

Chapter HSS 112

LICENSING OF EMERGENCY MEDICAL TECHNICIANS- PARAMEDIC AND APPROVAL OF EMERGENCY MEDICAL TECHNICIAN-PARAMEDIC OPERATIONAL PLANS

HSS 112.01	Authority and purpose	HSS 112.06	EMT-paramedic training
HSS 112.02	Applicability	HSS 112.07	EMT-paramedic operational plan
HSS 112.03	Definitions	HSS 112.08	Denials and sanctions
HSS 112.04	Licensing of EMTs-paramedic	HSS 112.09	Waivers
HSS 112.05	EMT-paramedic training permits		

Note: Chapter H21 was repealed and recreated as Ch. HSS 112, by emergency rule effective July 1, 1990. Chapter H21 as it existed on January 31, 1991 was repealed and a new chapter HSS 112 was created effective February, 1991.

HSS 112.01 Authority and purpose. This chapter is promulgated under the authority of ss. 140.05 (3) and 146.50 (4) (c), (5) (b) and (d) 3, (6) (b) 2 and (13), Stats., to establish standards for emergency medical technicians-paramedic (EMTs-paramedic) and for approval of county, city, town, village and hospital emergency medical service plans that propose to use EMTs-paramedic to deliver emergency medical care.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.02 Applicability. This chapter applies to any person who applies for or holds an EMT-paramedic license or training permit or is involved in the development or operation of an ambulance service using EMTs-paramedic to deliver emergency medical care.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.03 Definitions. In this chapter:

(1) "Ambulance" has the meaning specified in s. 146.50 (1) (a), Stats., namely, an emergency vehicle, including any motor vehicle, boat or aircraft, whether privately or publicly owned, which is designed, constructed or equipped to transport sick, disabled or injured individuals.

(2) "Ambulance service" has the meaning specified in s. 146.55 (1) (a), Stats., namely, the business of transporting sick, disabled or injured individuals by ambulance to or from facilities or institutions providing health services.

(3) "Ambulance service provider" has the meaning specified in s. 146.50 (1) (c), Stats., namely, a person engaged in the business of transporting sick, disabled or injured individuals by ambulance to or from facilities or institutions providing health services.

(4) "Approved plan" means the EMT-paramedic operational plan.

(5) "Certified training center" means a medical or educational institution or other organization approved by the department to conduct EMT-paramedic training.

(6) "Defibrillation" means the administration of an electrical impulse to an individual's heart for the purpose of stopping ventricular fibrillation.

(7) "Department" means the Wisconsin department of health and social services.

(8) "EMT-paramedic" or "emergency medical technician-paramedic" means a person who is licensed under s. 146.50, Stats., and this chapter to perform the functions specified in s. 146.50 (6m) (c), Stats., and this chapter related to the administration of emergency medical procedures in a prehospital setting and the handling and transporting of sick, disabled or injured persons.

(9) "EMT-paramedic operational plan" means the plan required under s. 146.55 (2) (a), Stats., for training and using EMTs-paramedic to deliver emergency medical care in a specified service area.

(10) "EMT-paramedic refresher training" means training required for EMTs-paramedic under s. HSS 112.04 (4) (f) 1 as a condition for license renewal.

(11) "EMT-paramedic training" means a department approved training course consisting of classroom, clinical and supervised field training and experience which will qualify an individual for examination and an EMT-paramedic license.

(12) "Individual" means a natural person, and does not include a firm, corporation, association, partnership, institution, public agency, joint stock association or any other group of individuals.

(13) "Medical control" means direction, through verbal orders, supervision and quality assurance, by the medical director or a physician designee of the medical director, of the activities of an EMT-paramedic.

(14) "Medical control hospital" means an acute care hospital or hospitals named in an approved plan as the hospital or hospitals with a physician on call 24-hours-a-day, 7-days-a-week to furnish medical information and direction to EMTs-paramedic by direct voice contact.

(15) "Medical director" means the physician who trains, medically coordinates, directs, supervises, establishes standard operating procedures for, reviews the performance of and designates physicians for the day-to-day direction and supervision of EMTs-paramedic and ambulance service providers functioning under an approved operational plan.

(16) "National standard curriculum for training EMTs-paramedic" means the *Emergency Medical Technician — Paramedic: National Standard Curriculum*, August 1986, published by the national highway traffic safety administration of the U.S. department of transportation.

