TITLE 9. HEALTH SERVICES CHAPTER 25. DEPARTMENT OF HEALTH SERVICES

EMERGENCY MEDICAL SERVICES

ARTICLE 7. AIR AMBULANCE SERVICE LICENSING

Section	
R9-25-701.	Definitions (Authorized by A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2212,
	36-2213, 36-2214, and 36-2215)
R9-25-703.	Requirement and Eligibility for a License (A.R.S. §§ 36-2202(A)(3) and (4), 36-
	2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2215)
R9-25-704.	Initial Application and Licensing Process (Authorized by A.R.S. §§ 36-2202(A)(3) and
	(4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215)
R9-25-705.	Renewal Application and Licensing Process (A.R.S. §§ 36-2202(A)(3) and (4), 36-
	2209(A)(2), 36-2213, 36-2214, and 36-2215) Repealed
R9-25-706.	Term and Transferability of License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213,
	36-2214, and 41-1092.11)
R9-25-707.	Changes Affecting a License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)
R9-25-708.	Inspections and Investigations (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, and
	36-2214)
R9-25-709.	Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, 36-
	2215, 41-1092.03, and 41-1092.11(B))
R9-25-710.	Minimum Standards for Operations (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2),
	and 36-2213)
R9-25-711.	Minimum Standards for Mission Staffing (Authorized by A.R.S. §§ 36-2202(A)(3) and
	(4), 36-2209(A)(2), and 36-2213)
R9-25-713.	Minimum Standards for Training (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-
	2213)
R9-25-714.	Minimum Standards for Communications (A.R.S. §§ 36-2202(A)(3) and (4), 36-
	2209(A)(2), and 36-2213) Repealed
R9-25-715.	Minimum Standards for Medical Control (Authorized by A.R.S. §§ 36-2202(A)(3) and
	(4), 36-2209(A)(2), and 36-2213)
R9-25-716.	Minimum Standards for Recordkeeping (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and
	36-2213) Repealed
R9-25-717.	Minimum Standards for an Interfacility Neonatal Mission (A.R.S. §§ 36-2202(A)(3) and

(4), 36-2209(A)(2), and 36-2213) Repealed

Minimum Standards for an Interfacility Maternal Mission (A.R.S. §§ 36-2202(A)(3) and R9-25-718. (4), 36-2209(A)(2), and 36-2213) Repealed

	ARTICLE 8. AIR AMBULANCE REGISTRATION
Section	
R9-25-801.	Definitions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2212) Repealed
R9-25-802.	Requirement, Eligibility, and Application for an Initial or Renewal Certificate of
	Registration for an Air Ambulance (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-
	2212, 36-2213, 36-2214, and 36-2240(4))
R9-25-803.	Term and Transferability of Certificate of Registration (A.R.S. §§ 36-2202(A)(4) and (5),
	36-2209(A)(2), 36-2212, and 41-1092.11)
R9-25-804.	Changes Affecting Registration (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), and
	36-2212)
R9-25-805.	Inspections (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, and 36-
	2232(A)(11))
R9-25-806.	Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2212, 36-2234(L),
	41-1092.03, and 41-1092.11(B)) Repealed
R9-25-807.	Minimum Standards for an Air Ambulance (A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-
	2209(A)(2); and 36-2212)
Table 8.1.	Minimum Equipment and Supplies Required on Air Ambulances, By Mission Level and
	Aircraft Type (Authorized by A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-2209(A)(2); and
	36-2212)

ARTICLE 7. AIR AMBULANCE SERVICE LICENSING

R9-25-701. Definitions (Authorized by A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2215)

In addition to the definitions in A.R.S. § 36-2201 and R9-25-101, the following definitions apply in this Article and in Article 8 of this Chapter, unless otherwise specified:

- 1. "Air ambulance" means an aircraft that is an "ambulance" as defined in A.R.S. § 36-2201.
- 2. "Air ambulance service" means an ambulance service that operates an air ambulance.
- #. "Application packet" means the information and documents required by the Department when making a decision for:
 - <u>a.</u> <u>Licensing an air ambulance service, or</u>
 - b. Issuing a certificate of registration for an air ambulance.
- 3. "Base location" means a physical location at which a person houses an air ambulance or equipment and supplies used for the operation of an air ambulance service or provides administrative or other support for the operation of an air ambulance service.
- 4. "Business organization" means an entity such as an association, cooperative, corporation, limited liability company, or partnership.
- 5. "Call number" means a unique identifier used by an air ambulance service to identify a specific mission. [only used in 710(A)(8); describe there]
- 6. "CAMTS" means the Commission on Accreditation of Medical Transport Systems, formerly known as the Commission on Accreditation of Air Medical Services. [only certification organization allowed under A.R.S § 36-2213(8)]
- #. "Certificate holder" means a person who holds a current and valid certificate of registration for an air ambulance. [Moved from 801 because it would have been the only definition]
- 7. "Change of ownership" means a transfer of controlling legal or controlling equitable interest and authority in an air ambulance service.
- 8. "Critical care" means pertaining to a patient whose condition requires care commensurate with the scope of practice of a physician or registered nurse.
- 9. "Estimated time of arrival" means the number of minutes from the time that an air ambulance service agrees to perform a mission to the time that an air ambulance arrives at the scene.
- 10. "Holds itself out" means advertises through print media, broadcast media, the Internet, or

other means. [No longer used]

- 11. "Interfacility" means between two health care institutions. [Need to relook at definition when beginning review of ground ambulance rules in Article 10.]
- 12. "Licensed respiratory care practitioner" has the same meaning as in A.R.S. § 32-3501.
- #. "Licensee" means a person who holds a current and valid license from the Department to operate an air ambulance service. [Added to match "certificate holder"]
- 13. "Maternal" means pertaining to a woman whose pregnancy is considered by a physician to be high risk, who is in need of critical care services related to the pregnancy, and who is being transferred to a medical facility that has the specialized perinatal and neonatal resources and capabilities necessary to provide an appropriate level of care.
- 14. "Medical team" means personnel whose main function on a mission is the medical care of the patient being transported.
- 15. "Mission" means a transport job event that involves an air ambulance service's sending an air ambulance to a patient's location to provide transport of the patient from one location to another, whether or not transport of the patient is actually provided.
- 16. "Neonatal" means pertaining to an infant who is 28 days of age or younger and who is in need of critical care services.
- 17. "On-line medical guidance" means emergency medical services direction or information provided to a non-EMCT medical team member by a physician through two-way voice communication.
- 18. "Operate an air ambulance in this state" means: [ASK STAKEHOLDERS Is this definition still valid?]
 - a. Transporting a patient via air ambulance from a location in this state to another location in this state,
 - b. Operating an air ambulance from a base location in this state, or
 - c. Transporting a patient via air ambulance from a location in this state to a location outside of this state more than once per month.
- 19. "Owner" means a person that holds a controlling legal or equitable interest and authority in a business enterprise.
- 20. "Patient reference number" means a unique identifier used by an air ambulance service to identify an individual patient. [only used in 710(A)(8); describe there]
- 21. "Personnel" means individuals who work for an air ambulance service, with or without compensation, whether as employees, contractors, or volunteers.
- 22. "Premises" means each physical location of air ambulance service operations and

- includes all equipment and records at each location.
- 23. "Proficiency in neonatal resuscitation" means current and valid certification in neonatal resuscitation obtained through completing a nationally recognized training program such as the American Academy of Pediatrics and American Heart Association NRP: Neonatal Resuscitation Program.
- 24. "Publicizes" means makes a good faith effort to communicate information to the general public through print media, broadcast media, the Internet, or other means. [only used in 710(A)(2); describe there rather than use term]
- 25. "Regularly" means at recurring, fixed, or uniform intervals.
- 26. "Rescue situation" means an incident in which:
 - a. An individual's life, limb, or health is imminently threatened; and
 - b. The threat may be reduced or eliminated by removing the individual from the situation and providing medical services. [only used in 710; describe there]
- 27. "Subspecialization" means:
 - a. For a physician board certified by a specialty board approved by the American
 Board of Medical Specialties, subspecialty certification;
 - b. For a physician board certified by a specialty board approved by the American
 Osteopathic Association, attainment of either a certification of special
 qualifications or a certification of added qualifications; and
 - c. For a physician who has completed an accredited residency program, completion of at least one year of training pertaining to the specified area of medicine.
- 28. "Two-way voice communication" means that two individuals are able to convey information back and forth to each other orally, either directly or through a third-party relay.
- 29. "Valid" means that a license, certification, or other form of authorization is in full force and effect and not suspended.
- 30. "Working day" means the period between 8:00 a.m. and 5:00 p.m. on a Monday, Tuesday, Wednesday, Thursday, or Friday that is not a state holiday.

R9-25-703. Requirement and Eligibility for a License (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2215)

A. A person shall not operate an air ambulance in this state unless the person has a current and valid air ambulance service license and, except as provided in A.R.S. § 36-2212(C), a current and valid certificate of registration for the air ambulance as required under Article 8 of this Chapter.

- **B.** To be eligible to obtain an air ambulance service license, an applicant shall:
 - 1. Hold current and valid Registration registration and Exemption exemption issued by the Federal Aviation Administration under 14 CFR 298, as evidenced by a current and valid U.S. Department of Transportation OST Form 4507 showing the effective date of registration;
 - 2. Hold the following issued by the Federal Aviation Administration:
 - A current and valid Air Carrier Certificate authorizing common carriage under 14
 CFR 135;
 - If operating a rotor-wing air ambulance, current and valid Operations
 Specifications authorizing aeromedical helicopter operations;
 - If operating a fixed-wing air ambulance, current and valid Operations
 Specifications authorizing airplane air ambulance operations;
 - d. A current and valid Certificate of Registration for each air ambulance to be operated; and
 - e. A current and valid Airworthiness Certificate for each air ambulance to be operated;
 - 3. Have applied for a certificate of registration, issued by the Department under Article 8 of this Chapter, for each air ambulance to be operated by the air ambulance service;
 - 4. Hold a current and valid registration, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4, for each air ambulance to be operated by the air ambulance service;
 - 5. Have current and valid liability insurance coverage for the air ambulance service that complies with A.R.S. § 36-2215 and that has at least the following maximum liability limits:
 - a. \$1 million for injuries to or death of any one person arising out of any one incident or accident;
 - b. \$3 million for injuries to or death of more than one person in any one incident or accident; and
 - c. \$500,000 for damage to property arising from any one incident or accident;
 - 6. Have current and valid malpractice insurance coverage for the air ambulance service that complies with A.R.S. § 36-2215 and that has a maximum liability limit of at least \$1 million per occurrence; and
 - 7. Comply with all applicable requirements of this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1.

