

SILVER CROSS EMERGENCY MEDICAL SERVICES SYSTEM

TITLE: **AMBULANCE LICENSING REQUIREMENTS**

POLICY: **IDPH CODE 515.830**

- I) Vehicle Design
- 1) Each new vehicle used as an ambulance shall comply with the criteria established by the U.S. General Services Administration's Specification for Ambulance (KKK-A-1822F), with the exception of Section 3.16.2, Color, Paint and Finish.
 - 2) *A licensed vehicle shall be exempt from subsequent vehicle design standards or specifications required by IDPH in this Part, as long as said vehicle is continuously in compliance with the vehicle design standards and specifications originally applicable to that vehicle, or until said vehicle's title of ownership is transferred.*
 - 3) The following requirements listed in Specification KKK-A-1822F shall be considered mandatory in Illinois even though they are listed as optional in that publication:
 - A) Each vehicle will be equipped with either a battery charger or battery conditioner
 - B) Patient compartment checkout lights will be provided
 - C) An oxygen outlet will be provided above the secondary patient
 - D) Electric clock with sweep second hand will be provided.
- II) Equipment Requirements – Basic Life Support Vehicles: Each ambulance used as a Basic Life Support vehicle shall meet the following equipment requirements, as determined by IDPH by an inspection:
- 1) Stretchers, Cots, and Litters
 - A) Primary Patient Cot
 - B) Secondary Patient Stretcher
 - 2) Oxygen, portable
 - 3) Suction, portable (A manually operated suction device is acceptable if approved by IDPH)
 - 4) Medical Equipment
 - A) Squeeze bag-valve-mask ventilation unit with adult size transparent mask and child size bag-valve-mask ventilation unit with child, infant and newborn size masks
 - B) Lower-extremity traction splint, adult and pediatric sizes
 - C) Blood pressure cuff, one each, adult, child and infant sizes and gauge
 - D) Stethoscopes, two per vehicle

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- E) Pneumatic counterpressure trouser kit, adult size, optional
 - F) Long spine board with three sets of torso straps, 72" x 16" minimum
 - G) Short spine board (32" x 16" minimum) with two 9-foot torso straps, one chin and head strap or equivalent vest type (wrap around) per vehicle; extrication device optional
 - H) Airway, oropharyngeal – adult, child, and infant, sizes 00-5
 - I) Airway, nasopharyngeal with lubrication, sizes 12-34F
 - J) One adult, child and infant sized non-rebreather oxygen masks per vehicle
 - K) Three nasal cannulas, adult and child size, per vehicle
 - L) Bandage shears, one per vehicle
 - M) Extremity splints, adult, two long and short per vehicle
 - N) Extremity splints, pediatric, two long and short per vehicle
 - O) Rigid cervical collars – one pediatric, small, medium, and large sizes or adjustable size collars per vehicle. Shall be made of rigid material to minimize flexion, extension, and lateral rotation of the head and cervical spine when spine injury is suspected
 - P) Patient restraints, arm and leg, sets
 - Q) Pulse oximeter with pediatric and adult probes
 - R) AED or defibrillator that includes pediatric capability
- 5) Medical Supplies
- A) Trauma dressing – six per vehicle
 - B) Sterile gauze pads – 20 per vehicle, 4 inches by 4 inches
 - C) Bandages, soft roller, self-adhering type, 10 per vehicle, 4 inches by 5 yards
 - D) Vaseline gauze – two per vehicle, 3 inches by 8 inches
 - E) Adhesive tape rolls – two per vehicle