Note: The U.S. Department of Transportation National Highway Traffic Safety Administration's national standard curriculum for training EMTs-paramedic may be consulted at the offices of the Department's Bureau of Environmental Health or at the Secretary of State's Office or the Revisor of Statutes Bureau. The curriculum may be purchased from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325.

(17) "Person" has the meaning specified in s. 146.50 (1) (L), Stats.

(18) "Physician" means a person licensed to practice medicine or osteopathy under ch. 448, Stats.

(19) "Physician's assistant" means a person certified under ch. 448, Stats., to perform as a physician's assistant.

(20) "Primary response time" means the time elapsed from receipt by an ambulance service provider of a call for ambulance service until the first ambulance reaches the location of the patient.

(21) "Registered nurse" means a person who is licensed as a registered nurse under ch. 441, Stats.

(22) "Secondary response time" means the time elapsed from the receipt by an ambulance service provider of a call for ambulance service until the ambulance reaches the location of the patient when that ambulance is not the first ambulance dispatched to and reaching the location of the patient.

(23) "Standard operating procedures" means the written medical care and transportation instructions endorsed by the medical director and included in an approved plan in accordance with which EMTs-paramedic provide emergency medical care to patients and transport patients.

(24) "Training director" means a physician who has been designated by a certified training center to provide medical direction and coordination for the training of EMTs-paramedic.

(25) "Training program coordinator" means the person designated by the medical director or training director and certified training center who is responsible for administration and operation of an EMT-paramedic training course.

(26) "Ventricular fibrillation" means a disturbance in the normal rhythm of the heart which is characterized by rapid, irregular and ineffective twitching of the lower chambers, or ventricles, of the heart.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.04 Licensing of EMTs-paramedic. (1) APPLICATION. An individual requesting a license to act as an EMT-paramedic shall:

- (a) Apply on a form provided by the department;
- (b) Be at least 18 years of age;
- (c) Subject to ss. 111.321, 111.322 and 111.335, Stats., not have an arrest or conviction record;
- (d) Present documentation of successful completion of EMT-paramedic training approved under s. HSS 112.06 (2) within 24 months prior to application, or equivalent training acceptable to the department. In this paragraph, "equivalent training" means training in all areas listed under s. HSS 112.06 (3);
- (e) Present documentation of successful completion of a department approved EMT-paramedic written and oral examination; and
- (f) Provide any additional information requested by the department during its review of the application.

(2) EXAMINATION. (a) An examination for an EMT-paramedic license shall consist of written and oral portions.

(b) The written examination shall be administered by the department at a time and place fixed by the department.

(c) The oral examination shall be administered by one physician with knowledge of the skills and practice of the EMT-paramedic and one licensed EMT-paramedic appointed by the department.

(d) An individual who fails to achieve a passing grade on either portion of the required examination may request reexamination and may be reexamined not more than 2 times at not less than 30 day intervals. An applicant who fails to achieve a passing grade on the second reexamination may not be admitted for further examination until the individual presents documentation of further EMT-paramedic training or education acceptable to the department.

(3) **ACTION BY THE DEPARTMENT.** Within 90 days after receiving a complete application for an EMT-paramedic license, the department shall either approve the application and issue the license or deny the application. If the application for a license is denied, the department shall give the applicant reasons, in writing, for the denial. In this subsection, "complete application" means a completed application form and documentation that the requirements of sub. (1) (b) to (f) are met.

(4) **RENEWAL OF A LICENSE.** (a) *Notice of renewal.* The department shall send an application form for biennial renewal of license to the last address shown for the licensee in the department's records. Failure to receive notification does not relieve the licensee of the responsibility to maintain a current license.

(b) *Requirements for renewal.* To renew an EMT-paramedic license, a licensee shall, by June 30 of the even-numbered year following initial licensing and every 2 years thereafter, file with the department:

1. An application for renewal on a form prescribed by the department;
2. Documentation of current certification at the American heart association basic cardiac life support course C level or the American red cross cardiopulmonary resuscitation for the professional rescuer level;
3. Documentation that the licensee has, during the biennial period immediately preceding application, successfully completed the continuing training requirements specified under par. (f) 1;
4. A statement from the medical director of an approved EMT-paramedic program that is operating, attesting to the fact that the licensee retains proficiency in basic life support as defined in s. 146.50 (1) (d), Stats., and EMT-paramedic skills specified in s. 146.50 (6m) (c), Stats., and is authorized by the medical director of the EMT-paramedic system in which the licensee functions to use those skills; and
5. Documentation that the licensee meets any additional eligibility requirements for being licensed specified in s. 146.50, Stats., or this chapter.

