

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. ~~“Advanced life support” means pertaining to a patient whose condition requires care commensurate with the scope of practice of an EMT-P.~~
2. “Air ambulance” means an aircraft that is an “ambulance” as defined in A.R.S. § 36-2201.
3. “Air ambulance service” means an ambulance service that operates an air ambulance.
4. ~~“Applicant” means an owner requesting:~~
 - a. ~~An initial or renewal air ambulance service license under Article 7 of this Chapter,~~
 - b. ~~An initial or renewal air ambulance certificate of registration under Article 8 of this Chapter, or~~
 - c. ~~Transfer of an air ambulance service license under R9-25-706.~~
5. “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.
6. ~~“Basic life support” means pertaining to a patient whose condition requires care commensurate with the scope of practice of an EMT-B.~~
7. “Business organization” means an entity such as an association, cooperative, corporation, limited liability company, or partnership.
8. “Call number” means a unique identifier used by an air ambulance service to identify a specific mission.
9. “CAMTS” means the Commission on Accreditation of Medical Transport Systems, formerly known as the Commission on Accreditation of Air Medical Services.
10. “Change of ownership” means a transfer of controlling legal or controlling equitable interest and authority in an air ambulance service.
11. ~~“Convalescent transport” means conveyance of a patient at a prearranged time when either the patient’s original location or destination is not a health care institution.~~
12. “Critical care” means pertaining to a patient whose condition requires care commensurate with the scope of practice of a physician or registered nurse.
13. ~~“Current” means up to date and extending to the present time.~~

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14. ~~“EMT” means “certified emergency medical technician,” as defined in A.R.S. § 36-2201.~~
15. ~~“EMT-B” means “basic emergency medical technician,” as defined in A.R.S. § 36-2201.~~
16. ~~“EMT-I” means “intermediate emergency medical technician,” as defined in A.R.S. § 36-2201.~~
17. ~~“EMT-P” means “emergency paramedic,” as defined in A.R.S. § 36-2201.~~
18. “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.
19. ~~“Health care institution” has the same meaning as in A.R.S. § 36-401.~~
20. “Holds itself out” means advertises through print media, broadcast media, the Internet, or other means.
21. “Interfacility” means between two health care institutions.
22. “Licensed respiratory care practitioner” has the same meaning as in A.R.S. § 32-3501.
23. “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.
24. ~~“Medical direction” has the same meaning as in R9-25-101.~~
25. “Medical team” means personnel whose main function on a mission is the medical care of the patient being transported.
26. “Mission” means a transport job 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.
27. “Neonatal” means pertaining to an infant who is 28 days of age or younger and who is in need of critical care services.
28. ~~“On-line medical direction” has the same meaning as in R9-25-101.~~
29. “On-line medical guidance” means emergency medical services direction or information provided to a ~~non-EMT~~ non-EMCT medical team member by a physician through two-way voice communication.
30. “Operate an air ambulance in this state” means:
 - 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

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- 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.
- 31. “Owner” means a person that holds a controlling legal or equitable interest and authority in a business enterprise.
- ~~32. “Patient” has the same meaning as in R9-25-101.~~
- 33. “Patient reference number” means a unique identifier used by an air ambulance service to identify an individual patient.
- ~~34. “Pediatric” means for use in the treatment of children or other individuals whose size falls within the scope of a pediatric equipment sizing reference guide.~~
- ~~35. “Pediatric equipment sizing reference guide” means a chart or device, such as a Broselow™ tape, used to determine the size of medical equipment to be used for a patient who is a child or of small stature, generally based on either patient length or age and weight.~~
- 36. “Person” means:
 - a. An individual;
 - b. A business organization; or
 - ~~e. An administrative unit of the U.S. government, state government, or a political subdivision of the state.~~
- 37. “Personnel” means individuals who work for an air ambulance service, with or without compensation, whether as employees, contractors, or volunteers.
- 38. “Premises” means each physical location of air ambulance service operations and includes all equipment and records at each location.
- 39. “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.
- 40. “Publicizes” means makes a good faith effort to communicate information to the general public through print media, broadcast media, the Internet, or other means.
- ~~41. “Registered nurse” has the same meaning as in A.R.S. § 32-1601.~~
- 42. “Regularly” means at recurring, fixed, or uniform intervals.
- 43. “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.

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44. ~~“Scene” means the location of the patient to be transported or the closest point to the patient at which an air ambulance can arrive.~~
45. “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.
46. “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.
47. “Valid” means that a license, certification, or other form of authorization is in full force and effect and not suspended.
48. “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.

