apparatus and law enforcement patrol vehicles which carry first aid or emergency medical supplies, and which respond to medical emergencies as part of their routine duties.

Emergency Medical Services (EMS)—a system that represents the combined efforts of several professionals and
agencies to provide pre-hospital emergency care to the sick and injured.

EMS Professional—an individual who is a certified first responder or certified emergency medical technician.

EMS Task Force—individuals appointed by the assistant secretary of the Office of Public Health who advise and make recommendations to the office and the department on matters related to emergency medical services.

Emergency Vehicle—a vehicle that meets the definition of emergency vehicle in the Louisiana Highway Regulatory Act (R.S. 32:1).

First Aid Certificate—a certificate in the emergency response course issued by the American Red Cross or other certificate in a first aid course approved by the bureau and issued to any individual who has successfully completed the required training and met the established standards of such organizations.

Headquarters—an ambulance service's center of operation and control.

Industrial Ambulance—any vehicle owned and operated by an industrial facility and used for transporting any employee who becomes sick, injured or otherwise incapacitated in the course and scope of his employment from a job site to an appropriate medical facility.

Intermediate Life Support (ILS)—emergency medical care administered to the EMT-Intermediate scope of practice.

Moral Turpitude—an act of baseness, vileness, or depravity in the duties which one person owes another, or to society in general, which is contrary to the usual, accepted and customary rule of right and duty which a person should follow.

Municipal Nonprofit Organization—an organization owned by a parish, municipality or entity of a parish or municipality which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician.

Operational—for an ambulance service to be considered operational, it must have a functional communications center (either owned and operated, or contracted) on duty 24 hours a day, 365 days a year. There must also be at least one staffed ambulance at the service’s level of care on duty and able to respond to requests for service 24 hours a day, 365 days a year within the provider’s service area unless excepted under other provisions of this Chapter.

Physician—a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

V-MED 28—the National Emergency Medical Services Mutual Aid (radio) frequency of 155.340 MHZ in the VHF broad band frequency spectrum.
§6037. Medical Protocol

A. In those parishes where the parish or component medical society has established a written pre-hospital EMS protocol for use in the parish, the ambulance service must follow that protocol, and/or the protocols of the Louisiana Emergency Response Network as applicable.

B. In those parishes where the parish or component medical society have not established a written pre-hospital EMS protocol for use in the parish, the EMS service must develop a protocol to be used by its personnel. The appropriate portions of this protocol must be approved by the parish or component medical society.

C. These protocols shall include protocols for the care of:

1. cardiac arrest;
2. ventricular tachycardia;
3. supraventricular tachycardia;
4. premature ventricular ectopy when greater than six per minute, multifocal, bigeminal, occurring in bursts of two or more, falling on or close to the T wave;
5. severe, unrelieved, suspected cardiogenic chest pain, or suspected myocardial infarction;
6. bradydysrhythmias;
7. hypoglycemia;
8. anaphylactic reactions;
9. hypovolemic shock;
10. unconsciousness, altered mental status, or respiratory depression from suspected drug overdose;

11. treatment induced unconsciousness, altered mental status, hypotension, or respiratory depression from physician ordered or protocol appropriate paramedic administered narcotics;

12. respiratory failure or respiratory arrest;

13. active seizure;

14. hospital patient destination;

15. pre hospital diversion;

16. patient with advanced directives;

17. mass casualty incidents; and

18. injuries from weapons of mass destruction.

D. All protocols shall:

1. meet or exceed requirements of these licensing standards and all applicable federal, state, and local laws;

2. be consistent with the National Standard EMS Scope of Practice and the rulings of the Louisiana EMS Certification Commission; and

3. be reviewed annually.

E. Ambulance services are accountable for assuring compliance with applicable protocols by their personnel. Exceptions to these protocols must be reviewed on a case-by-case basis by the physician medical director.

F. Ambulance services must produce and provide to all personnel a policy and procedures manual governing the service’s operation to all personnel.

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HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 35:476 (March 2009).
§6057. Ambulances

A. Any vehicle used as an ambulance must be designed and constructed by the manufacturer as such.

B. The following medical and safety equipment are requirements for certification of all ground ambulances operating within the state of Louisiana.

1. All ambulances must have a national standard public safety two-way radio communication (day-to-day communications). The ambulance dispatch center(s) and/or point(s) of dispatch must be capable of interactive two-way communications within all of the service's defined area.

2. Two-way radio with disaster communications must be VHF-National EMS Mutual Aid Frequency, V-MED 28, also known as the Hospital Emergency Activation Radio (HEAR) system 155.34 0 Mhz with carrier squelch, ENCODER optional.

3. Direct communication with a physician and hospital must be conducted through:
   a. HEAR; or
   b. wireless telephone;
   c. Radio Telephone Switch Station (RTSS); or
   d. Med. 10 System, etc.