(c) *Failure to submit materials by license expiration date.* A licensee who fails to submit the materials described in par. (b) by the renewal date may not represent himself or herself as, function as or perform the duties of a licensed EMT-paramedic after the date of license expiration.

(d) *Late renewal.* 1. During the first year following license expiration, a license shall be renewed if the licensee files all of the following with the department:

- a. An application for renewal on a form prescribed by the department;
- b. An affidavit that the licensee has not acted as an EMT-paramedic during the period in which the license was expired;
- c. Documentation of current certification at the American heart association basic cardiac life support course C level or the American red cross cardiopulmonary resuscitation for the professional rescuer level;
- d. Documentation that the licensee has, within the 24 months immediately preceding application, successfully completed the continuing training requirements specified under par. (f) 1;
- e. A statement from the medical director of an approved EMT-paramedic operational program attesting to the fact that the licensee retains proficiency in basic life support as defined in s. 146.50 (1) (d), Stats., and EMT-paramedic skills authorized by the medical director of the EMT-paramedic system in which the licensee functions; and
- f. Documentation that the licensee meets any additional eligibility requirements for licensure specified in s. 146.50, Stats., or this chapter.

2. Granting of late renewal under this paragraph does not exempt the licensee from the responsibility to complete the refresher training required under par. (f) 1 within the biennial period for which the renewal license is issued in order to qualify for renewal on the next renewal date.

(e) *Reinstatement of expired license.* 1. A license which has been expired for more than one year but less than 4 years shall be reinstated if the licensee files with the department:

- a. A reinstatement application on a form prescribed by the department;
- b. An affidavit that the applicant has not acted as an EMT-paramedic during the period in which the license was expired;
- c. Documentation of current certification at the American heart association basic cardiac life support course C level or the American red cross cardiopulmonary resuscitation for the professional rescuer level;
- d. Documentation that the applicant has, within the 24 months immediately preceding application, successfully completed the refresher training requirements specified under par. (f) 1;
- e. A statement from that in operating under an approach plan, the medical director of an EMT-paramedic operational plan system attesting to the fact that the licensee retains proficiency in basic life support as defined in s. 146.50 (1) (d), Stats., and in EMT-paramedic skills specified in s. 146.50 (6m) (c), Stats., and is authorized by the medical director of the EMT-paramedic system in which the licensee functions;
- f. Documentation that the licensee has successfully completed a written and practical skills examination administered or approved by the department following successful completion of the continuing training required under par. (f) 1; and
- g. Documentation that the licensee meets any additional eligibility requirements for a license specified in s. 146.50, Stats., or this chapter.

2. Being granted reinstatement of a license under this paragraph does not exempt the licensee from the responsibility to complete the continuing training requirements specified under par. (f) 1 within the biennial period for which the reinstated license is issued in order to qualify for renewal on the next renewal date.

3. A license which has been expired for more than 4 years may be reinstated only if the applicant has successfully completed the training and examination requirements for the initial EMT-paramedic license within the 24 months immediately preceding application for reinstatement.

(f) *Refresher training requirements.* 1. To be eligible for renewal of an EMT-paramedic license, the licensee shall, during the biennial period when the license is in effect, successfully complete the following:

a. Instruction, once during the biennium, in advanced cardiac life support which meets the standards for certification established by the American heart association; and

b. An additional 48 hours of training provided by a certified training center and medically directed by a physician, which is based on and includes the knowledge and skills objectives contained in the national standard curriculum for training EMTs-paramedic, as approved by the medical director or the department.

2. A licensee who received an initial EMT-paramedic license less than 18 months prior to the license expiration date shall be considered to have completed the requirements specified in sub. 1 if he or she provides documentation of certification as required in par. (b) 2 and training as required in sub. 1 a and a total of at least 2 hours of refresher training acceptable under sub. 1 b for each month the license has been in effect up to the expiration date and otherwise qualifies for license renewal.

3. A licensee who submits evidence of successful completion, within the 24 months immediately prior to filing a renewal application, of an EMT-paramedic training course, including the knowledge and skills objectives of the national standard curriculum for training EMTs-paramedic, as approved by the department, shall be considered to have met the requirement of sub. 1 b.