R9-25-704. 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. ~~To obtain an initial license, an~~ An applicant for an initial license shall submit an application to the Department, an application completed using a Department provided form and in a Department-provided format, including:
1. The applicant’s name; mailing address; e-mail address; fax number, if any; and telephone number;
 2. Each business name to be used for the air ambulance service;
 3. The physical and mailing addresses to be used for the air ambulance service, if different from the applicant’s mailing address;
 4. 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;
 5. If the applicant is a business organization:
 - a. The type of business organization;
 - b. The following information about the individual who is to serve as the primary

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contact for information regarding the application:

- i. Name;
 - ii. Address;
 - iii. E-mail address;
 - iii. Telephone number; and
 - iv. Fax number, if any;
- c. The name, title, and address of each officer and board member or trustee; and
- d. A copy of the business organization's articles of incorporation, articles of organization, or partnership or joint venture documents, if applicable;
6. The name and Arizona license number for the physician who is to serve as the administrative medical director for the air ambulance service;
7. The intended hours of operation for the air ambulance service;
8. The intended schedule of rates for the air ambulance service;
9. ~~The scope of the mission types to be provided, including whether each~~ Which of the following mission types is to be provided:
- a. Emergency medical services transports;
 - b. Interfacility transports;
 - c. Interfacility maternal transports; and
 - d. Interfacility neonatal transports; ~~and~~
 - e. ~~Convalescent transports;~~
10. The signature of the applicant and the date signed;
- ~~40.11.~~ A copy of a current and valid OST Form 4507 showing the effective date of Federal Aviation Administration registration and exemption under 14 CFR 298;
- ~~44.12.~~ A copy of the following issued by the Federal Aviation Administration:
- a. 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;
 - c. If intending to operate 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;

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- ~~12,13.~~ 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 required under R9-25-802(C); 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;
- ~~13,14.~~ 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);
- ~~14,15.~~ 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);
- ~~15,16.~~ If the applicant holds current CAMTS accreditation for the air ambulance service, a copy of the current CAMTS accreditation report;
- ~~16,17.~~ Attestation that the applicant ~~knows~~ 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
- ~~17,18.~~ Attestation that the information provided in the application, including the information in the documents accompanying the application form, is accurate and complete; ~~and~~
- ~~18.~~ The ~~dated~~ signature of:
- a. ~~If the applicant is an individual, the individual;~~
 - b. ~~If the applicant is a corporation, an officer of the corporation;~~
 - c. ~~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 (A)(18)(b) through (f), an individual who is a member of the business organization.~~
- B.** Unless an applicant establishes that it holds current CAMTS accreditation as provided in subsection ~~(C)~~ (A)(16) or is applying for an initial license because of a change ~~in~~ of ownership as

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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 license.

~~C.~~ ~~To establish current CAMTS accreditation, an applicant shall submit to the Department a copy of its current CAMTS accreditation report, as provided in subsection (A)(15).~~

~~D.C.~~ The Department shall review and approve or deny each application as described in Article 12 of this Chapter.

~~E.D.~~ The Department may deny an application if an applicant:

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).

R9-25-711. 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 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:
 - a. A physician or registered nurse, and
 - b. ~~An EMT-P~~ A Paramedic or licensed respiratory care practitioner;
2. Each advanced life support mission is staffed by a medical team of at least two individuals with at least the following qualifications:
 - a. ~~An EMT-P~~ A Paramedic, and
 - b. Another ~~EMT-P~~ Paramedic or a licensed respiratory care practitioner; and
3. 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-B~~ EMT.

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), that the weight of a second medical team member could potentially compromise the performance of the rotor-wing air

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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), 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, ~~an EMT-P~~ a Paramedic; and
3. For a basic life support mission, an ~~EMT-B~~ EMT.

C. An air ambulance service shall ensure that:

1. Each air ambulance service rotor-wing pilot is provided 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
 - c. 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; 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.

D. 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.

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- E.** An air ambulance service shall create and maintain for each personnel member a file containing documentation of the personnel member's qualifications, including, as applicable, licenses, certifications, and training records.

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 shall ensure that:
1. The air ambulance service has a 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 ~~EMT~~ EMCT medical team member receives medical direction as required under Article 2 of this Chapter;
 - e. Ensures that each ~~non-EMT~~ non-EMCT medical team member receives medical guidance through:
 - i. Written treatment protocols; and
 - ii. On-line medical guidance provided by:
 - (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
 - f. Approves, ensures implementation of, and annually reviews treatment protocols to be followed by medical team members;
 2. The air ambulance service has a quality management program through which:
 - a. 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.

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B. A medical director shall:

1. Be a physician, as defined in A.R.S. § 36-2201; and
2. Comply with one of the following:
 - a. If the air ambulance service provides emergency medical services transports, meet the qualifications of ~~R9-25-204(A)(2)~~ R9-25-202(A)(1); or
 - b. If the air ambulance service does not provide emergency medical services transports, meet the qualifications of ~~R9-25-204(A)(2)~~ R9-25-202(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.

ARTICLE 8. AIR AMBULANCE REGISTRATION

Table 4-8.1. 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

MINIMUM EQUIPMENT AND SUPPLIES	FW	RW	BLS	ALS	CC
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	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 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

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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
B. Monitoring 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. Transcutaneous cardiac pacemaker, either stand-alone unit or integrated into monitor/defibrillator	X	X	-	X	X
C. Immobilization Devices					
1. Cervical collars, rigid, adjustable or in an assortment of 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. Upper and lower extremity immobilization splints	-	X	X	X	X
D. Bandages					
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