C. To maintain eligibility for an air ambulance service license, an air ambulance service a licensee shall meet the requirements of subsections (B)(1) (2) and (4) (7) (B)(1), (2), and (4) through (7) and hold a current and valid certificate of registration, issued by the Department under Article 8 of this Chapter, for each air ambulance operated in Arizona by the air ambulance service.

R9-25-704. Initial Application and Licensing Process (Authorized by A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215)

- A. An applicant for an initial license shall submit an application <u>packet</u> to the Department, in a Department provided format, including:
 - 1. The following information in a Department-provided format:
 - <u>a.</u> <u>The</u> applicant's name; mailing address; e-mail address; fax number, if any; and telephone number;
 - 2.b. Each business name to be used for All other business names used by the applicant related to the air ambulance service;
 - 3.c. The physical and mailing addresses to be used for the air ambulance service, if different from the applicant's mailing address;
 - 4.d. The name, title, address, e-mail address, and telephone number of the applicant's statutory agent or the individual designated by the applicant to accept service of process and subpoenas for the air ambulance service;
 - e. The name, title, address, e-mail address, and telephone number of the individual acting on behalf of the applicant according to R9-25-102;
 - 5.f. If the applicant is a business organization:
 - a.i. The type of business organization;
 - b.ii. The following information about name; address; e-mail address; telephone number; and fax number, if any, of the individual who is to serve as the primary contact for information regarding the application:
 - i. Name;
 - ii. Address;
 - iii. E-mail address;
 - iv. Telephone number; and
 - v. Fax number, if any;
 - e. The name, title, and address of each officer and board member or trustee; and
 - d-<u>iii.</u> A copy of the business organization's articles of incorporation, articles of

- organization, or partnership or joint venture documents, if applicable;
- 6-g. The name and Arizona license number for the physician who is to serve as the administrative medical director for the air ambulance service;
- 7.h. The intended hours of operation for the air ambulance service;
- 8.i. The intended schedule of rates for the air ambulance service;
- 9-j. Which of the following mission types is to be provided:
 - a.i. Emergency medical services transports,
 - b.ii. Interfacility transports,
 - e.iii. Interfacility maternal transports, and or
 - div. Interfacility neonatal transports;
- <u>k.</u> Which of the following mission levels is to be provided: [added mission levels]
 - i. Critical care,
 - ii. Advanced life support, or
 - iii. Basic life support;
- Whether the applicant plans to use fixed-wing or rotor-wing aircraft for the air ambulance service;
- <u>M. Attestation that the applicant will comply with all applicable requirements in this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1;</u>
 [moved from subsection (A)(17)]
- n. Attestation that the information provided in the application packet, including the information in the accompanying documents, is accurate and complete; and [moved from subsection (A)(18)]
- 10.0. The signature of the applicant and the date signed;
- Documentation for the individual specified according to subsection (A)(1)(e) that complies with A.R.S. § 41-1080;
- 11.3. A copy of a current and valid <u>U.S. Department of Transportation</u> OST Form 4507, showing the effective date of Federal Aviation Administration registration and exemption under 14 CFR 298;
- <u>12.4.</u> A copy of the following issued by the Federal Aviation Administration:
 - A current and valid Air Carrier Certificate authorizing common carriage under 14
 CFR 135;
 - b. If intending to operate a rotor-wing air ambulance, current and valid Operations
 Specifications authorizing aeromedical helicopter operations; and [ASK
 STAKEHOLDERS Does CAMTS review these?]

- c. If intending to operate a fixed-wing air ambulance, current and valid Operations

 Specifications authorizing airplane air ambulance operations; [ASK

 STAKEHOLDERS Does CAMTS review these?]
- d. A current and valid Certificate of Registration for each air ambulance to be operated; and [required in current 802(C)(5), so duplicated per (13)(5)(a) and not needed]
- e. A current and valid Airworthiness Certificate for each air ambulance to be operated; [required in current 802(C)(5), so duplicated per (13)(5)(a) and not needed]
- 13.5. For each air ambulance to be operated for the air ambulance service:
 - a. An application for registration that includes all of the information and items documents required under R9-25-802(C) R9-25-802(B); and
 - b. A copy of a current and valid registration, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4;
- 44.6. A certificate of insurance establishing that the applicant has current and valid liability insurance coverage for the air ambulance service as required under R9-25-703(B)(5);
- 45.7. A certificate of insurance establishing that the applicant has current and valid malpractice insurance coverage for the air ambulance service as required under R9-25-703(B)(6);
- 16.8. If the applicant holds current CAMTS accreditation for the air ambulance service, a copy of the current CAMTS accreditation report; and
- 17. Attestation that the applicant will comply with all applicable requirements in this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1; and
- 18. Attestation that the information provided in the application, including the information in the documents accompanying the application form, is accurate and complete.
- 9. If a document required under subsection (A)(3) or (4) is not issued in the name of the applicant, documentation showing the applicant has legal custody of aircraft covered by the document.
- No more than 30 days before the expiration date of the current license, a licensee shall submit to the Department a renewal application packet including:
 - 1. The information required in subsection (A)(1), in a Department-provided format;
 - 2. The documents required in subsections (A)(3), (4), (6), (7), and, if applicable, (8); and
 - 3. For each air ambulance operated or to be operated by the air ambulance service:
 - a. Either:
 - i. A copy of a current and valid certificate of registration issued by the

- Department under Article 8 of this Chapter, or
- ii. An application for registration that includes all of the information and documents required under R9-25-802(B); and
- <u>A copy of a current and valid registration, issued by the Arizona Department of</u>
 Transportation under A.R.S. Title 28, Chapter 25, Article 4.
- **B.C.** Unless an applicant establishes that it holds or licensee documents current CAMTS accreditation, as provided in subsection (A)(16) (A)(8), or is applying for an initial license because of a change of ownership as described in R9-25-706(D), the Department shall conduct an inspection, as required under A.R.S. § 36-2214(B) and R9-25-708, during the substantive review period for the application for an initial <u>a</u> license.
- **C.D.** The Department shall review and approve or deny each application packet as described in Article 12 of this Chapter, and:
 - 1. Approve the application;
 - 2. Approve the application with a corrective action plan, as specified in R9-25-708(G)(2); or
 - 3. Deny the application.
- **D.E.** The Department may deny an application if an applicant or licensee:
 - 1. Fails to meet the eligibility requirements of R9-25-703(B);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).
- R9-25-705. Renewal Application and Licensing Process (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), 36-2213, 36-2214, and 36-2215) Repealed [moved into 704(B)]
- A. Before the expiration date of its current license, an air ambulance service shall submit to the Department a renewal application completed using a Department-provided form and including:
 - 1. The information and items listed in R9-25-704(A)(1) (11), (12)(b), and (13)-(18); and
 - 2. For each air ambulance operated or to be operated by the air ambulance service:
 - a. A copy of a current and valid certificate of registration issued by the Department

- under Article 8 of this Chapter; or
- b. An application for registration that includes all of the information and items required under R9 25 802(C).
- Unless an air ambulance service establishes that it holds current CAMTS accreditation as provided in subsection (C), the Department shall conduct an inspection, as required under A.R.S. § 36-2214(B) and R9-25-708, during the substantive review period for the renewal application.
- C. To establish current CAMTS accreditation, an air ambulance service shall submit to the Department, as part of the application submitted under subsection (A), a copy of the air ambulance service's current CAMTS accreditation report.
- **D.** The Department shall review and approve or deny each application as described in Article 12 of this Chapter.
- E. The Department may deny an application if an applicant:
 - 1. Fails to meet the eligibility requirements of R9-25-703(C);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).
- R9-25-706. Term and Transferability of License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, and 41-1092.11)
- **A.** The Department shall issue an initial license:
 - When based on current CAMTS accreditation, with a term beginning on the date of
 issuance of the initial license and ending on the expiration date of the CAMTS
 accreditation upon which licensure is based; and
 - 2. When based on Department inspection, with a term beginning on the date of issuance of the initial license and ending three years later.
- **B.** The Department shall issue a renewal license with a term beginning on the day after the expiration date shown on the previous license and ending:
 - 1. When based on current CAMTS accreditation, on the expiration date of the CAMTS accreditation upon which licensure is based; and

- 2. When based on Department inspection, three years after the effective date of the renewal license.
- C. If an applicant a licensee submits an application packet for renewal as described in R9 25 705

 R9-25-704(B) before the expiration date of the current license, the current license does not expire until the Department has made a final determination on the application for renewal, as provided in A.R.S. § 41-1092.11.
- D. A person wanting to transfer an air ambulance service license shall submit to the Department At least 30 days before the an anticipated change of ownership:
 - 1. A <u>licensee wanting to transfer an air ambulance service license shall submit a</u> letter <u>to the</u>

 Department that contains:
 - a. A request that the air ambulance service license be transferred,
 - b. The name and license number of the currently licensed air ambulance service, and
 - c. The name of the person to whom the air ambulance service license is to be transferred; and
 - 2. An The person to whom the license is to be transferred shall submit to the Department an application <u>packet</u> that complies with R9-25-704(A) completed by the person to whom the license is to be transferred.
- **E.** A new owner shall not operate an air ambulance in this state until:
 - 1. The new owner complies with requirements in Article 8 of this Chapter, and
 - the <u>The</u> Department has transferred issued an air ambulance service license to the new owner.