4. All ambulances must carry the following basic medical supplies and equipment:
   a. one suction unit capable of providing a suction of at least 300 mm Hg;
   b. two wide bore tubing;
   c. two rigid pharyngeal tonsilar wide bore tip;
   d. a second suction unit that is portable;
   e. two each suction liners or refills, if required;
   f. two suction catheters, 5 fr, or 6 fr, or 5/6 fr;
   g. two suction catheters, 14 fr or larger;
   h. one portable oxygen cylinder, at least 500 psi, 2000 psi full, appropriate color;
   i. one portable oxygen regulator/flowmeter, variable flow;
   j. one fixed oxygen cylinder, "M" or "O" cylinder, at least 500 psi, 2000 psi full, appropriate color or equivalent;
   k. one fixed oxygen regulator, variable flow;
   l. one oxygen wrench;
   m. one fixed oxygen flowmeter;
   n. one humidifier;
   o. four adult non-rebreather masks;
   p. four pediatric non-rebreather masks;
   q. four adult nasal prongs with supply tubing;
   r. two adult BVM with reservoir and supply tubing;
   s. two pediatric BVM with reservoir and supply tubing;
   t. two oral airways, adult;
   u. two oral airways, child;
   v. two oral airways, pediatric;
   w. one traction splint with ratchet, straps, and ankle hitch, adult;
   x. two extremity splints, upper;
   y. two extremity splints, lower;
   z. three extrication-type cervical collars, adult;
   aa. three extrication-type cervical collars–pediatric;
   bb. three cervical immobilization devices;
   cc. three long spine immobilization device with at least 3 points of confinement (one must be a clamshell device);
   dd. one short spine immobilization device with appropriate straps and pillows;
   ee. two burn sheets, sterile;
   ff. fifty small sterile dressings, 4" x 4" (at least 25 packs of 2);
   gg. ten large combine dressings, sterile, 5" x 9" or larger;
   hh. two multi-trauma dressings, 10" x 30" or larger or 18" x 24" military abdominal dressings;
   ii. eight triangle bandages, commercial;
   jj. ten soft roller bandages, 2" wide, unused rolls;
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kk. six rolls of hypoallergenic adhesive tape, 1" and 2" or wider (no paper tape);
ll. two occlusive dressings, 3" x 8" petroleum gauze or commercial chest seal;
mm. four chemical cold packs;
nn. two liters normal saline for irrigation in plastic containers;
oo. sterile water, 500 cc or larger in plastic container;
pp. oral glucose, 12.5 mg (cake icing may be substituted);
qq. one aspirin, 325 mg (5 grain) or four aspirin, 81 grain pediatric;
rr. one albuterol inhalation solution, 2.5 mg with appropriate delivery device;
s. three per crew member Mark I kits (.7 mg atropine and 2 PAM-V0);
tt. radio communication, two-way disaster;
uu. radio communication, two way EMT to physician;
vv. radio communication, two way EMT to dispatch;
ww. one OB kit;
x. one roll of aluminum or a silver swaddler;
 yy. one blood pressure cuff, adult;
zz. one blood pressure cuff, pediatric;
aaa. one stethoscope;
bbb. one pair trauma shears;
cccc. one set of three triangle reflectors (or cyalume light sticks, or traffic cones), set;
ccccc. two flashlights, minimum of 2 "C" cell size with spare batteries and bulbs;
ccccc. twenty-five triage tags; and
ff. one supra glottis airway approved by the Louisiana EMS Certification Commission.
5. All ambulances must carry the following infection control supplies and equipment:
a. one box of non-sterile exam gloves;
b. one box of gloves, non latex;
c. two pair of full peripheral glasses with face masks, or fluid shields;
d. one per crew member jumpsuit/gown, impervious to liquid, disposable;
e. two readily identifiable trash bags, labeled for contaminated wastes;
f. one pair per crew member shoe covers;
g. one sharps container, 1 quart;
h. one bottle or 12 towelettes of commercial antimicrobial hand cleaner;
i. two biohazard trash bags;
j. four N-95 masks;
k. one set per crew member, chemical resistant, full body coverage coverall with hood;
l. one pair per crew member, chemical resistant footwear;
m. one roll per crew member, chemical sealant tape (not duct tape);
n. one pair per crew member, chemical resistant goggle with a minimum of a N-95 mask.
6. All ambulances must be equipped with the following:
a. two fire extinguishers, 2:-10:B:C;
b. two blankets;
c. one current US DOT Hazardous Materials Guidebook;
d. one set per crew member, hard hat and safety goggles (ANZ! 37.1 or NFPA approved fire fighter turn out gear);
e. one pair per crew member, leather or nomex gauntlet gloves;
f. one per crew member, incident command vest with florescent trim and appropriate logos;
g. one stretcher, wheeled, multi-level;
h. one set of stretcher straps with at least three points of confinement, including shoulder harness; and
i. all ambulances that are not staffed and equipped to the EMT Paramedic level must carry:
   i. one automated external defibrillator with electrodes and leads;
   ii. one epinephrine auto injector adult, .30 mg; and
   iii. one epinephrine auto injector, pediatric, .15 mg.
7. The following must be carried by all ambulances that are not staffed and equipped to the EMT Paramedic level:
a. an automated external defibrillator (either automatic or semi-automatic) with the appropriate lead cables and at least two sets of the appropriate disposable electrodes. If the automated defibrillator is also capable of manual defibrillation, then an appropriate lock-out mechanism (such as an access code, computer chip, or lock and key) to prevent unauthorized use of the device by those persons not authorized to manually defibrillate must be an integral part of the device;
b. two bags of IV fluids for KVO lines, D5W or isotonic 0.9 percent NaCl, 250 cc bag minimum:
i. all IV fluids must be in plastic bags or bottles, not glass bottles, unless medically indicated otherwise;