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6. Adhesive tape, including various sizes (1" or larger) hypoallergenic and various sizes (1" or larger) adhesive	X	X	X	X	X
E. 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, at least 4 blankets, and a head cover	X	X	X	X	X
2. An alternate portable patient heat source or 2 heat packs	X	X	X	X	X
F. Miscellaneous					
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	<u>X</u>	X	X
17. Pulse oximeter with pediatric and adult probes	X	X	<u>X</u>	X	X
18. Automatic blood pressure monitor	X	X	X	X	X

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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
I. Vascular 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

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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. Medications					
1. Drugs and drug related equipment required in the EMT-B Drug List in Exhibit 1 to R9-25-503 <u>Agents required in Tables 5.2 and, if applicable, 5.3 for the EMCT classification</u>	X	X	X	X	X
2. Drugs and drug related equipment required in the EMT-P and Qualified EMT-I Drug List in Exhibit 1 to R9-25-503	X	X	-	X	X

ARTICLE 9. GROUND AMBULANCE CERTIFICATE OF NECESSITY

R9-25-901. Definitions (Authorized by A.R.S. § 36-2202 (A))

In addition to the definitions in A.R.S. § 36-2201 and R9-25-101, the following definitions apply in Articles 9, 10, 11, and 12 unless otherwise specified:

1. “Adjustment” means a modification, correction, or alteration to a rate or charge.
2. ~~“ALS” has the same meaning as in R9-25-101(8).~~
3. “ALS base rate” means the monetary amount assessed to a patient according to A.R.S. § 36-2239(F).
4. ~~“Ambulance attendant” has the same meaning as in A.R.S. § 36-2201(4).~~
5. “Ambulance Revenue and Cost Report” means Exhibit A or Exhibit B, which records and reports the financial activities of an applicant or a certificate holder.
6. ~~“Applicant” means:~~
 - a. ~~An individual, if a sole proprietorship;~~
 - b. ~~The corporation’s officers, if a corporation;~~
 - c. ~~The managing partner, if a partnership or limited liability partnership;~~

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- d. ~~The designated manager, or if no manager is designated, the members of the limited liability company, if a limited liability company;~~
 - e. ~~The designated representative of a public corporation that has controlling legal or equitable interest and authority in a ground ambulance service;~~
 - f. ~~The designated representative of a political subdivision that has controlling legal or equitable interest and authority in a ground ambulance service; or~~
 - g. ~~The designated representative of a government agency that has controlling legal or equitable interest and authority in a ground ambulance service.~~
7. “Application packet” means the fee, documents, forms, and additional information the Department requires to be submitted by an applicant or on an applicant’s behalf.
8. “Back-up agreement” means a written arrangement between a certificate holder and a neighboring certificate holder for temporary coverage during limited times when the neighboring certificate holder’s ambulances are not available for service in its service area.
9. ~~“BLS” has the same meaning as in R9-25-101(13).~~
10. “BLS base rate” means the monetary amount assessed to a patient according to A.R.S. § 36-2239(G).
11. “Certificate holder” means a person to whom the Department issues a certificate of necessity.
12. ~~“Certificate of necessity” has the same meaning as in A.R.S. § 36-2201(8).~~
13. “Certificate of registration” means an authorization issued by the Department to a certificate holder to operate a ground ambulance vehicle.
14. “Change of ownership” means:
- a. In the case of ownership by a sole proprietor, 20% or more interest or a beneficial interest is sold or transferred;
 - b. In the case of ownership by a partnership or a private corporation, 20% or more of the stock, interest, or beneficial interest is sold or transferred; or
 - c. The controlling influence changes to the extent that the management and control of the ground ambulance service is significantly altered.
15. “Charge” means the monetary amount assessed to a patient for disposable supplies, medical supplies, medication, and oxygen-related costs.
16. “Chassis” means the part of a ground ambulance vehicle consisting of all base components, including ~~the frame~~, front and rear suspension, exhaust system, brakes, engine, engine hood or cover, transmission, front and rear axles, front fenders, drive train

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and shaft, fuel system, engine air intake and filter, accelerator pedal, steering wheel, tires, heating and cooling system, battery, and operating controls and instruments.

17. “Convalescent transport” means a scheduled transport other than an interfacility transport.
- ~~18. “Day” means calendar day.~~
19. “Dispatch” means the direction to a ground ambulance service or vehicle to respond to a call for EMS or transport.
20. “Driver’s compartment” means the part of a ground ambulance vehicle that contains the controls and instruments for operation of the ground ambulance vehicle.
- ~~21. “Emergency medical services” or “EMS” has the same meaning as in A.R.S. § 36-2201(14).~~
- ~~22. “EMT” has the same meaning as in R9-25-101(31).~~
23. “Financial statements” means an applicant’s balance sheet, annual income statement, and annual cash flow statement.
- ~~24. “Fit and proper” has the same meaning as in A.R.S. § 36-2201(19).~~
25. “Frame” means the structural foundation on which a ground ambulance vehicle chassis is constructed.
26. “General public rate” means the monetary amount assessed to a patient by a ground ambulance service for ALS, BLS, mileage, standby waiting, or according to a subscription service contract.
27. “Generally accepted accounting principles” means the conventions, and rules and procedures for accounting, including broad and specific guidelines, established by the Financial Accounting Standards Board.
28. “Goodwill” means the difference between the purchase price of a ground ambulance service and the fair market value of the ground ambulance service’s identifiable net assets.
29. “Gross revenue” means:
 - a. The sum of revenues reported in the Ambulance Revenue and Cost Report Exhibit A, page 2, lines 1, 9, and 20; or
 - b. The sum of revenues reported in the Ambulance Revenue and Cost Report Exhibit B, page 3, lines 1, 24, 25, and 26.
30. “Ground ambulance service” means an ambulance service that operates on land.
31. “Ground ambulance service contract” means a written agreement between a certificate holder and a person for the provision of ground ambulance service.