R9-25-707. Changes Affecting a License (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)

- A. At least 30 days before the date of a change in an air ambulance service's name, the air ambulance service licensee shall send the Department written notice of the name change.
- B. At least 90 days before an air ambulance service ceases to operate, the air ambulance service licensee shall send the Department written notice of the intention to cease operating, effective on a specific date, and the desire licensee's intention to relinquish its the air ambulance service's license as of that date.
- **C.** Within 30 days after the date of receipt of a notice described in subsection (A) or (B), the Department shall:
 - 1. For a notice described in subsection (A), issue an amended license that incorporates the name change but retains the expiration date of the current license; and

- 2. For a notice described in subsection (B), send the <u>air ambulance service licensee</u> written confirmation of the voluntary relinquishment of <u>its the air ambulance service's</u> license, with an effective date consistent with the written notice.
- **D.** An air ambulance service A licensee shall notify the Department in writing within one working day after: [ASK STAKEHOLDERS]
 - 1. A change in its the air ambulance service's eligibility for licensure under R9-25-703(B) or (C);
 - 2. A change in the business organization information most recently submitted to the Department under R9-25-704(A)(5) or R9-25-705(A) according to R9-25-704(A)(1)(f);
 - 3. A change in its the air ambulance service's CAMTS accreditation status, including a copy of its the air ambulance service's new CAMTS accreditation report, if applicable;
 - 4. A change in its the air ambulance service's hours of operation, as specified according to R9-25-704(A)(1)(h); [Longer? Or OK as is?]
 - 5. A change in the air ambulance service's of schedule of rates, as specified according to R9-25-704(A)(1)(i); or [Longer? Or OK as is?]
 - 5.6. A change in the scope of the mission types provided, as specified according to R9-25-704(A)(1)(j).
- E. Before the date of an anticipated change of ownership, a person wanting to transfer an air ambulance service license shall submit to the Department the documents required under R9-25-706(D). [duplicates 706(D) so not needed]
- **E.** If the Department receives a notice specified in subsection (D)(6), the Department:
 - 1. Shall reissue a license for the air ambulance service reflecting the change, but retaining the expiration date on the original license; and
 - 2. May conduct an inspection according to R9-25-708.

R9-25-708. Inspections and Investigations (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, and 36-2214)

- A. Except as provided in subsections (D) and (F) (E), the Department shall inspect an air ambulance service, as required under A.R.S. § 36-2214(B), before issuing an initial or renewal license, as required under A.R.S. § 36-2214(B), and as often as necessary to determine compliance with this Article, Articles 2 and 8 of this Chapter, and A.R.S. Title 36, Chapter 21.1.
- **B.** A Department inspection may include the <u>air ambulance service's</u> premises, <u>records</u>, <u>and</u> equipment, and each air ambulance operated or to be operated for by the air ambulance service.
- C. If the Department receives written or verbal information alleging a violation of this Article,

- Article 2 or 8 of this Chapter, or A.R.S. Title 36, Chapter 21.1, the Department shall conduct an investigation.
- 1. The Department may conduct an inspection as part of an investigation.
- 2. <u>An air ambulance service A licensee</u> shall allow the Department to inspect the <u>air ambulance service's</u> premises, <u>records</u>, <u>and equipment</u>, and each air ambulance and to interview personnel as part of an investigation.
- As required under A.R.S. § 36-2213(8), the Department shall accept proof of current CAMTS accreditation in lieu of the licensing inspections otherwise required before initial and renewal licensure under subsection (A) and A.R.S. § 36-2214(B).
- E. To establish current CAMTS accreditation, an applicant or air ambulance service shall submit to the Department a copy of its current CAMTS accreditation report as required under R9-25-704(C), R9-25-705(C), or R9-25-707(D).
- Except as provided in subsection (C), the Department shall not conduct an inspection of an air ambulance service before issuing an initial or renewal license if an applicant or licensee provides documentation of current CAMTS certification as part of the application packet according to R9-25-704(A)(8).
- **F.E.** When an application for an air ambulance service license is submitted along with a transfer request due to a change of ownership, the Department shall determine whether an inspection is necessary based upon the potential impact to public health, safety, and welfare.
- G.F. The Department shall conduct each inspection in compliance with A.R.S. § 41-1009.
- G. If the Department determines that an air ambulance service is not in compliance with the requirements in this Article, Article 2 or 8 of this Chapter, or A.R.S. Title 36, Chapter 21.1, the Department may:
 - 1. Take an enforcement action as described in R9-25-709; or
 - 2. Require that the air ambulance service submit to the Department, within 15 days after written notice from the Department, a corrective action plan to address issues of compliance that do not directly affect the health or safety of a patient that:
 - a. Describes how each identified instance of non-compliance will be corrected and reoccurrence prevented, and
 - Includes a date for correcting each instance of non-compliance that is appropriate
 to the actions necessary to correct the instance of non-compliance.
- R9-25-709. Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2213, 36-2214, 36-2215, 41-1092.03, and 41-1092.11(B))

- **A.** The Department may take an action listed in subsection (B) against an air ambulance service that:
 - 1. Fails to meet the eligibility requirements of R9-25-703(B) or (C);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 8 of this Chapter;
 - 4. Does not submit a corrective action plan, as provided in R9-25-708(G)(2), that is acceptable to the Department;
 - 5. Does not complete a corrective action plan submitted according to R9-25-708(G)(2); or
 - 4.6. Knowingly or negligently provides false documentation or false or misleading information to the Department.
- **B.** The Department may take the following actions against an air ambulance service:
 - 1. Except as provided in subsection (B)(3), after notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6, Article 10, suspend:
 - a. the The air ambulance service license, or
 - b. The certificate of registration of an air ambulance operated by the air ambulance service; [moved from 806]
 - 2. After notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6, Article 10, revoke:
 - a. the The air ambulance service license, or
 - b. The certificate of registration of an air ambulance operated by the air ambulance service; and [moved from 806]
 - 3. <u>As permitted under A.R.S. § 41-1092.11(B)</u>, <u>If if</u> the Department determines that the public health, safety, or welfare imperatively requires emergency action and incorporates a finding to that effect in <u>its</u> the Department's order, <u>summarily</u> immediately suspend:
 - <u>a.</u> the <u>The</u> air ambulance service license pending proceedings for revocation or other action, as permitted under A.R.S. § 41-1092.11(B), or
 - b. The certificate of registration of an air ambulance operated by the air ambulance service pending proceedings for revocation or other action. [moved from 806]
- **C.** In determining whether to take action under subsection (B), the Department shall consider:
 - 1. The severity of each violation relative to public health and safety;
 - 2. The number of violations relative to the transport volume of the air ambulance service;
 - 3. The nature and circumstances of each violation;
 - 4. Whether each violation was corrected and, if so, the manner of correction; and
 - 5. The duration of each violation.

R9-25-710. Minimum Standards for Operations (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- **A.** An air ambulance service A licensee shall ensure that the air ambulance service:
 - 1. The air ambulance service maintains Maintains eligibility for licensure as required under R9-25-703(C);
 - 2. The air ambulance service publicizes Makes a good faith effort to communicate information about its hours of operation to the general public through print media, broadcast media, the Internet, or other means;
 - 3. The air ambulance service makes its Makes the air ambulance service's schedule of rates available to any individual upon request and, if requested, in writing;
 - 4. The air ambulance service provides Provides an accurate estimated time of arrival to the person requesting transport at the time that transport is requested and provides an amended estimated time of arrival to the person requesting transport if the estimated time of arrival changes;
 - 5. The air ambulance service transports Except as provided in subsection (B), only transports patients for whom it the air ambulance service has the resources to provide appropriate medical care, unless subsection (B) or (D) applies;
 - 6. The air ambulance service does <u>Does</u> not perform interfacility transport of a patient unless:
 - a. The transport is requested by the sending health care institution:, and
 - i. A physician; or
 - ii. A qualified medical person, as determined by the sending health care institution's bylaws or policies, after consultation with and approval by a physician; and
 - b. The destination health care institution confirms that a bed is available for the patient;
 - 7. The air ambulance service creates Creates a prehospital incident history report, as defined in A.R.S. § 36-2220, for each patient;
 - 8. The air ambulance service creates Creates a record for each mission that includes:

[Required by ARS § 36-2213]

- a. Mission date;
- b. Mission level—basic life support, advanced life support, or critical care;
- c. Mission type—emergency medical services transport, interfacility transport,

- interfacility maternal transport, interfacility neonatal transport, or convalescent transport;
- d. Staffing of the mission;
- d.e. Aircraft type—fixed-wing aircraft or rotor-wing aircraft;
- e.f. Name of the person requesting the transport;
- f.g. Time of receipt of the transport request;
- h. The estimated time of arrival, as provided according to subsection (A)(4);
- gi. Departure time to the patient's location;
- h.j. Address of the patient's location;
- i-k. Arrival time at the patient's location;
- <u>j-l.</u> Departure time to the destination health care institution;
- k.m. Name and address of the destination health care institution:
- Ln. Arrival time at the destination health care institution;
- m.o. Patient reference number or call number Either the:
 - i. Unique reference number used by the air ambulance service to identify the patient, or
 - ii. Unique call number used by the air ambulance service to identify the specific mission; and
- n.p. Aircraft tail number for the air ambulance used on the mission; and
- 9. The air ambulance service submits Submits to the Department by the 15th day of each month, either in an electronic format approved by the Department or in hard copy, a run log listing of the previous month's missions that includes the information required under subsections (A)(8)(a) (d), (f), (g), (i), (j), (l), and (m) subsection (A)(8) in a cumulative tabular format; and Required by ARS § 36-2213
- 10. Establishes, documents, and implements a quality management program through which:
 - <u>a.</u> <u>Data related to patient care, the transport services provided, and patient status upon arrival at the destination are:</u>
 - i. Collected continuously; and
 - ii. Examined regularly, on at least a quarterly basis;
 - b. Appropriate corrective action is taken when concerns are identified;
 - Documentation of identified concerns and the corrective action taken to resolve each concern is maintained; and
 - d. Information, along with the supporting data, is provided to the Department upon request. [Currently part of 711(C)(4) and 715; should be separated to require

QMP here and require review in 711/715.]