4. A licensee who, on a single attempt and within 90 days prior to the date of license expiration, successfully completes an EMT-paramedic written and practical skills examination administered or approved by the department to qualify a person for a license issued by the department may substitute that completion for the requirement specified in sub. 1 b. If the licensee fails the examination, he or she is ineligible for renewal and shall be required to successfully complete the continuing education requirement under sub. 1 b and the examination to become eligible for license renewal.

(g) *Granting of emergency medical technician-basic or intermediate license.* A licensee who does not renew an EMT-paramedic license may become licensed as an emergency medical technician-basic or emergency medical technician-intermediate if, prior to expiration of the EMT-paramedic license, the licensee:

1. Completes all refresher training required for the license sought or completes all refresher training required for renewal of an EMT-paramedic license; and

2. Files an application for renewal of the license sought which meets the requirements specified in s. 146.50, Stats., and ch. HSS 110 or 111, as appropriate.

Note: Copies of the form required to apply for issuance or renewal of an EMT-paramedic license are available without charge from the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.05 EMT-paramedic training permits. (1) APPLICATION. An individual requesting an EMT-paramedic training permit shall:

- (a) Apply on a form provided by the department;
- (b) Be at least 18 years of age;
- (c) Subject to ss. 111.321, 111.322 and 111.335, Stats., not have an arrest or conviction record;
- (d) Present documentation of at least one year of experience in emergency care and transportation as a licensed emergency medical technician, or its equivalent approved by the department, prior to entry into EMT-paramedic training;
- (e) Present documentation of enrollment in department-approved EMT-paramedic training as evidenced by the signature of the training director of the training course on the training permit application form;
- (f) Present documentation of employment by a licensed ambulance service provider operating under an approved EMT-paramedic operational plan as evidenced by the signature of the responsible party for the ambulance service provider on the training permit application form; and
- (g) Provide any additional information requested by the department during its review of the application.

(2) ACTION BY THE DEPARTMENT. Within 90 days after receiving a complete application for an EMT-paramedic training permit, the department shall either approve the application and issue the permit or deny the application. If the application for a permit is denied, the department shall give the applicant reasons, in writing, for the denial. In this subsection, "complete application" means a completed application form and documentation that the requirements of sub. (1) (b) to (g) are met.

(3) RESTRICTIONS. (a) An individual holding an EMT-paramedic training permit may perform the actions authorized for an EMT-paramedic only if the medical director or a training instructor designated by the medical director or training director is present and giving direction. The training instructor shall be licensed at least to the EMT-paramedic level.

(b) An individual holding an EMT-paramedic training permit is not considered licensed as an EMT-paramedic for purposes of s. HSS 112.07 (2) (p).

(4) DURATION OF PERMIT. (a) An EMT-paramedic training permit shall be valid for one year and may be renewed twice for an additional year each time by application made on a form provided by the department and with verification acceptable to the department that the indi-

vidual is satisfactorily participating in an approved EMT-paramedic training course.

(b) An EMT-paramedic training permit which has been in force for 36 months shall expire regardless of the individual's enrollment in an EMT-paramedic training course and may not be further extended or renewed.

Note: Copies of the form required to apply for issuance or renewal of an EMT-paramedic training permit are available without charge from the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.06 EMT-paramedic training. (1) TRAINING CENTER APPROVAL.

(a) EMT-paramedic training shall be provided by training centers certified by the department under this subsection.

(b) Any Wisconsin vocational, technical and adult education college, any other public or private school or college or any hospital may apply to the department for certification to provide EMT-paramedic training or to offer EMT-paramedic training courses.

(c) Application for certification shall be made by letter addressed to the department which shall include or have attached the following:

1. A description of the capabilities of the training center to train EMTs-paramedic in the provision of emergency medical care in prehospital and hospital settings, including training in:

- a. Patient assessment skills;
- b. Administration of intravenous fluids;
- c. Administration of parenteral injections;
- d. Gastric and endotracheal intubation;
- e. Rescue, advanced emergency care and resuscitation;
- f. Cardiac rhythm interpretation and defibrillation; and
- g. Specific medications;

2. A signed commitment to provide EMT-paramedic training in accordance with the national standard curriculum for training EMTs-paramedic and to comply with relevant requirements of s. 146.50, Stats., and this chapter;