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32. “Ground ambulance vehicle” means a motor vehicle, defined in A.R.S. § 28-101, specifically designed to transport ambulance attendants and patients on land.
33. ~~“Health care institution” has the same meaning as in A.R.S. § 36-401(A)(21).~~
34. “Indirect costs” means the cost of providing ground ambulance service that does not include the costs of equipment.
35. “Interfacility transport” means a scheduled transport between two health care institutions.
36. “Level of service” means ALS or BLS ground ambulance service, including the type of ambulance attendants used by the ground ambulance service.
37. “Major defect” means a condition that exists on a ground ambulance vehicle that requires the Department or the certificate holder to place the ground ambulance vehicle out-of-service.
38. “Mileage rate” means the monetary amount assessed to a patient for each mile traveled from the point of patient pick-up to the patient’s destination point.
39. “Minor defect” means a condition that exists on a ground ambulance vehicle that is not a major defect.
40. “Needs assessment” means a study or statistical analysis that examines the need for ground ambulance service within a service area or proposed service area that takes into account the current or proposed service area’s medical, fire, and police services.
41. “Out-of-service” means a ground ambulance vehicle cannot be operated to transport patients.
42. ~~“Patient” means an individual who is sick, injured, or wounded or who requires medical monitoring, medical treatment, or transport.~~
43. “Patient compartment” means the ground ambulance vehicle body part that holds a patient.
44. ~~“Person” has the same meaning as in A.R.S. § 1-215(28) and includes a political subdivision or governmental agency.~~
45. “Public necessity” means an identified population needs or requires all or part of the services of a ground ambulance service.
46. “Response code” means the priority assigned to a request for immediate dispatch by a ground ambulance service on the basis of the information available to the certificate holder or the certificate holder’s dispatch authority.
47. “Response time” means the difference between the time a certificate holder is notified that a need exists for immediate dispatch and the time the certificate holder’s first ground ambulance vehicle arrives at the scene. Response time does not include the time required

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- to identify the patient's need, the scene, and the resources necessary to meet the patient's need.
48. "Response-time tolerance" means the percentage of actual response times for a response code and scene locality that are compliant with the response time approved by the Department for the response code and scene locality, for any 12-month period.
 49. "Rural area" means a geographic region with a population of less than 40,000 residents that is not a suburban area.
 50. ~~"Scene" means the location of the patient or the closest point to the patient at which the ground ambulance vehicle can arrive.~~
 51. "Scene locality" means an urban, suburban, rural, or wilderness area.
 52. "Scheduled transport" means to convey a patient at a prearranged time by a ground ambulance vehicle for which an immediate dispatch and response is not necessary.
 53. "Service area" means the geographical boundary designated in a certificate of necessity using the criteria in A.R.S. § 36-2233(E).
 54. "Settlement" means the difference between the monetary amount Medicare establishes or AHCCCS pays as an allowable rate and the general public rate a ground ambulance service assesses a patient.
 55. "Standby waiting rate" means the monetary amount assessed to a patient by a certificate holder when a ground ambulance vehicle is required to wait in excess of 15 minutes to load or unload the patient, unless the excess delay is caused by the ground ambulance vehicle or the ambulance attendants on the ground ambulance vehicle.
 56. ~~"Suboperation station" has the same meaning as in A.R.S. § 36-2201(25).~~
 57. "Subscription service" means the provision of EMS or transport by a certificate holder to a group of individuals within the certificate holder's service area and the allocation of annual costs among the group of individuals.
 58. "Subscription service contract" means a written agreement for subscription service.
 59. "Subscription service rate" means the monetary amount assessed to a person under a subscription service contract.
 60. "Substandard performance" means a certificate holder's:
 - a. Noncompliance with A.R.S. Title 36, Chapter 21.1, Articles 1 and 2, or 9 A.A.C. 25, or the terms of the certificate holder's certificate of necessity, including all decisions and orders issued by the Director to the certificate holder;

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- b. Failure to ensure that an ambulance attendant complies with A.R.S. Title 36, Chapter 21.1, Articles 1 and 2, or 9 A.A.C. 25, for the level of ground ambulance service provided by the certificate holder; or
 - c. Failure to meet the requirements in 9 A.A.C. 25, Article 10.
61. “Suburban area” means a geographic region within a 10-mile radius of an urban area that has a population density equal to or greater than 1,000 residents per square mile.
62. “Third-party payor” means a person, other than a patient, who is financially responsible for the payment of a patient’s assessed general public rates and charges for EMS or transport provided to the patient by a ground ambulance service.
63. “Transfer” means:
- a. A change of ownership or type of business entity; or
 - b. To move a patient from a ground ambulance vehicle to an air ambulance.
64. “Transport” means the conveyance of one or more patients in a ground ambulance vehicle from the point of patient pick-up to the patient’s initial destination.
65. “Type of ground ambulance service” means an interfacility transport, a convalescent transport, or a transport that requires an immediate response.
66. “Urban area” means a geographic region delineated as an urbanized area by the United States Department of Commerce, Bureau of the Census.
67. “Wilderness area” means a geographic region that has a population density of less than one resident per square mile.