c. 4,000 cc IV fluids for volume expansion, Ringers' Lactate or 0.9% isotonic NaCl (these bags of saline do not include the bags or bottles of saline above for irrigation purposes):

i. all IV fluids must be in plastic bags or bottles, not glass bottles, unless medically indicated otherwise;

d. four sets of minidrip tubing;

e. four sets of macrodrip tubing;

f. one set of Y-type blood tubing;

g. two extension tubings;

h. one three-way stop cock;

i. four over-the-needle IV catheters, 14 gauge;

j. four over-the-needle IV catheters, 16 gauge;

k. four over-the-needle IV catheters, 18 gauge;

l. four over-the-needle IV catheters, 20 gauge;

m. four over-the-needle IV catheters, 22 gauge;

n. two venous tourniquets;

o. two syringes, 1 cc w/.1 cc graduations;

p. two syringes, 3cc to 6 cc;

q. two syringes, 10 cc to 12 cc;

r. two syringes, 30 cc w/ leur lock

s. two hypodermic needles, 21 to 23 gauge;

t. two hypodermic needles, 25 to 27 gauge;

u. one EPA or OSHA approved sharps container for use at the patient's side;

v. ten antiseptic solution wipes;

w. one IV pole or roof hook;

x. three arm boards of various sizes; and

y. one supra glotic airway device as approved by the Louisiana EMS Certification Commission.

8. The following must be carried by all paramedic level ambulances:

a. two intra osseus needles of preference;

b. one McGill forceps, adult;

c. one McGill forceps, pediatric;

d. one tube or five packets of water soluble lubricant not containing cellulose;

e. two endotracheal tubes, uncuffed, 3.0 to 3.5;

f. two endotracheal tubes, uncuffed, 4.0 to 4.5;

g. two endotracheal tubes, uncuffed, 5.0 to 5.5;

h. two endotracheal tubes, cuffed, 6.0 to 6.5;

i. two endotracheal tubes, cuffed, 7.0 to 7.5;

j. two endotracheal tubes, cuffed, 8.0 to 8.5;

k. two stylettes, adult;

l. two stylettes, pediatric;

m. one laryngoscope handle w/ 1 set of spare batteries and bulbs, or two disposable handle units;

n. one laryngoscope blade, Size 0, straight, or two disposable blades, Size 0, straight;

o. one laryngoscope blade, Size 1, straight, or two disposable blades, Size 1, straight;

p. one laryngoscope blade, Size 2, straight, or two disposable blades, Size 2, straight;

q. one laryngoscope blade, Size 3, straight or curved, or two disposable blades, Size 3, straight or curved;

r. one laryngoscope blade, Size 4, straight or curved, or two disposable, Size 4, straight or curved;

s. one cardiac monitor defibrillator with paper strip recorder;

t. two sets defib pads or gel;

u. one set of lead cables;

v. two sets of disposable monitoring electrodes;

w. one glucometer, CLIA approved;

x. two end tidal CO₂ detection or monitoring devices;

y. analgesic:

i. one aspirin 5 grain or four 81 mg;

ii. morphine *, 10 mg/ml;

z. anti-arrhythmic:

i. five Adenosine, 6 mg;

ii. four Atropine, pf, 1 mg;

iii. one Calcium Chloride, 10 percent, 1 gram;

iv. three Amiodorone (pre-filled), 150 mg or four Lidocaine, 100 mg pf bolus;

v. one Lidocaine, pm, 1 gram;

aa. anti-convulsive:

i. one Valium *, 10 mg/2 ml;

ii. two Mag Sulfate, 2 grams;

bb. anti-histamine:

i. one Benadryl, 50 mg;

cc. bronco-dilators:

i. one Albuterol , 2.5 mg*;

dd. cardio-vascular:

i. two Dopamine, pm, 200 mg;
ii. three NTG, .4mg Tablet or spray;

ee. diabetic control:
   i. two D50W, 50 cc;
   ii. two Glucagon, 1 mg;

ff. loop diuretic:
   i. two Bumex, 2 mg or two Lasix, 80 mg;

gg. narcotic antagonist:
   i. Naloxone, 2mg;

hh. vasopressors, 12 mg total;
   i. at least two Epinephrine, 1 mg 1:1000;
   ii. at least two Epinephrine, 1 mg 1:10000; and
   iii. Vasopressin, 1 mg (optional).

NOTE: *or alternative medication approved by the appropriate parish or component medical society.

C. All ambulances must have a functional air conditioner and heater in the patient compartment. They must function within the vehicle manufacturer's recommended guidelines or specifications.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1235.2.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 35:480 (March 2009).