3. Identification and qualifications of the Wisconsin licensed physician who will function as medical director of the training center, with responsibility for medical coordination, direction and conduct of the EMT-paramedic training program. The medical director of the EMT-paramedic operational plan system may serve also as the training center medical director. Materials shall include:

a. Endorsement of the training center medical director by the training center and by the program medical director, if different;

b. A signed commitment by the training center medical director to accept the responsibilities of serving as training center medical director; and

c. A copy of the training center medical director's resume; and

4. Identification and qualifications of the person who will function as coordinator of the EMT-paramedic training with specifications of that person's responsibilities, including a copy of that person's resume. The coordinator shall:

a. Be trained or licensed to at least the EMT-paramedic level, with knowledge of and experience in using EMT-paramedic skills in the emergency setting. Physicians, registered nurses and physicians assistants, besides EMTs-paramedic, are considered to be trained to at least the EMT-paramedic level;

b. Be designated by the training center medical director and approved by the system medical director, if different; and

c. Have overall responsibility for day-to-day coordination and administration of all aspects of the training course.

Note: An application for certification of an EMT-paramedic training center should be sent to the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309.

(d) Within 90 days after receiving a complete application for certification of an EMT-paramedic training center, the department shall either approve the application and issue the certification or deny the application. If the application is denied, the department shall give the applicant reasons, in writing, for the denial.

(e) Approval by the department of the proposed training center is a prerequisite for initiation of EMT-paramedic training.

(2) TRAINING COURSE APPROVAL. (a) Each EMT-paramedic training course offered by a training center certified under sub. (1) is subject to approval by the department under this subsection.

(b) Application for course approval shall be made by submitting to the department the following:

1. Either a copy of the course curriculum or a statement that the national standard curriculum for training EMTs-paramedic will be used verbatim, and identification of the number of hours devoted to classroom training, clinical training and supervised field experience. If a copy of the course curriculum is submitted it shall include:

a. Content and behavioral objectives of the course, including classroom, clinical and supervised field experience phases of training;

b. The specific skills and drugs to be covered; and

c. Hours of instruction for each phase of training;

2. A description of training program operations, including:

a. A statement of how students will be screened for acceptance into the training program.

b. Training and experience prerequisites for the course;

c. In regard to classroom training: its location; the conduct of the training; and a list of instructors available to present each topic with their qualifications;

d. In regard to clinical experience: its location and how it will be conducted, the emergency care and training capabilities of the teaching hos-

pital or hospitals, the clinical areas available for hands-on experience and observation, with all skills specified in the curriculum to involve hands-on training, the identity and qualifications of the person supervising students' clinical experience and keeping records of student participation, with a copy of the form prescribed by the department for use by the training center in documenting clinical experience received; and

e. In regard to supervised field experience: how it will be conducted and its content, and the qualifications of the person who will supervise the field experience who may be a physician, a registered nurse, a physician's assistant or, if approved in writing by the training center medical director, an EMT-paramedic experienced in providing emergency care; and

3. A description of how student performance and practical competencies will be evaluated and how the effectiveness of the training program will be evaluated.

Note: The materials that comprise an application for EMT-paramedic course approval should be sent to the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309. Copies of the form for documenting the clinical experience received by students may be obtained from the same office.

(c) Within 90 days after receiving a complete application for approval of an EMT-paramedic training course, the department shall either approve the application and issue the certification or deny the application. If the application is denied, the department shall give the applicant reasons, in writing, for the denial.

(3) TRAINING COURSE CONTENT AND HOURS. (a) An EMT-paramedic training course shall include classroom, clinical and supervised field experience in the skills and medications outlined in the national standard curriculum for training EMTs-paramedic and any additional skills or medications approved by the training program medical director.

(b) The training course shall include content and behavioral objectives at least equivalent to the following sections of the national standard curriculum for training EMTs-paramedic:

1. Division 1 - Prehospital environment:
 - a. Roles and responsibilities;
 - b. EMS systems;
 - c. Medical/legal considerations;
 - d. EMS communications;
 - e. Rescue;
 - f. Major incident response; and
 - g. Stress management.
2. Division 2 - Preparatory:
 - a. Medical terminology;
 - b. General patient assessment;
 - c. Airway and ventilation;
 - d. Pathophysiology of shock; and

- e. General pharmacology.
- 3. Division 3 - Trauma:
 - a. Trauma; and
 - b. Burns.
- 4. Division 4 - Medical:
 - a. Respiratory system;
 - b. Cardiovascular system;
 - c. Endocrine emergencies;
 - d. Nervous system;
 - e. Acute abdomen;
 - f. Anaphylaxis;
 - g. Toxicology, alcoholism and drug abuse;
 - h. Infectious disease;
 - i. Environmental injuries;
 - j. Geriatric/gerontology; and
 - k. Pediatrics.
- 5. Division 5 - OB/GYN/neonatal: a. OB/GYN/neonatal.
- 6. Division 6 - Behavioral: a. Behavioral emergencies.