R9-25-902. Application for an Initial Certificate of Necessity; Provision of ALS Services; Transfer of a Certificate of Necessity (Authorized by A.R.S. §§ 36-2204, 36-2232, 36-2233(B), 36-2236(A) and (B), 36-2240)

- A. An applicant for an initial certificate of necessity shall submit to the Department an application packet, in a Department-provided format, that includes:
- 1. An application form that contains:
 - a. The legal business or corporate name, address, telephone number, and facsimile number of the ground ambulance service;
 - b. The name, title, address, e-mail address, and telephone number of the following:
 - i. Each applicant and individual responsible for managing the ground ambulance service;
 - ii. The business representative or designated manager;

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- iii. The individual to contact to access the ground ambulance service's records required in R9-25-910; and
 - iv. The statutory agent for the ground ambulance service, if applicable;
 - c. The name, address, and telephone number of the base hospital or centralized medical direction communications center for the ground ambulance service;
 - d. The address and telephone number of the ground ambulance service's dispatch center;
 - e. The address and telephone number of each suboperation station located within the proposed service area;
 - f. Whether the ground ambulance service is a corporation, partnership, sole proprietorship, limited liability corporation, or other;
 - g. Whether the business entity is proprietary, non-profit, or governmental;
 - h. A description of the communication equipment to be used in each ground ambulance vehicle and suboperation station;
 - i. The make and year of each ground ambulance vehicle to be used by the ground ambulance service;
 - j. The number of ambulance attendants and the type of licensure, certification, or registration for each attendant;
 - k. The proposed hours of operation for the ground ambulance service;
 - l. The type of ground ambulance service;
 - m. The level of ground ambulance service;
 - n. Acknowledgment that the applicant:
 - i. Is requesting to operate ground ambulance vehicles and a ground ambulance service in this state;
 - ii. Has received a copy of 9 A.A.C. 25 and A.R.S. Title 36, Chapter 21.1; and
 - iii. Will comply with the Department's statutes and rules in any matter relating to or affecting the ground ambulance service;
 - o. A statement that any information or documents submitted to the Department are true and correct; and
 - p. The signature of the applicant or the applicant's designated representative and the date signed;
2. The following information:

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- a. Where the ground ambulance vehicles in subsection (A)(1)(i) are located within the applicant's proposed service area;
 - b. A statement of the proposed general public rates;
 - c. A statement of the proposed charges;
 - d. The applicant's proposed response times, response codes, and response-time tolerances for each scene locality in the proposed service area, based on the following:
 - i. The population demographics within the proposed service area;
 - ii. The square miles within the proposed service area;
 - iii. The medical needs of the population within the proposed service area;
 - iv. The number of anticipated requests for each type and level of ground ambulance service in the proposed service area;
 - v. The available routes of travel within the proposed service area;
 - vi. The geographic features and environmental conditions within the proposed service area; and
 - vii. The available medical and emergency medical resources within the proposed service area;
 - e. A plan to provide temporary ground ambulance service to the proposed service area for a limited time when the applicant is unable to provide ground ambulance service to the proposed service area;
 - f. Whether a ground ambulance service currently operates in all or part of the proposed service area and if so, where; and
 - g. Whether an applicant or a designated manager:
 - i. Has ever been convicted of a felony or a misdemeanor involving moral turpitude;
 - ii. Has ever had a license or certificate of necessity for a ground ambulance service suspended or revoked by any state or political subdivision; or
 - iii. Has ever operated a ground ambulance service without the required certification or licensure in this or any other state;
3. The following documents:
- a. A description of the proposed service area by any method specified in A.R.S. § 36-2233(E) and a map that illustrates the proposed service area;
 - b. A projected Ambulance Revenue and Cost Report;
 - c. The financing agreement for all capital acquisitions exceeding \$5,000;

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- d. The source and amount of funding for cash flow from the date the ground ambulance service commences operation until the date cash flow covers monthly expenses;
 - e. Any proposed ground ambulance service contract under A.R.S. §§ ~~36-2232(A)4~~ 36-2232(A)(1) and 36-2234(K);
 - f. The information and documents specified in R9-25-1101, if the applicant is requesting to establish general public rates;
 - g. Any subscription service contract under A.R.S. §§ 36-2232(A)(1) and 36-2237(B);
 - h. A certificate of insurance or documentation of self-insurance required in A.R.S. § 36-2237(A) and R9-25-909;
 - i. A surety bond if required under A.R.S. § 36-2237(B); and
 - j. The applicant's and designated manager's resume or other description of experience and qualification to operate a ground ambulance service; and
4. Any documents, exhibits, or statements that may assist the Director in evaluating the application or any other information or documents needed by the Director to clarify incomplete or ambiguous information or documents.
- B.** Before an applicant provides ALS, the applicant shall submit to the Department the application packet required in subsection (A) and the following:
- 1. A current written contract for ALS medical direction; and
 - 2. Proof of professional liability insurance for ALS personnel required in R9-25-909(A)(1)(b).
- C.** When requesting a transfer of a certificate of necessity:
- 1. The person wanting to transfer the certificate of necessity shall submit a letter to the Department that contains:
 - a. A request that the certificate of necessity be transferred; and
 - b. The name of the person to whom the certificate of necessity is to be transferred; and
 - 2. The person identified in subsection (C)(1)(b) shall submit:
 - a. The application packet in subsection (A); and
 - b. The information in subsection (B), if ALS is provided.
- D.** An applicant shall submit the following fees:
- 1. \$100 application filing fee for an initial certificate of necessity; or
 - 2. \$50 application filing fee for a transfer of a certificate of necessity.