- B. In a rescue situation, when no other practical means of transport, including another air ambulance service, is available, an air ambulance service may deviate from subsection (A)(5) to the extent necessary to meet the rescue situation. [now in new (B)(1)]
- An air ambulance service may transport a patient for whom the air ambulance service does not have the resources to provide appropriate medical care:
 - 1. In a rescue situation in which:
 - a. An individual's life, limb, or health is imminently threatened;
 - b. The threat may be reduced or eliminated by removing the individual from the situation to a location in which medical services may be provided; and
 - c. There is no other practical means of transport, including another air ambulance service, available; or
 - 2. For an interfacility transport of a patient if:
 - a. The sending health care institution provides medically appropriate life support measures, staff, and equipment to sustain the patient during the interfacility transport; and
 - <u>b.</u> Each staff member provided by the sending health care institution has completed training in the subject areas listed in R9-25-713(A) before participating in the interfacility transport.
- An If an air ambulance service that completes a mission under subsection (B) for which the air ambulance service does not have the resources to provide appropriate medical care, the licensee shall ensure that the air ambulance service shall create creates a record within five working days after the mission, including:
 - $\underline{1}$. the $\underline{\text{The}}$ information required under subsection (A)(8),
 - $\underline{2}$. the The manner in which the air ambulance service deviated from subsection (A)(5), and
 - <u>3.</u> the <u>The</u> justification for operating under subsection (B).
- An air ambulance service may provide interfacility transport of a patient for whom it does not have the resources to provide appropriate medical care if the sending health care institution provides medically appropriate life support measures, staff, and equipment to sustain the patient during the interfacility transport. [now in new (B)(2)]
- E. An air ambulance service shall ensure that each staff member provided by a sending health care institution under subsection (D) has completed training in the subject areas listed in R9-25-713(A) before serving on a mission. [now in new (B)(2)]
- **D.** If an air ambulance service uses a single-member medical team as authorized under R9-25-

- 711(B) and (C), the licensee shall ensure that the air ambulance service creates a record within five working days after the mission, including: [Moved from 711(D)]
- 1. The information required under subsection (A)(8),
- 2. The name and qualifications of the individual comprising the single-member medical team, and
- 3. The justification for using a single-member medical team.
- <u>F.</u> If an air ambulance service completes an interfacility critical care mission under conditions permitted in R9-25-807(E), the licensee shall ensure that the air ambulance service creates a record within five working days after the mission, including: [Moved from 807(C)(E)(5)]
 - 1. The information required under subsection (A)(8),
 - 2. A description of the life-support equipment used on the mission,
 - A list of the equipment and supplies required in Table 8.1 that were removed from the air ambulance for the mission, and
 - 4. The justification for conducting the mission as permitted under R9-25-807(E).
- A licensee shall ensure that an individual does not serve on an interfacility maternal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in R9-25-711(A)(2). [From 718]
- A licensee shall ensure that an individual does not serve on an interfacility neonatal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in R9-25-711(A)(3). [From 717]
- **H.** A licensee shall ensure that the air ambulance service:
 - Retains each document required to be created or maintained under this Article or Article
 2 or 8 of this Chapter for at least three years after the last event recorded in the document,
 and
 - 2. Produces each document for Department review upon request. [Moved from 716]
- I. A licensee shall ensure that, while on a mission, two-way voice communication is available:

 [moved from 714]
 - 1. Between and among personnel on the air ambulance, including the pilot; and
 - 2. Between personnel on the air ambulance and the following persons on the ground:
 - a. Personnel;
 - b. Physicians providing on-line medical direction or on-line medical guidance to medical team members; and
 - c. For a rotor-wing air ambulance mission:
 - i. Emergency medical services providers, and

<u>ii.</u> Law enforcement agencies.

R9-25-711. Minimum Standards for Mission Staffing (Authorized by A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- **A.** An air ambulance service A licensee shall ensure that, except as provided in subsection (B):
 - 1. Each critical care mission is staffed by a medical team of at least two individuals with at least the following qualifications: [removes the need for hierarchy]
 - a. A physician or registered nurse; and
 - b. A <u>physician, registered nurse,</u> Paramedic, or licensed respiratory care practitioner;
 - 2. Each interfacility maternal mission is staffed by a medical team that: [From 718; as per ARS § 36-2213 consistent with "current standards..."]
 - a. Complies with the requirements for a critical care mission medical team in subsection (A)(1); and
 - b. Has the following additional qualifications:
 - i. Proficiency in advanced emergency cardiac life support that includes didactic instruction and a practical skills test, consistent with training recognized by the American Heart Association;
 - ii. Proficiency in neonatal resuscitation; and
 - iii. Proficiency in stabilization and transport of the maternal patient;
 - 3. Each interfacility neonatal mission is staffed by a medical team that: [From 717; as per ARS § 36-2213 consistent with "current standards..."]
 - a. Complies with the requirements for a critical care mission medical team in subsection (A)(1); and
 - b. Has the following additional qualifications:
 - i. Proficiency in pediatric advanced emergency life support that includes
 didactic instruction and a practical skills test, consistent with training
 recognized by the American Heart Association; and
 - <u>ii.</u> <u>Proficiency in neonatal resuscitation and stabilization of the neonatal</u> patient;
 - 2.4. Each advanced life support mission is staffed by a medical team of at least two individuals with at least the following qualifications:
 - a. A physician, registered nurse, or Paramedic, and
 - b. Another Paramedic or a licensed respiratory care practitioner; and

- 3.5. Each basic life support mission is staffed by a medical team of at least two individuals, each of whom has at least the qualifications of an EMT. [ASK STAKEHOLDERS Does an air ambulance service staff with only EMTs?]
- **B.** If the pilot on a mission using a rotor-wing air ambulance determines, in accordance with the air ambulance service's written guidelines required under subsection (C) (C)(1), that the weight of a second medical team member could potentially compromise the performance of the rotor-wing air ambulance and the safety of the mission, and the use of a single-member medical team is consistent with the on-line medical direction or on-line medical guidance received as required under subsection (C) (C)(2), an air ambulance service may use a single-member medical team consisting of an individual with at least the following qualification:
 - 1. For a critical care mission, a physician or registered nurse;
 - 2. For an advanced life support mission, a physician, registered nurse, or Paramedic; and
 - 3. For a basic life support mission, an EMT. [ASK STAKEHOLDERS Does an air ambulance service staff with only an EMT?]
- C. An air ambulance service A licensee shall ensure that:
 - 1. Each air ambulance service rotor-wing pilot is provided with written guidelines to use in determining when the weight of a second medical team member could potentially compromise the performance of a rotor-wing air ambulance and the safety of a mission, including the conditions of density altitude and weight that warrant the use of a single-member medical team;
 - 2. The following are done, without delay, after an air ambulance service rotor-wing pilot determines that the weight of a second medical team member could potentially compromise the performance of a rotor-wing air ambulance and the safety of a mission:
 - a. The pilot communicates that information to the medical team,
 - b. The medical team obtains on-line medical direction or on-line medical guidance regarding the use of a single-member medical team, and
 - The medical team proceeds in compliance with the on-line medical direction or on-line medical guidance;
 - 3. A single-member medical team has the knowledge and medical equipment to perform one-person cardiopulmonary resuscitation;
 - 4. The air ambulance service has a quality management process to review regularly the patient care provided by each single-member medical team, including consideration of each patient's status upon arrival at the destination health care institution, is reviewed through the quality management program in R9-25-710(A)(10); and

- 5. A single-member medical team is used only when no other transport team is available that would be more appropriate for delivering the level of care that a patient requires.
- An air ambulance service that uses a single member medical team as authorized under subsection (B) shall create a record within five working days after the mission, including the information required under R9-25-710(A)(8), the name and qualifications of the individual comprising the single-member medical team, and the justification for using a single-member medical team.

 [moved to 710]
- An A licensee shall ensure that the air ambulance service shall create creates and maintain maintains for each personnel member a file containing documentation of the personnel member's qualifications, including, as applicable, licenses, certifications, and training records.

R9-25-713. Minimum Standards for Training (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2213)

- **A.** An air ambulance service A licensee shall ensure that each medical team member completes training in the following subjects before serving on a mission:
 - 1. Aviation terminology;
 - 2. Physiological aspects of flight;
 - 3. Patient loading and unloading;
 - 4. Safety in and around the aircraft;
 - 5. In-flight communications;
 - 6. Use, removal, replacement, and storage of the medical equipment installed on the aircraft;
 - 7. In-flight emergency procedures;
 - 8. Emergency landing procedures; and
 - 9. Emergency evacuation procedures.
- B. An air ambulance service A licensee shall ensure that the air ambulance service document documents each medical team member's completion of the training required under subsection (A), including the name of the medical team member, each training component completed, and the date of completion.

R9-25-714. Minimum Standards for Communications (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213) Repealed-[moved to 710]

An air ambulance service shall ensure that, while on a mission, two-way voice communication is available:

- 1. Between and among personnel on the air ambulance, including the pilot; and
- 2. Between personnel on the air ambulance and the following persons on the ground:
 - a. Personnel;
 - b. Physicians providing on-line medical direction or on-line medical guidance to medical team members; and
 - c. For a rotor-wing air ambulance mission:
 - i. Emergency medical services providers, and
 - ii. Law enforcement agencies.

R9-25-715. Minimum Standards for Medical Control (Authorized by A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213)

- **A.** An air ambulance service A licensee shall ensure that:
 - 1. The air ambulance service has $\frac{1}{4}$ an administrative medical director who:
 - a. Meets the qualifications in subsection (B);
 - b. Supervises and evaluates the quality of medical care provided by medical team members;
 - c. Ensures the competency and current qualifications of all medical team members;
 - d. Ensures that each EMCT medical team member receives medical direction as required under Article 2 of this Chapter; [now in subsection (A)(1)(d)(i)]
 - e. Ensures that each non-EMCT medical team member receives medical guidance through:
 - i. Written treatment protocols; and [now in subsection (A)(1)(d)(ii)]
 - ii. On line medical guidance provided by: [now in new subsection (C)]
 - (1) The medical director;
 - (2) Another physician designated by the medical director; or
 - (3) If the medical guidance needed exceeds the medical director's area of expertise, a consulting specialty physician; and
 - d. Except as provided in subsections (A)(2) and (3), ensures that:
 - <u>i.</u> Each EMCT medical team member receives medical direction as required under Article 2 of this Chapter; and
 - <u>ii.</u> Each non-EMCT medical team member receives medical guidance through written treatment protocols and according to subsection (C); and
 - <u>f.e.</u> Approves, ensures implementation of, and annually reviews treatment protocols to be followed by medical team members;