(c) The course shall include a minimum of 750 hours of instruction, divided among classroom, clinical and supervised field training.

(d) Departmental approval of the proposed training course shall be a prerequisite to the initiation of EMT-paramedic training. Approval of the training course shall include approval of curriculum, procedures, administrative details and guidelines necessary to ensure a standardized program.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.07 EMT-paramedic operational plan (1) PLAN SUBMISSION. A county, city, town, village, hospital or any combination of these which seeks to use EMTs-paramedic for the delivery of emergency care and transportation shall first submit to the department an EMT-paramedic operational plan for department review and approval. Department approval of the plan shall be a prerequisite to initiation of EMT-paramedic training and service provision.

(2) **REQUIRED ELEMENTS.** To qualify for approval, the EMT-paramedic operational plan shall:

(a) Identify the persons submitting the plan;

(b) Identify and describe the qualifications of the medical director, medical control hospital or hospitals and the physicians designated by the medical director to provide day-to-day medical control;

(c) Identify and describe the qualifications of the certified training center and its relationship to the medical control hospital or hospitals;

(d) Identify and describe the qualifications of the training director, training program coordinator and designated clinical and supervised field experience training instructors;

(e) Identify and describe the licensed ambulance service provider or providers planning to use EMT-paramedic personnel and the service area covered by each provider;

(f) Describe the classroom and the clinical and supervised field training elements of the training program to be used, including content, behavioral objectives and hours involved in each element;

(g) Describe the communications system to be used in providing medical control to EMT-paramedic personnel;

(h) Describe the methods by which continuing education and continuing competency of EMT-paramedic personnel will be assured;

(i) Describe the relationship of the proposed EMT-paramedic services to other emergency medical and public services in the area covered by the plan;

(j) Document commitment to the proposed program and include endorsement by local and regional medical, governmental and emergency medical service agencies and authorities;

(k) Document that insurance coverage required by ss. 146.50 (6) (c) and 146.55 (7), Stats., is in force or will be in force when provision of EMT-paramedic services begins;

(l) Document that all ambulances to be used by EMTs-paramedic have been inspected by the Wisconsin department of transportation within the 12 months preceding submission of the plan and meet the requirements of ch. Trans 309;

(m) Provide assurances that all ambulances to be used by EMTs-paramedic will carry equipment and supplies required to effectively render EMT-paramedic services including, at a minimum:

1. Cardiac monitor with tape printout;
2. Defibrillator;
3. Intravenous administration kits;
4. Intubation equipment as specified by the medical director; and
5. Medications and drugs specified in the standard operating procedures endorsed by the medical director;

(n) Document that each ambulance service provider included in the plan uses an ambulance run report form approved by the department;

(o) Document that there will be instantaneous 2-way radio voice communication between an ambulance and the hospital and medical control physician, including, in addition to a mobile radio in the ambulance, at least one portable 2-way voice radio capable of being carried to and operated from alongside the patient;

(p) Provide assurances that at least 2 licensed EMTs-paramedic will be present whenever a licensee functions as an EMT-paramedic. A physician, registered nurse or physician's assistant trained in advanced cardiac life support and designated by the medical director may replace one of the EMTs-paramedic;

(q) Document that the service area to be covered by EMTs-paramedic has a population of at least 40,000, with EMTs-paramedic providing a primary response only in areas in which the usual primary response time for the EMT-paramedic ambulance is 10 minutes or less and a secondary response only in those areas in which the usual secondary response time is between 10 and 20 minutes. In this paragraph, "usual" means for at least 90% of responses;

(r) Include written mutual aid and backup agreements with other ambulance services in the area included in the plan; and

(s) Document that each ambulance service provider providing EMT-paramedic service maintains sufficient ambulances, equipment and licensed EMTs-paramedic to provide EMT-paramedic service on a 24-hour-a-day, 7 day- a-week basis.