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- E.** The Department shall approve or deny an application under this Section according to 9 A.A.C. 25, Article 12.

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[CURRENT EXHIBIT A AND EXHIBIT B WILL BE REVISED AS SHOWN WITH STRIKEOUTS AND UNDERLINES IN THE ARCR DOCUMENT]

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ARTICLE 10. GROUND AMBULANCE VEHICLE REGISTRATION

R9-25-1002. Minimum Standards for Ground Ambulance Vehicles (Authorized by A.R.S. § 36-2202(A)(5))

An applicant for a certificate of registration or certificate holder shall ensure a ground ambulance vehicle is equipped with the following:

1. An engine intake air cleaner that meets the ground ambulance vehicle manufacturer's engine specifications;
2. A brake system that meets the requirements in A.R.S. § 28-952;
3. A cooling system in the engine compartment that maintains the engine temperature operating range required to prevent damage to the ground ambulance vehicle engine;
4. A battery:
 - a. With no leaks, corrosion, or other visible defects; and
 - b. As measured by a voltage meter, capable of generating:
 - i. 12.6 volts at rest; and
 - ii. 13.2 to 14.2 volts on high idle with all electrical equipment turned on;
5. A wiring system in the engine compartment designed to prevent the wire from being cut by or tangled in the engine or hood;
6. Hoses, belts, and wiring with no visible defects;
7. An electrical system capable of maintaining a positive charge while the ground ambulance vehicle is stationary and operating at high idle with headlights, running lights, patient compartment lights, environmental systems, and all warning devices turned on;
8. An exhaust pipe, muffler, and tailpipe under the ground ambulance vehicle and securely attached to the chassis;
9. A frame capable of supporting the gross vehicle weight of the ground ambulance vehicle;
10. A horn that meets the requirements in A.R.S. § 28-954(A);
11. A siren that meets the requirements in A.R.S. § 28-954(E);
12. A front bumper that is positioned at the forward-most part of the ground ambulance vehicle extending to the ground ambulance vehicle's outer edges;
13. A fuel cap of a type specified by the manufacturer for each fuel tank;
14. A steering system to include:
 - a. Power-steering belts free from frays, cracks, or slippage;
 - b. Power-steering that is free from leaks;

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- c. Fluid in the power-steering system that fills the reservoir between the full level and the add level indicator on the dipstick; and
- d. Bracing extending from the center of the steering wheel to the steering wheel ring that is not cracked;
- 15. Front and rear shock absorbers that are free from leaks;
- 16. Tires on each axle that:
 - a. Are properly inflated;
 - b. Are of equal size, equal ply ratings, and equal type;
 - c. Are free of bumps, knots, or bulges;
 - d. Have no exposed ply or belting; and
 - e. Have tread groove depth equal to or more than 4/32”;
- 17. An air cooling system capable of achieving and maintaining a 20° F difference between the air intake and the cool air outlet;
- 18. Air cooling and heater hoses secured in all areas of the ground ambulance vehicle and chassis to prevent wear due to vibration;
- 19. Body free of damage or rust that interferes with the physical operation of the ground ambulance vehicle or creates a hole in the driver’s compartment or the patient compartment;
- 20. Windshield defrosting and defogging equipment;
- 21. Emergency warning lights that provide 360° conspicuity;
- 22. At least one 5-lb. ABC dry, chemical, multi-purpose fire extinguisher in a quick release bracket with a current inspection tag;
- 23. A heating system capable of achieving and maintaining a temperature of not less than 68° F in the patient compartment within 30 minutes;
- 24. Sides of the ground ambulance vehicle insulated and sealed to prevent dust, dirt, water, carbon monoxide, and gas fumes from entering the interior of the patient compartment and to reduce noise;
- 25. Interior patient compartment wall and floor coverings that are:
 - a. In good repair and capable of being disinfected, and
 - b. Maintained in a sanitary manner;
- ~~25:26.~~ Padding over exit areas from the patient compartment and over sharp edges in the patient compartment;
- ~~26:27.~~ Secured interior equipment and other objects;