- The air ambulance service has a quality management program through which: [Moved to 710(A)(10)]
 - Data related to patient care and transport services provided and patient status
 upon arrival at destination are:
 - i. Collected continuously; and
 - ii. Examined regularly, on at least a quarterly basis; and
 - b. Appropriate corrective action is taken when concerns are identified; and
- 3. The air ambulance service documents each concern identified through the quality management program and the corrective action taken to resolve each concern and provides this information, along with the supporting data, to the Department upon request.
- 2. The medical director reviews data related to patient care and transport services provided and patient status upon arrival at destination that are collected through the quality management program in R9-25-710(A)(10); [Clarifies the intent of current subsections (A)(2) and (3)]
- 3. For an interfacility maternal mission, on-line medical direction or on-line medical guidance provided to medical team member is provided by a physician who meets the qualifications of subsection (B)(2)(b)(i): [moved from 718]
- 4. For an interfacility neonatal mission, on-line medical direction or on-line medical guidance provided to medical team member is provided by a physician who meets the qualifications of subsection (B)(2)(b)(ii); [moved from 717]
- **B.** An administrative medical director shall:
 - 1. Be a physician, as defined in A.R.S. § 36-2201; and defined through 101]
 - 2. Comply with one of the following:
 - a. If the air ambulance service provides emergency medical services transports, meet the qualifications of R9-25-201(A)(1); or
 - b. If the air ambulance service does not provide emergency medical services transports, meet the qualifications of R9-25-201(A)(1) or one of the following:
 - i. If the air ambulance service provides only interfacility maternal missions, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Obstetrics and gynecology, with subspecialization in critical care medicine or maternal and fetal medicine; or
 - (2) Pediatrics, with subspecialization in neonatal-perinatal medicine;

- ii. If the air ambulance service provides only interfacility neonatal missions, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Obstetrics and gynecology, with subspecialization in maternal and fetal medicine; or
 - (2) Pediatrics, with subspecialization in neonatal-perinatal medicine, neonatology, pediatric critical care medicine, or pediatric intensive care; or
- iii. If neither subsection (B)(2)(b)(i) or (ii) applies, have board certification or have completed an accredited residency program in one of the following specialty areas:
 - (1) Anesthesiology, with subspecialization in critical care medicine;
 - (2) Internal medicine, with subspecialization in critical care medicine;
 - (3) If the air ambulance service transports only pediatric patients, pediatrics, with subspecialization in pediatric critical care medicine or pediatric emergency medicine; or
 - (4) If the air ambulance service transports only surgical patients, surgery, with subspecialization in surgical critical care.
- <u>C.</u> An administrative medical director shall ensure that each non-EMCT medical team member receives on-line medical guidance provided by: [Moved from subsection (A)(1)]
 - <u>1.</u> The administrative medical director;
 - 2. Another physician designated by the administrative medical director; or
 - 3. If the medical guidance needed exceeds the administrative medical director's area of expertise, a consulting specialty physician.

R9-25-716. <u>Minimum Standards for Recordkeeping (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2),</u> and 36-2213) Repealed [moved to 710]

An air ambulance service shall retain each document required to be created or maintained under this Article or Article 2 or 8 of this Chapter for at least three years after the last event recorded in the document and shall produce each document for Department review upon request.

R9-25-717. Minimum Standards for an Interfacility Neonatal Mission (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213) Repealed

An air ambulance service shall ensure that:

[moved to 711]

- 1. Each interfacility neonatal mission is staffed by a medical team that complies with the requirements for a critical care mission medical team in R9-25-711(A)(1) and that has the following additional qualifications:
 - a. Proficiency in pediatric emergency care, as defined in R9-25-101; and
 - b. Proficiency in neonatal resuscitation and stabilization of the neonatal patient;

[moved to 807]

- 2. Each interfacility neonatal mission is conducted using an air ambulance that has the equipment and supplies required for a critical care mission in Table 1 of Article 8 of this Chapter and the following:
 - a. A transport incubator with:
 - i. Battery and inverter capabilities,
 - ii. An infant safety restraint system, and
 - iii. An integrated neonatal-capable pressure ventilator with oxygen-air supply and blender;
 - b. An invasive automatic blood pressure monitor;
 - c. A neonatal monitor or monitors with heart rate, respiratory rate, temperature, non-invasive blood pressure, and pulse oximetry capabilities;
 - d. Neonatal-specific drug concentrations and doses;
 - e. Umbilical catheter insertion equipment and supplies;
 - f. Thoracostomy supplies;
 - g. Neonatal resuscitation equipment and supplies;
 - h. A neonatal size cuff (size 2, 3, or 4) for use with an automatic blood pressure monitor; and
 - i. A neonatal probe for use with a pulse oximeter;

[moved to 715]

3. On line medical direction or on line medical guidance provided to an interfacility neonatal mission medical team member is provided by a physician who meets the qualifications of R9-25-715(B)(2)(b)(ii); and

[moved to 710]

4. An individual does not serve on an interfacility neonatal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in subsections (1)(a) and (b).

R9-25-718. Minimum Standards for an Interfacility Maternal Mission (A.R.S. §§ 36-2202(A)(3) and (4), 36-2209(A)(2), and 36-2213) Repealed

- A. This Section applies to an air ambulance service that holds itself out as providing interfacility maternal missions.
- **B.** An air ambulance service shall ensure that:

[moved to 711]

- 1. Each interfacility maternal mission is staffed by a medical team that complies with the requirements for a critical care mission medical team in R9-25-711(A)(1) and that has the following additional qualifications:
 - a. Proficiency in advanced emergency cardiac life support, as defined in R9-25-101:
 - b. Proficiency in neonatal resuscitation; and
 - c. Proficiency in stabilization and transport of the maternal patient;

[moved to 807]

- 2. Each interfacility maternal mission is conducted using an air ambulance that has the equipment and supplies required for a critical care mission in Table 1 of Article 8 of this Chapter and the following:
 - a. A Doppler fetal heart monitor;
 - b. Unless use is not indicated for the patient as determined through on line medical direction or on line medical guidance provided as described in subsection (B)(3), an external fetal heart and tocographic monitor with printer capability;
 - e. Tocolytic and anti-hypertensive medications;
 - d. Advanced emergency cardiac life support equipment and supplies; and
 - e. Neonatal resuscitation equipment and supplies;

[moved to 715]

3. On line medical direction or on line medical guidance provided to an interfacility maternal mission medical team member is provided by a physician who meets the qualifications of R9 25 715(B)(2)(b)(i); and

[moved to 710]

4. An individual does not serve on an interfacility maternal mission medical team unless the air ambulance service's medical director has verified and attested in writing to the individual's having the proficiencies described in subsections (B)(1)(a), (b), and (c).

ARTICLE 8. AIR AMBULANCE REGISTRATION

- R9-25-801. Definitions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), and 36-2212) Repealed In addition to the definitions in R9-25-701, the following definitions apply in this Article, unless otherwise specified:
 - 1. "Certificate holder" means a person who holds a current and valid certificate of registration for an air ambulance. [Moved to701]
 - 2. "Drug" has the same meaning as in A.R.S. § 32-1901. [Now in 101]
- R9-25-802. Requirement, Eligibility, and Application for an Initial or Renewal Certificate of Registration for an Air Ambulance (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, 36-2213, 36-2214, and 36-2240(4))
- A. A person shall not operate an air ambulance in this state unless the person has a current and valid air ambulance service license as required under Article 7 of this Chapter and, except as provided in A.R.S. § 36-2212(C), a current and valid certificate of registration for the air ambulance as required under this Article. [Duplicates 703(A)]
- **B.A.** To be eligible to obtain a certificate of registration for an air ambulance, an applicant shall:
 - Hold a current and valid air ambulance service license issued under Article 7 of this Chapter;
 - 2. Hold the following issued by the Federal Aviation Administration for the air ambulance:
 - a. A current and valid Certificate of Registration, and
 - b. A current and valid Airworthiness Certificate;
 - 3. Hold a current and valid registration for the air ambulance, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4; and
 - 4. Comply with all applicable requirements of this Article, Articles 2 and 7 of this Chapter, and A.R.S. Title 36, Chapter 21.1.
- C.B. To obtain an initial or renewal certificate of registration for an air ambulance, an An applicant for an initial or renewal certificate of registration for an air ambulance shall submit an application packet to the Department, an application completed using a Department provided form and including:
 - 1. The following information in a Department-provided format:
 - <u>a.</u> <u>The</u> applicant's name; mailing address; <u>e-mail address</u>; fax number, <u>if any</u>; and telephone number;
 - 2.b. All other business names used by the applicant related to the use of an air

ambulance;

- 3.c. The applicant's physical business address, if different from the mailing address;
- d. If applicable, the number of the applicant's air ambulance service license;
 [needed for renewal]
- e. The name, title, address, e-mail address, and telephone number of the individual acting on behalf of the applicant according to R9-25-102;
- f. The name, address, telephone number, and e-mail address of the owner of the air ambulance, if different from the applicant;
- 4. The following information about the air ambulance for which registration is sought:
 - Each mission level for which the air ambulance will be used: [Taken out because aircraft can be restocked/equipped; included in air ambulance service license application]
 - i. Basic life support,
 - ii. Advanced life support, or
 - iii. Critical care;
 - b.g. Whether the air ambulance is a fixed-wing or rotor-wing aircraft;
 - e.h. Number The number of engines on the air ambulance;
 - d.i. Manufacturer The manufacturer's name;
 - e.j. Model The model name of the air ambulance;
 - f.k. Year The year the air ambulance was manufactured;
 - g.l. Serial The serial number of the air ambulance;
 - h.m. Aircraft The tail number of the air ambulance;
 - in. Aircraft The aircraft colors, including fuselage, stripe, and lettering; and
 - <u>j.o.</u> A description of any insignia, monogram, or other distinguishing characteristics of the aircraft's appearance;
- 5. A copy of the following issued to the applicant, for the air ambulance, by the Federal

 Aviation Administration: [moved to new subsection (B)(2)]
 - a. A current and valid Certificate of Registration, and
 - b. A current and valid Airworthiness Certificate;
- 6. A copy of a current and valid registration issued to the applicant, for the air ambulance, by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4; [now in new subsection (B)(3)]
 - <u>p.</u> The address at which the air ambulance is usually based; [Needed for emergency preparedness]