Note: EMT-paramedic operational plans should be submitted to the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309.

(3) REVIEW AND DECISION. (a) The department shall, within 90 days following receipt of a plan in complete form, approve or disapprove the plan and notify the applicant accordingly, in writing.

(b) The department's approval of a plan shall be based on the department's determination that the plan meets the requirements of this chapter and on a site visit to the area included in the plan.

(4) CONTINUED APPROVAL. Continuation of approval of an EMT-paramedic operational plan shall depend on continuous conformance of the plan with the requirements in sub. (2).

Note: A community planning guide to assist in the development of an EMT-paramedic operational plan is available without charge from the EMS Section, Division of Health, P.O. Box 309, Madison, WI 53701-0309.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.08 Denials and sanctions (1) LICENSE, PERMIT OR CERTIFICATION DENIAL, NONRENEWAL, SUSPENSION OR REVOCATION, OR REPRIMAND OF LICENSEE, PERMIT HOLDER OR CERTIFIED TRAINING CENTER. The department may deny, refuse to renew, suspend or revoke an EMT-paramedic license or training permit or a training center certification, or reprimand a licensee, permit holder or certified center after providing the applicant, licensee, training permit holder or certified center with prior written notice of the proposed action and written notice of opportunity for a hearing if the department finds that:

(a) The applicant, licensee, permit holder or certified center does not meet the eligibility requirements established in s. 146.50, Stats., or this chapter;

(b) The license, permit or certification was obtained through error or fraud;

(c) The licensee or permit holder violated any provision of s. 146.50, Stats., or this chapter;

(d) The licensee or permit holder has permitted, aided or abetted the commission of any unlawful act;

(e) The licensee or permit holder has engaged in conduct dangerous or detrimental to the health or safety of a patient or to members of the general public while operating or performing under the scope of the license or permit;

(f) The licensee has failed to maintain certification at the American heart association basic cardiac life support course C level or the American red cross cardiopulmonary resuscitation for the professional rescuer level, and acts as an EMT-paramedic; or

(g) The certified training center has failed to adhere to the requirements under s. HSS 112.06.

(2) EMERGENCY SUSPENSION OF LICENSE OR PERMIT. (a) The department may summarily suspend an EMT-paramedic license or EMT-paramedic training permit when the department has probable cause to believe that the licensee or permit holder has violated the provisions of s. 146.50, Stats., or this chapter and that it is necessary to suspend the license or permit immediately to protect the public health, safety or welfare.

(b) Written notice of the suspension and the right to request a hearing shall be sent to the licensee or permit holder. If the licensee, permit holder or certified center desires a hearing, a request for hearing shall be submitted in writing to and received by the department's office of administrative hearings within 30 days after the date of the notice of suspension. The office of administrative hearings shall schedule the hearing no later than 15 days after receiving the request for hearing unless both parties agree to a later date and shall provide at least 10 days prior notification of the date, time and place for the hearing. The hearing examiner shall issue a proposed or final decision within 10 days after the hearing. The suspension of the license or permit shall remain in effect until a final decision is rendered.

Note: The mailing address of the Office of Administrative Hearings is P.O. Box 7875, Madison, WI 53707.

(3) COMPLAINTS. The department may, upon receipt of a complaint or on its own volition, investigate alleged violations of s. 146.50, Stats., or this chapter.

(4) APPEAL. In the event that the department denies, refuses to renew, suspends under sub. (1) or revokes an EMT-paramedic license or training permit or a training center certification, or reprimands a licensee, permit holder or certified center, the applicant, licensee, permit holder or certified center may request a hearing under s. 227.42, Stats. The request for a hearing shall be submitted in writing to and received by the department's office of administrative hearings within 30 days after the date of the notice required under sub. (1).

Note: The mailing address of the Office of Administrative Hearings is P.O. Box 7875, Madison, WI 53707.

History: Cr. Register, January, 1991, No. 421, eff. 2-1-91.

HSS 112.09 Waivers. The department may waive any requirement of this chapter, upon written request, if the department finds that it is demonstrated that strict enforcement of the requirement will create an un-

Register, January, 1991, No. 421

reasonable hardship in meeting the emergency medical service needs of an area and that waiver of the requirement will not adversely affect the health, safety or welfare of patients or the general public.