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- ~~27~~28. When present, hangers or supports for equipment mounted not to protrude more than 2 inches when not in use;
- ~~28~~29. Functional lamps and signals, including:
- a. Bright and dim headlamps,
 - b. Brake lamps,
 - c. Parking lamps,
 - d. Backup lamps,
 - e. Tail lamps,
 - f. Turn signal lamps,
 - g. Side marker lamps,
 - h. Hazard lamps,
 - i. Patient loading door lamps and side spot lamps,
 - j. Spot lamp in the driver's compartment and within reach of the ambulance attendant, and
 - k. Patient compartment interior lamps;
- ~~29~~30. Side-mounted rear vision mirrors and wide vision mirror mounted on, or attached to, the side-mounted rear vision mirrors;
- ~~30~~31. A patient loading door that permits the safe loading and unloading of a patient occupying a stretcher in a supine position;
- ~~32~~. At least two means of egress from the patient compartment to the outside through a window or door;
- ~~34~~33. Functional open door securing devices on a patient loading door;
- ~~32~~34. Patient compartment upholstery free of cuts or tears and capable of being disinfected;
- ~~33~~35. A seat belt installed for each seat in the driver's compartment;
- ~~34~~36. Belts or devices installed on a stretcher to be used to secure a patient;
- ~~35~~37. A seat belt installed for each seat in the patient compartment;
- ~~36~~38. A crash stable side or center mounting fastener of the quick release type to secure a stretcher to a ground ambulance vehicle;
- ~~37~~39. Windshield and windows free of obstruction;
- ~~38~~40. A windshield free from unrepaired starred cracks and line cracks that extend more than 1 inch from the bottom and sides of the windshield or that extend more than 2 inches from the top of the windshield;
- ~~39~~41. A windshield-washer system that applies enough cleaning solution to clear the windshield;

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- ~~40-42.~~ Operable windshield wipers with a minimum of two speeds;
- ~~41-43.~~ Functional hood latch for the engine compartment;
- ~~42-44.~~ Fuel system with fuel tanks and lines that meets manufacturer's specifications;
- ~~43-45.~~ Suspension system that meets the ground ambulance vehicle manufacturer's specifications;
- ~~44-46.~~ Instrument panel that meets the ground ambulance vehicle manufacturer's specifications; and
- ~~45-47.~~ Wheels that meet and are mounted according to manufacturer's specifications.

R9-25-1003. Minimum Equipment and Supplies for Ground Ambulance Vehicles (Authorized by A.R.S. § 36-2202(A)(5))

- A.** A ground ambulance vehicle used for either BLS or ALS level of service shall contain the following operational equipment and supplies:
1. A portable and a fixed suction apparatus;
 2. Wide-bore tubing, a rigid pharyngeal curved suction tip, and a flexible suction catheter in ~~each of the following French sizes: 5, 10, and 14~~
 - a. Two in 6, 8, or 10; and
 - b. Two in 12, 14, or 16;
 3. One fixed oxygen cylinder or equivalent with a minimum capacity of 106 cubic feet, a minimum pressure of 500 p.s.i., and a variable flow regulator;
 4. One portable oxygen cylinder with a minimum capacity of 13 cubic feet, a minimum pressure of 500 p.s.i., and a variable flow regulator;
 5. Oxygen administration equipment including: tubing, two adult-size and two pediatric-size non-rebreather masks, and two adult-size and two pediatric-size nasal cannula;
 6. One adult-size, one child-size, ~~and~~ one infant-size, and one neonate-size hand-operated, disposable, self-expanding bag-valve with one of each size bag-valve mask;
 7. Nasal airways in the following French sizes:
 - a. One in 16, 18, 20, 22, or 24; and
 - b. One in 26, 28, 30, 32, or 34;
 - ~~7-8.~~ Two adult-size, two child-size, and two infant-size oropharyngeal airways;
 - ~~8-9.~~ Two large-size, two medium-size, and two small-size cervical immobilization devices;
 - ~~9-10.~~ Two small-size, two medium-size, and two large size upper ~~and two lower~~ extremities splints;
 11. Two small-size, two medium-size, and two large size lower extremities splints;

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- ~~10.12.~~ One child-size and one adult-size lower extremity traction splint splints;
- ~~11.13.~~ Two full-length spine boards;
- ~~12.14.~~ Supplies to secure a patient to a spine board;
- ~~13.15.~~ One cervical-thoracic spinal immobilization device for extrication;
- ~~14.16.~~ Two sterile burn sheets;
- ~~15.17.~~ Two triangular bandages;
- ~~16.18.~~ ~~Two~~ Three sterile multi-trauma dressings, 10" x 30" or larger;
- ~~17.~~ ~~Four abdomen bandages, 5" x 7" or larger~~;
- ~~18.19.~~ Fifty non-sterile 4" x 4" gauze sponges;
- ~~19.20.~~ Ten non-sterile soft roller bandages, 4" or larger;
- ~~20.~~ ~~Two non-sterile elastic roller bandages or self-adherent wrap bandages, 3" or larger~~;
- ~~21.~~ Four sterile occlusive dressings, 3" x 8" or larger;
- ~~22.~~ Two 2" or 3" adhesive tape rolls;
- ~~23.~~ Containers for biohazardous medical waste that comply with requirements in 18 A.A.C. 13, Article 14;
- ~~23.24.~~ A sterile obstetrical kit containing towels, 4" x 4" dressing, scissors, bulb suction, and clamps or tape for cord;
- ~~25.~~ One blood glucose testing kit;
- ~~26.~~ A meconium aspirator adapter;
- ~~27.~~ A length/weight-based pediatric reference guide to determine the appropriate size of medical equipment and drug dosing;
- ~~28.~~ A pulse oximeter with both pediatric and adult probes;
- ~~24.29.~~ One child-size, one adult-size, and one large adult-size sphygmomanometer;
- ~~25.30.~~ One stethoscope;
- ~~26.31.~~ One heavy duty scissors capable of cutting clothing, belts, or boots;
- ~~27.32.~~ Two blankets;
- ~~33.~~ One thermal absorbent blanket with head cover or blanket of other appropriate heat-reflective material;
- ~~28.34.~~ Two sheets;
- ~~29.35.~~ Body substance isolation equipment, including:
 - a. Two pairs of non-sterile disposable gloves;
 - b. Two gowns;
 - c. Two masks that are at least as protective as a National Institute for Occupational Safety and Health-approved N-95 respirator, which may be of universal size;