- 7.q. The <u>location address</u> in Arizona at which the air ambulance will be available for inspection; [gives notice that inspection will be in Arizona]
- 8.r. The name and telephone number of the individual to contact to arrange for inspection, if the inspection is preannounced;
- 9. Attestation that the applicant knows all applicable requirements in A.R.S. Title 36, Chapter 21.1; this Article; and Articles 2 and 7 of this Chapter; [In 704. Not needed here as well]
- 10.s. Attestation that the information provided in the application <u>packet</u>, including the information in the <u>accompanying</u> documents accompanying the application form, is accurate and complete; <u>and</u>
- 11.t. The dated signature of the applicant:
- a. If the applicant is an individual, the individual;
- b. If the applicant is a corporation, an officer of the corporation;
- e. If the applicant is a partnership, one of the partners;
- d. If the applicant is a limited liability company, a manager or, if the limited liability company does not have a manager, a member of the limited liability company;
- e. If the applicant is an association or cooperative, a member of the governing board of the association or cooperative;
- f. If the applicant is a joint venture, one of the individuals signing the joint venture agreement;
- g. If the applicant is a governmental agency, the individual in the senior leadership position with the agency or an individual designated in writing by that individual; and
- h. If the applicant is a business organization type other than those described in subsections (C)(11)(b) through (f), an individual who is a member of the business organization;
- A copy of the following for the air ambulance, issued by the Federal Aviation Administration:
 - a. A current and valid Certificate of Registration, and
 - b. <u>A current and valid Airworthiness Certificate;</u>
- 3. A copy of a current and valid registration for the air ambulance, issued by the Arizona Department of Transportation under A.R.S. Title 28, Chapter 25, Article 4;
- 4. If a document required under subsection (B)(2) or (3) is not issued in the name of the

- applicant, documentation showing the applicant has legal custody of equipment covered by the document; and
- 12.5. Unless the applicant operates or intends to operate the air ambulance only as a volunteer not-for-profit service, a certified check, business check, or money order made payable to the Arizona Department of Health Services or an electronic payment to the Arizona Department of Administration for the following fees:
 - a. A \$50 registration fee, as required under A.R.S. § 36-2212(D); and
 - b. A \$200 annual regulatory fee, as required under A.R.S. § 36-2240(4).
- **D.C.** The Department requires submission of a separate application and <u>the fees in subsection (B)(5)</u> for each air ambulance.
- **E.D.** Except as provided under R9-25-805(C), the Department shall inspect each air ambulance to determine compliance with the provisions of A.R.S. Title 36, Chapter 21.1 and this Article:
 - <u>1.</u> <u>before Before issuing an initial certificate of registration; and</u>
 - 2. at At least every 12 months thereafter, before issuing a renewal certificate of registration.
- **F.E.** The Department shall review and approve or deny each application as described in Article 12 of this Chapter.
- <u>F.</u> <u>If the Department approves the application and sends the applicant the written notice of approval, specified in R9-25-1201(C)(5), the Department shall issue the certificate of registration to the applicant:</u>
 - For an applicant with a current and valid air ambulance service license issued under
 Article 7 of this Chapter, within five working days after the date on the written notice of approval; and
 - 2. For an applicant that does not have a current and valid air ambulance service license issued under Article 7 of this Chapter, when the air ambulance service license is issued.
- **G.** The Department may deny a certificate of registration for an air ambulance if the applicant:
 - 1. Fails to meet the eligibility requirements of R9-25-802(B) R9-25-802(A);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 7 of this Chapter;
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department; or
 - 5. Fails to submit to the Department documents or information requested under R9-25-1201(B)(1) or (C)(3), as required under R9-25-1201(D), and requests a denial as permitted under R9-25-1201(E).

R9-25-803. Term and Transferability of Certificate of Registration (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, and 41-1092.11)

- **A.** The Department shall issue an initial certificate of registration:
 - 1. With a term of one year from date of issuance of the initial certificate of registration; or
 - 2. If requested by the applicant, with a term shorter than one year that allows for the Department to conduct annual inspections of all of the applicant's air ambulances at one time.
- **B.** The Department shall issue a renewal certificate of registration with a term of one year <u>from the</u> expiration date on the previous certificate of registration.
- C. If an applicant a certificate holder submits an application for renewal as described in R9-25-802 before the expiration date of the current certificate of registration, the current certificate of registration does not expire until the Department has made a final determination on the application for renewal, as provided in A.R.S. § 41-1092.11.
- **D.** A certificate of registration is not transferable from one person to another.
- E. If there is a change in the ownership of an air ambulance or the person having legal possession of the air ambulance, the new owner or person having legal possession shall apply for and obtain a new certificate of registration before operating the air ambulance in this state.

R9-25-804. Changes Affecting Registration (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), and 36-2212)

- **A.** At least 30 days before the date of a change in a certificate holder's name, the certificate holder shall send the Department written notice of the name change.
- **B.** No later than 10 days after a certificate holder ceases to operate an air ambulance, the certificate holder shall send the Department written notice of the date that the certificate holder ceased to operate the air ambulance and of the desire certificate holder's intention to relinquish the certificate of registration for the air ambulance as of that date.
- **C.** Within 30 days after the date of receipt of a notice described in subsection (A) or (B), the Department shall:
 - 1. For a notice described in subsection (A), issue an amended certificate of registration that incorporates the name change but retains the expiration date of the current certificate of registration; and
 - 2. For a notice described in subsection (B), send the certificate holder written confirmation of the voluntary relinquishment of the certificate of registration, with an effective date

that corresponds to the written notice.

- A certificate holder shall notify the Department in writing within one working day after a change in its the certificate holder's eligibility to obtain hold a certificate of registration for an air ambulance under R9-25-802(B) R9-25-802(A).
- **E.** Upon receiving a notification required in subsection (D), the Department:
 - 1. Shall revoke the certificate for the air ambulance; and
 - 2. If the air ambulance is the only air ambulance operated by an air ambulance service, may revoke the license of the air ambulance service.

R9-25-805. Inspections (A.R.S. §§ 36-2202(A)(4) and (5), 36-2209(A)(2), 36-2212, and 36-2232(A)(11))

- An applicant or <u>a</u> certificate holder shall make an air ambulance available for inspection within Arizona at the within 10 days after a request of by the Department.
- **B.** The Department shall conduct each inspection in compliance with A.R.S. § 41-1009.
- C. As permitted under A.R.S. § 36-2232(A)(11), upon certificate holder request and at certificate holder expense, the annual inspection of an air ambulance required for renewal of a certificate of registration may be conducted by a Department-approved inspection facility.

R9-25-806. Enforcement Actions (A.R.S. §§ 36-2202(A)(4), 36-2209(A)(2), 36-2212, 36-2234(L), 41-1092.03, and 41-1092.11(B)) Repealed [Combined with 709]

- A. The Department may take an action listed in subsection (B) against a certificate holder's certificate of registration if the certificate holder:
 - 1. Fails or has failed to meet the eligibility requirements of R9-25-802(B);
 - 2. Fails or has failed to comply with any provision in A.R.S. Title 36, Chapter 21.1;
 - 3. Fails or has failed to comply with any provision in this Article or Article 2 or 7 of this Chapter; or
 - 4. Knowingly or negligently provides false documentation or false or misleading information to the Department.
- B. The Department may take the following actions against a certificate holder's certificate of registration:
 - 1. After notice and an opportunity to be heard is provided under A.R.S. Title 41, Chapter 6,

 Article 10, revoke the certificate of registration; and
 - In case of emergency, if the Department determines that a potential threat to the public health and safety exists and incorporates a finding to that effect in its order, immediately

suspend the certificate of registration as authorized under A.R.S. § 36-2234(L).

- C. In determining whether to take action under subsection (B), the Department shall consider:
 - 1. The severity of each violation relative to public health and safety;
 - 2. The number of violations relative to the transport volume of the air ambulance service;
 - 3. The nature and circumstances of each violation;
 - 4. Whether each violation was corrected and, if so, the manner of correction; and
 - 5. The duration of each violation.

R9-25-807. Minimum Standards for an Air Ambulance (A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-2209(A)(2); and 36-2212)

- **A.** An applicant or certificate holder shall ensure that an air ambulance has:
 - 1. A climate control system to prevent temperature extremes that would adversely affect patient care;
 - 2. If a fixed-wing air ambulance, pressurization capability;
 - 3. Interior lighting that allows for patient care and monitoring without interfering with the pilot's vision;
 - 4. For each place where a patient may be positioned, at least one electrical power outlet or other power source that is capable of operating all electrically powered medical equipment without compromising the operation of any electrical aircraft equipment;
 - 5. A back-up source of electrical power or batteries capable of operating all electrically powered life-support equipment for at least one hour;
 - 6. An entry that allows for patient loading and unloading without rotating a patient and stretcher more than 30 degrees about the longitudinal axis or 45 degrees about the lateral axis and without compromising the operation of monitoring systems, intravenous lines, or manual or mechanical ventilation;
 - 7. A configuration that allows each medical team member sufficient access to each patient to begin and maintain treatment modalities, including complete access to the patient's head and upper body for effective airway management;
 - 8. A configuration that allows for rapid exit of personnel and patients, without obstruction from stretchers and medical equipment;
 - A configuration that protects the aircraft's flight controls, throttles, and communications
 equipment from any intentional or accidental interference from a patient or equipment
 and supplies;
 - 10. A padded interior or an interior that is clear of objects or projections in the head strike

envelope;

- 11. An installed self-activating emergency locator transmitter;
- 12. A voice communications system that:
 - a. Is capable of air-to-ground communication, and
 - b. Allows the flight crew and medical team members to communicate with each other during flight;
- 13. Interior patient compartment wall and floor coverings that are:
 - a. Free of cuts or tears,
 - b. Made from non-absorbent material,
 - b.c. Capable of being disinfected, and
 - e.d. Maintained in a sanitary manner; and
- 14. If a rotor-wing air ambulance, the following:
 - a. A searchlight that:
 - i. Has a range of motion of at least 90 degrees vertically and 180 degrees horizontally,
 - ii. Is capable of illuminating a landing site, and
 - iii. Is located so that the pilot can operate the searchlight without removing the pilot's hands from the aircraft's flight controls;
 - b. Restraining devices that can be used to prevent a patient from interfering with the pilot or the aircraft's flight controls; and
 - c. A light to illuminate the tail rotor.
- **B.** An applicant or certificate holder shall ensure that:
 - 1. Except as provided in subsection (C) subsections (C), (D), and (E), each air ambulance has the equipment and supplies required in Table ± 8.1 for each mission level for which the air ambulance is used; and
 - 2. The equipment and supplies on an air ambulance are secured, stored, and maintained in a manner that prevents hazards to personnel and patients.
- <u>C.</u> An applicant or certificate holder shall ensure that an air ambulance used for an interfacility maternal mission has: [from 718]
 - 1. The equipment and supplies for a critical care mission in Table 8.1; and
 - 2. The following:
 - a. A Doppler fetal heart monitor;
 - b. Unless use is not indicated for the patient as determined through on-line medical direction or on-line medical guidance provided as described in R9-25-715(A)(2),

- an external fetal heart and tocographic monitor with printer capability;
- c. Tocolytic and anti-hypertensive medications;
- d. Advanced emergency cardiac life support equipment and supplies; and
- e. Neonatal resuscitation equipment and supplies.
- An applicant or certificate holder shall ensure that an air ambulance used for an interfacility neonatal mission has: [from 717]
 - 1. The equipment and supplies for a critical care mission in Table 8.1; and
 - 2. The following:
 - a. A transport incubator with:
 - i. Battery and inverter capabilities,
 - ii. An infant safety restraint system, and
 - iii. An integrated neonatal-capable pressure ventilator with oxygen-air supply and blender;
 - b. An invasive automatic blood pressure monitor;
 - A neonatal monitor or monitors with heart rate, respiratory rate, temperature,
 non-invasive blood pressure, and pulse oximetry capabilities;
 - <u>d.</u> Neonatal-specific drug concentrations and doses;
 - e. <u>Umbilical catheter insertion equipment and supplies;</u>
 - <u>f.</u> Thoracostomy supplies;
 - g. Neonatal resuscitation equipment and supplies;
 - h. A neonatal size cuff (size 2, 3, or 4) for use with an automatic blood pressure monitor; and
 - i. A neonatal probe for use with a pulse oximeter.
- A certificate holder may conduct an interfacility critical care mission using an air ambulance that does not have all of the equipment and supplies required in Table 1 8.1 for the mission level if:
 - 1. Care of the patient to be transported necessitates use of life-support equipment that, because of its size or weight or both, makes it unsafe or impossible for the air ambulance to carry all of the equipment and supplies required in Table ± 8.1 for the mission level, as determined by the certificate holder based upon:
 - a. The individual aircraft's capabilities,
 - b. The size and weight of the equipment and supplies required in Table <u>4.8.1</u> and of the additional life-support equipment,
 - c. The composition of the required medical team, and
 - d. Environmental factors such as density altitude;

- 2. The certificate holder ensures that, during the mission, the air ambulance has the equipment and supplies necessary to provide an appropriate level of medical care for the patient and to protect the health and safety of the personnel on the mission; and
- 3. The certificate holder ensures that, during the mission, the air ambulance is not directed by the air ambulance service or another person to conduct another mission before returning to a base location;
- 4.3. The certificate holder ensures that the air ambulance is not used for another mission until the air ambulance has all of the equipment and supplies required in Table 4 8.1 for the mission level; and
- 5. Within five working days after each interfacility critical care mission conducted as permitted under subsection (C), the certificate holder creates a record that includes the information required under R9-25-710(A)(8), a description of the life-support equipment used on the mission, a list of the equipment and supplies required in Table 1 8.1 that were removed from the air ambulance for the mission, and the justification for conducting the mission as permitted under subsection (C). [moved to 710]

Table 8.1. Minimum Equipment and Supplies Required on Air Ambulances, By Mission Level and Aircraft Type (Authorized by A.R.S. §§ 36-2202(A)(3), (4), and (5); 36-2209(A)(2); and 36-2212)

X = Required

ALS = Advanced Life Support Mission

BLS = Basic Life Support Mission

CC = Critical Care Mission

FW = Fixed-Wing Aircraft

RW = Rotor-Wing Aircraft

ININ	TUM EQUIPMENT AND SUPPLIES	FW	\mathbf{RW}	BLS	ALS	CC
. Ve	ntilation and Airway Equipment					
1.	Portable and fixed suction apparatus, with wide bore tubing, rigid pharyngeal curved suction tip, tonsillar and flexible suction catheters, 5F-14F	X	X	X	X	X
2.	Portable and fixed oxygen equipment, with variable flow regulators	X	X	X	X	X
3.	Oxygen administration equipment, including tubing; non-rebreathing masks (adult and pediatric sizes); and nasal cannulas (adult and pediatric sizes)	X	X	X	X	X
4.	Bag valve mask, with hand-operated, self-reexpanding bag (adult size), with oxygen reservoir/accumulator; mask (adult, pediatric, infant, and neonate sizes); and valve	X	X	X	X	X
5.	Airways, oropharyngeal (adult, pediatric, and infant sizes)	X	X	X	X	X
6.	Laryngoscope handle with extra batteries and bulbs, adult and pediatric	X	X	-	X	X
7.	Laryngoscope blades, sizes 0, 1, and 2, straight; sizes 3 and 4, straight and curved	X	X	-	X	X
8.	Endotracheal tubes, sizes 2.5-5.0 mm cuffed or uncuffed and 6.0-8.0 mm cuffed	X	X	-	X	X
9.	Meconium aspirator	X	X	-	X	X
10.	10 mL straight tip syringes	X	X	-	X	X
11.	Stylettes for Endotracheal tubes, adult and pediatric	X	X	-	X	X
12.	Magill forceps, adult and pediatric	X	X	-	X	X
13.	Nasogastric tubes, sizes 5F and 8F, Salem sump sizes 14F and 18F	X	X	_	X	X
14.	End-tidal CO ₂ -detectors, colorimetric or quantitative	X	X	-	X	X
15.	Portable automatic ventilator with positive end expiratory pressure	X	X	-	X	X
Me	nitoring and Defibrillation					

	1.	Automatic external defibrillator	X	X	X	_	_
	2.	Portable, battery-operated monitor/defibrillator, with tape write-out/recorder, defibrillator pads, adult and pediatric paddles or hands-free patches, ECG leads, adult and pediatric chest attachment electrodes, and capability to provide electrical discharge below 25 watt-seconds	X	X	-	X	X
	3.	unit or integrated into monitor/defibrillator	X	X	-	X	X
C.	Im	mobilization Devices					
	1.	adult and pediatric sizes	-	X	X	X	X
	2.	Head immobilization device, either firm padding or another commercial device	-	X	X	X	X
	3.	Lower extremity (femur) traction device, including lower extremity, limb support slings, padded ankle hitch, padded pelvic support, and traction strap	-	X	X	X	X
	4.	3	-	X	X	X	X
Đ.	Ba	ndages					
	1.	Burn pack, including standard package, clean burn sheets	X	X	X	X	X
	2.	Dressings, including sterile multi-trauma dressings (various large and small sizes); abdominal pads, 10" x 12" or larger; and 4" x 4" gauze sponges	X	X	X	X	X
	3.	Gauze rolls, sterile (4" or larger)	X	X	X	X	X
	4.	Elastic bandages, non-sterile (4" or larger)	X	X	X	X	X
	5.	Occlusive dressing, sterile, 3" x 8" or larger	X	X	X	X	X
	6.	Adhesive tape, including various sizes (1" or larger) hypoallergenic and various sizes (1" or larger) adhesive	X	X	X	X	X
E.	Ob	stetrical					
	1.	Obstetrical kit (separate sterile kit), including towels, 4" x 4" dressing, umbilical tape, sterile scissors or other cutting utensil, bulb suction, clamps for cord, sterile gloves, at least 4 blankets, and a head cover	X	X	X	X	X
	2.		X	X	X	X	X
F.	Mi	scellaneous					
	1.	Sphygmomanometer (infant, pediatric, and adult regular and large sizes)	X	X	X	X	X
	2.	Stethoscope	X	X	X	X	X
	3.	Pediatric equipment sizing reference guide	X	X	X	X	X
	4.	Thermometer with low temperature capability	X	X	X	X	X
	5.	Heavy bandage or paramedic scissors for cutting clothing, belts, and boots	X	X	X	X	X

	6. Cold packs	X	X	X	X	X
	7. Flashlight (1) with extra batteries	X	X	X	X	X
	8. Blankets	X	X	X	X	X
	9. Sheets	X	X	X	X	X
	10. Disposable emesis bags or basins	X	X	X	X	X
	11. Disposable bedpan	X	X	X	X	X
	12. Disposable urinal	X	X	X	X	X
	13. Properly secured patient transport system	X	X	X	X	X
	14. Lubricating jelly (water soluble)	X	X	X	X	X
	15. Small volume nebulizer	X	X	-	X	X
	16. Glucometer or blood glucose measuring device with reagent strips	X	X	X	X	X
	17. Pulse oximeter with pediatric and adult probes	X	X	X	X	X
	18. Automatic blood pressure monitor	X	X	X	X	X
G.	Infection Control (Latex-free equipment shall be available)					
	1. Eye protection (full peripheral glasses or goggles, face shield)	X	X	X	X	X
	2. Masks	X	X	X	X	X
	3. Gloves, non-sterile	X	X	X	X	X
	4. Jumpsuits or gowns	X	X	X	X	X
	5. Shoe covers	X	X	X	X	X
	6. Disinfectant hand wash, commercial antimicrobial (towelette, spray, or liquid)	X	X	X	X	X
	7. Disinfectant solution for cleaning equipment	X	X	X	X	X
	8. Standard sharps containers	X	X	X	X	X
	9. Disposable red trash bags	X	X	X	X	X
	10. High-efficiency particulate air mask	X	X	X	X	X
H.	Injury Prevention Equipment					
	1. Appropriate restraints (such as seat belts) for patient, personnel, and family members	X	X	X	X	X
	2. Child safety restraints	X	X	X	X	X
	3. Safety vest or other garment with reflective material for each personnel member	-	X	X	X	X
	4. Fire extinguisher	X	X	X	X	X

	5.	Hazardous material reference guide	X	X	X	X	X
	6.	Hearing protection for patient and personnel	X	X	X	X	X
Į.	Va	scular Access					
	1.	Intravenous administration equipment, with fluid in bags	X	X	-	X	X
	2.	Antiseptic solution (alcohol wipes and povidone-iodine wipes)	X	X	-	X	X
	3.	Intravenous pole or roof hook	X	X	-	X	X
	4.	Intravenous catheters 14G-24G	X	X	-	X	X
	5.	Intraosseous needles	X	X	-	X	X
	6.	Venous tourniquet	X	X	-	X	X
	7.	One of each of the following types of intravenous solution administration sets: a. A set with blood tubing, b. A set capable of delivering 60 drops per cc, and c. A set capable of delivering 10 or 15 drops per cc	X	X	-	X	X
	8.	Intravenous arm boards, adult and pediatric	X	X	-	X	X
	9.	IV pump or pumps (minimum of 3 infusion lines)	X	X	-	X	X
	10 .	· IV pressure bag	X	X	-	X	X
J.	Me	edications					
	1.	Agents required in a table of agents, established according to A.R.S. § 36-2204 and available through the Department at www.azdhs.gov/ems-regulatory-references, that an administrative medical director may authorize based on the EMCT classification	X	X	X	X	X