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- d. Two pairs of shoe coverings; and
- e. Two sets of protective eye wear;
- ~~30.36.~~ At least three pairs of non-latex gloves; and
- ~~31.~~ A wheeled, multi-level stretcher that is:
 - a. Suitable for supporting a patient at each level;
 - b. At least 69 inches long and 20 inches wide;
 - c. Rated for use with a patient weighing up to or more than 350 pounds;
 - d. Adjustable to allow a patient to recline and to elevate the patient's head and upper torso to an angle at least 70 ~~from~~ the horizontal plane;
 - e. Equipped with a mattress that has a protective cover;
 - f. Equipped with at least two attached straps to secure a patient during transport; and
 - g. Equipped to secure the stretcher to the interior of the vehicle during transport using the fastener required under R9-25-1002(36).
- B.** In addition to the equipment and supplies in subsection (A), a ground ambulance vehicle equipped to provide BLS shall contain at least:
 - 1. The minimum supply of agents required in Table ~~4 in R9-25-503 5.2~~ for an ~~EMT-B~~ EMT;
 - 2. By January 1, 2016, the capability of providing automated external defibrillation;
 - ~~2.3.~~ Two 3 mL syringes; and
 - ~~3.4.~~ Two 10-12 mL syringes.
- C.** In addition to the equipment and supplies in subsection (A), a ground ambulance vehicle equipped to provide ALS shall contain at least the minimum supply of agents required in Table ~~4 in R9-25-503 5.2~~ for the highest level of service to be provided by the ambulance's crew and at least the following:
 - 1. Four intravenous solution administration sets capable of delivering 10 drops per cc;
 - 2. Four intravenous solution administration sets capable of delivering 60 drops per cc;
 - 3. Intravenous catheters ~~of various in:~~
 - a. Three different sizes from 14 gauge to 20 gauge, and
 - b. Either 22 or 24 gauge;
 - 4. One child-size and one adult-size intraosseous needle;
 - ~~4.5.~~ Venous tourniquet;

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- ~~5-6.~~ One endotracheal tube in each size from 3.0 mm to 9.0 mm Two endotracheal tubes in each of the following sizes: 2.5 mm, 3.0 mm, 3.5 mm, 4.0 mm, 4.5 mm, 5.0 mm, 5.5 mm, 6.0 mm, 7.0 mm, 8.0 mm, and 9.0;
- 7. One pediatric-size and one adult-size stylette for endotracheal tubes;
- 8. End tidal CO2 monitoring/capnography equipment with capability for pediatric and adult patients;
- ~~6-9.~~ One laryngoscope with blades in sizes 0-4, straight or curved or both;
- ~~7-10.~~ One ~~adult~~ pediatric-size and one adult-size Magill forceps;
- ~~8-11~~ One scalpel;
- ~~9-12.~~ One portable, battery-operated cardiac monitor-defibrillator with strip chart recorder and adult and pediatric EKG electrodes and defibrillation capabilities;
- ~~10-13.~~ Electrocardiogram leads;
- 11. ~~One blood glucose testing kit;~~
- ~~12-14.~~ The following syringes:
 - a. Two 1 mL tuberculin,
 - b. Four 3 mL,
 - c. Four 5 mL,
 - ~~e-d.~~ Four 10-12 mL,
 - ~~d-e.~~ Two 20 mL, and
 - e-f. Two 50-60 mL;
- ~~13-15~~ Three 5 micron filter needles; and
- ~~14-16.~~ Assorted sizes of non-filter needles.

- D.** A ground ambulance vehicle shall be equipped to provide, and capable of providing, voice communication between:
- 1. The ambulance attendant and the dispatch center;
 - 2. The ambulance attendant and the ground ambulance service's assigned medical direction authority, if any; and
 - 3. The ambulance attendant in the patient compartment and the ground ambulance service's assigned medical direction authority, if any.

R9-25-1004. Minimum Staffing Requirements for Ground Ambulance Vehicles (A.R.S. §§ 36-2201(4), 36-2202(A)(5))

When transporting a patient, a ground ambulance service shall staff a ground ambulance vehicle according to A.R.S. § ~~36-2202(F)~~ 36-2202(J).