MINIMUM EQUIPMENT AND SUPPLIES	BLS or ALS	<u>CC</u>
A. Ventilation and Airway Equipment		
1. Portable and fixed suction apparatus, with wide-bore tubing, rigid pharyngeal curved suction tip, tonsillar and flexible suction catheters, 5F- 14F	X	X
2. Portable and fixed oxygen equipment, with variable flow regulators	<u>X</u>	<u>X</u>
3. Oxygen administration equipment, including tubing; non-rebreathing masks (adult and pediatric sizes); and nasal cannulas (adult and pediatric sizes)	<u>X</u>	<u>X</u>
4. Bag-valve mask, with hand-operated, self-reexpanding bag (adult size), with oxygen reservoir/accumulator; mask (adult, pediatric, infant, and neonate sizes); and valve	<u>X</u>	<u>X</u>
5. Airways, oropharyngeal (adult, pediatric, and infant sizes)	<u>X</u>	<u>X</u>

	X	<u>X</u>
7. Laryngoscope blades, sizes 0, 1, and 2, straight; sizes 3 and 4, straight and curved	X	<u>X</u>
8. Endotracheal tubes, sizes 2.5-5.0 mm cuffed or uncuffed and 6.0-8.0 mm cuffed	X	<u>X</u>
9. Meconium aspirator	<u>X</u>	<u>X</u>
10. 10 mL straight-tip syringes	<u>X</u>	<u>X</u>
11. Stylettes for Endotracheal tubes, adult and pediatric	<u>X</u>	<u>X</u>
12. Magill forceps, adult and pediatric	<u>X</u>	<u>X</u>
13. Nasogastric tubes, sizes 5F and 8F, Salem sump sizes 14F and 18F	<u>X</u>	<u>X</u>
14. End-tidal CO ₂ detectors, colorimetric or quantitative	<u>X</u>	<u>X</u>
15. Portable automatic ventilator with positive end expiratory pressure	<u>X</u>	<u>X</u>
B. Monitoring and Defibrillation		
1. Portable, battery-operated monitor/defibrillator, with tape write-out/recorder, defibrillator pads, adult and pediatric paddles or hands-free patches, ECG leads, adult and pediatric chest attachment electrodes, and capability to provide electrical discharge below 25 watt-seconds	X	<u>X</u>
2. Transcutaneous cardiac pacemaker, either stand-alone unit or integrated into monitor/defibrillator	X	X
C. Immobilization Devices (RW Only)		
1. Cervical collars, rigid, adjustable or in an assortment of adult and pediatric sizes	<u>X</u>	<u>X</u>
2. Head immobilization device, either firm padding or another commercial device	X	<u>X</u>
2 Lavven systemity (female) treation devices in cluding lavven systemity limb	<u>X</u>	<u>X</u>
3. Lower extremity (femur) traction device, including lower extremity, limb support slings, padded ankle hitch, padded pelvic support, and traction strap		_
support slings, padded ankle hitch, padded pelvic support, and traction	<u>X</u>	<u>X</u>
support slings, padded ankle hitch, padded pelvic support, and traction strap	<u>X</u>	
support slings, padded ankle hitch, padded pelvic support, and traction strap 4. Upper and lower extremity immobilization splints	<u>X</u>	
support slings, padded ankle hitch, padded pelvic support, and traction strap 4. Upper and lower extremity immobilization splints D. Bandages		<u>X</u>
support slings, padded ankle hitch, padded pelvic support, and traction strap 4. Upper and lower extremity immobilization splints D. Bandages 1. Burn pack, including standard package, clean burn sheets 2. Dressings, including sterile multi-trauma dressings (various large and small sizes); abdominal pads, 10" x 12" or larger; and 4" x 4" gauze	X	<u>X</u> <u>X</u>
support slings, padded ankle hitch, padded pelvic support, and traction strap 4. Upper and lower extremity immobilization splints D. Bandages 1. Burn pack, including standard package, clean burn sheets 2. Dressings, including sterile multi-trauma dressings (various large and small sizes); abdominal pads, 10" x 12" or larger; and 4" x 4" gauze sponges	<u>X</u> <u>X</u>	<u>X</u> <u>X</u> <u>X</u>
support slings, padded ankle hitch, padded pelvic support, and traction strap 4. Upper and lower extremity immobilization splints D. Bandages 1. Burn pack, including standard package, clean burn sheets 2. Dressings, including sterile multi-trauma dressings (various large and small sizes); abdominal pads, 10" x 12" or larger; and 4" x 4" gauze sponges 3. Gauze rolls, sterile (4" or larger)	<u>X</u> <u>X</u>	<u>X</u> <u>X</u> <u>X</u>

	various sizes (1" or larger) adhesive		
<u>E.</u>	Obstetrical		
	1. Obstetrical kit (separate sterile kit), including towels, 4" x 4" dressing, umbilical tape, sterile scissors or other cutting utensil, bulb suction, clamps for cord, sterile gloves, blankets, and a head cover	<u>X</u>	<u>X</u>
	2. An alternate portable patient heat source or 2 heat packs	<u>X</u>	<u>X</u>
<u>F.</u>	Miscellaneous		
	1. Sphygmomanometer (infant, pediatric, and adult regular and large sizes)	<u>X</u>	<u>X</u>
	2. Stethoscope	<u>X</u>	<u>X</u>
	3. Pediatric equipment sizing reference guide	<u>X</u>	<u>X</u>
	4. Thermometer with low temperature capability	<u>X</u>	<u>X</u>
	5. Heavy bandage or paramedic scissors for cutting clothing, belts, and boots	<u>X</u>	<u>X</u>
	6. Cold packs	<u>X</u>	<u>X</u>
	7. Flashlight (1) with extra batteries	<u>X</u>	<u>X</u>
	8. Blankets	<u>X</u>	<u>X</u>
	9. Sheets	<u>X</u>	<u>X</u>
	10. Disposable emesis bags or basins	<u>X</u>	<u>X</u>
	11. Disposable bedpan (FW only)	<u>X</u>	<u>X</u>
	12. Disposable urinal (FW only)	<u>X</u>	<u>X</u>
	13. Properly secured patient transport system	<u>X</u>	<u>X</u>
	14. <u>Lubricating jelly (water soluble)</u>	<u>X</u>	<u>X</u>
	15. Small volume nebulizer	<u>X</u>	<u>X</u>
	16. Glucometer or blood glucose measuring device with reagent strips	<u>X</u>	<u>X</u>
	17. Pulse oximeter with pediatric and adult probes	<u>X</u>	<u>X</u>
	18. Automatic blood pressure monitor	<u>X</u>	<u>X</u>
	19. Trauma arterial tourniquet (RW only)	<u>X</u>	<u>X</u>
<u>G.</u>	Infection Control (Latex-free equipment shall be available)		
	1. Eye protection (full peripheral glasses or goggles, face shield)	<u>X</u>	<u>X</u>
	2. Masks	<u>X</u>	<u>X</u>
	3. Gloves, non-sterile	X	<u>X</u>
	4. Jumpsuits or gowns	<u>X</u>	<u>X</u>
	5. Shoe covers	<u>X</u>	<u>X</u>

	<u>6.</u>	Disinfectant hand wash, commercial antimicrobial (towelette, spray, or liquid)	<u>X</u>	<u>X</u>
	<u>7.</u>	Disinfectant solution for cleaning equipment	<u>X</u>	<u>X</u>
	<u>8.</u>	Standard sharps containers	<u>X</u>	<u>X</u>
	<u>9.</u>	Disposable red trash bags	<u>X</u>	<u>X</u>
	<u>10.</u>	High-efficiency particulate air mask	<u>X</u>	<u>X</u>
<u>H.</u>	<u>Inj</u>	ury Prevention Equipment		
	<u>1.</u>	Appropriate restraints (such as seat belts or, if applicable, child safety restraints) for patient, personnel, and family members	<u>X</u>	<u>X</u>
	2.	Safety vest or other garment with reflective material for each personnel member (RW only)	<u>X</u>	<u>X</u>
	3.	Fire extinguisher, with current inspection tag	<u>X</u>	<u>X</u>
	4.	Hazardous material reference guide	<u>X</u>	<u>X</u>
	5.	Hearing protection for patient and personnel	X	<u>X</u>
<u>I.</u>	Va	scular Access		
	<u>1.</u>	Intravenous administration equipment, with fluid in bags	<u>X</u>	<u>X</u>
	<u>2.</u>	Antiseptic solution (alcohol wipes and povidone-iodine wipes)	<u>X</u>	<u>X</u>
	<u>3.</u>	Intravenous pole or roof hook	<u>X</u>	<u>X</u>
	<u>4.</u>	<u>Intravenous catheters 14G-24G</u>	<u>X</u>	<u>X</u>
	<u>5.</u>	Intraosseous needles, adult and pediatric sizes	<u>X</u>	<u>X</u>
	<u>6.</u>	Venous tourniquet	<u>X</u>	<u>X</u>
	<u>7.</u>	One of each of the following types of intravenous solution administration sets: a. A set with blood tubing, b. A set capable of delivering 60 drops per cc, and c. A set capable of delivering 10 or 15 drops per cc	X	X
	<u>8.</u>	Intravenous arm boards, adult and pediatric	<u>X</u>	X
	<u>9.</u>	IV pump or pumps (minimum of 3 infusion lines)	<u>X</u>	X
	10.	IV pressure bag	<u>X</u>	X
<u>J.</u>	Me	dications		
	<u>1.</u>	Agents required in a table of agents, established according to A.R.S. § 36-2204 and available through the Department at www.azdhs.gov/ems-regulatory-references, that an administrative medical director may authorize based on the EMCT classification	<u>X</u>	<u>X</u>