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- F) Triangular bandages or slings – five per vehicle
- G) Burn sheets – two per vehicle, clean, individually wrapped
- H) Sterile solution (normal saline) – four per vehicle, 500 cc or two per vehicle, 1,000 cc plastic bottles or bags
- I) Thermal absorbent blanket and head cover, aluminum foil roll or appropriate heat reflective material – minimum one
- J) Obstetrical kit, sterile – minimum one, pre-packaged with instruments and bulb syringe
- K) Cold packs, three per vehicle
- L) Hot packs, three per vehicle, optional
- M) Emesis basin – one per vehicle
- N) Drinking water – 1 quart, in nonbreakable container; sterile water may be substituted
- O) Ambulance emergency run reports – 10 per vehicle, on a form prescribed by IDPH or one that contains the data elements from IDPH-prescribed form as described in Section 515. Appendix E of this Part
- P) Pillows (may be inflatable) – two per vehicle, for ambulance cot
- Q) Pillowcases – two per vehicle, for ambulance cot
- R) Sheets – two per vehicle, for ambulance cot
- S) Blankets – two per vehicle, for ambulance cot
- T) CPR mask – one per vehicle, with safety valve to prevent backflow of expired air and secretions
- U) Urinal
- V) Bedpan
- W) Remains bag, optional
- X) Nonporous disposable gloves
- Y) Impermeable red biohazard-labeled isolation bag

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- Z) Face protection through any combination of masks and eye protection and field shields
 - AA) Suction catheters – sterile, single use, two each size: 6, 8, 10, 12, 14, 16 and 18F, plus three tonsil tip semi-rigid pharyngeal suction tip catheters per vehicle; all shall have a thumb suction control port
 - BB) Child and infant or convertible car seats
 - CC) Current equipment/drug dosage sizing tape or pediatric equipment/drug age/weight chart
 - DD) Flashlight, minimum 1 per vehicle, for patient assessment
- III) Equipment Requirements – Basic, Intermediate and Advanced Life Support Vehicles
Each ambulance used as a Basic Life Support vehicle, Intermediate Life Support vehicle or as an Advanced Life Support vehicle shall meet the requirements in subsections (II) and (III) of this Section and shall also comply with the equipment and supply requirements as set forth in System Policy 300-4 for BLS, 300-5 for ILS and 300-6 for ALS.
- IV) Equipment Requirements – Rescue and/or Extrication
The following equipment shall be carried on the ambulance, unless the ambulance is routinely accompanied by a rescue vehicle:
- 1) Wrecking bar, 24"
 - 2) Goggles for eye safety
 - 3) Flashlight – one per vehicle, portable, battery operated
 - 4) Fire Extinguisher – two per vehicle, ABC dry chemical, minimum 5-pound unit with quick release brackets. One mounted in driver compartment and one in patient compartment
- V) Equipment Requirements – Communications Capability
Each ambulance shall have reliable ambulance-to-hospital radio communications capability.
- VI) Equipment Requirements – Epinephrine
Refer to the current IDPH approved Standing Medical Orders (SMOs) and System Policies 300-4 for BLS, 300-5 for ILS, and 300-6 for ALS regarding the requirements of Epinephrine.
- VII) Personnel Requirements – See System Policy 300-70 for Staffing Requirements
Each ambulance provider that operates an emergency transport vehicle shall ensure with the EMS System that the agency providing emergency care at the scene and enroute to a hospital meets the requirements of this Policy.

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VIII) Operational Requirements

- 1) An ambulance that is transporting a patient to a hospital shall be operated in accordance with the requirements of the EMS Act and the Agency's IDPH approved System Plan.

- 2) At the time of application for initial or renewal licensure, the applicant or licensee shall submit to IDPH for approval:
 - A list containing the anticipated hours of operation for each vehicle covered by the license.

 - A current roster which lists the EMTs, Pre-Hospital RNs and/or physicians who are employed or available to staff each vehicle during its hours of operation, and shall include each staff person's name, license number, and daytime telephone number, and shall state whether such person is generally scheduled to be on site or on call.

 - An actual or proposed four-week staffing schedule shall also be submitted, which covers all vehicles, includes staff names from the submitted roster, and states whether each staff member is scheduled to be on site or on call during each work shift.

 - Licensees shall be required to obtain the EMS Medical Director's approval of their vehicles' hours of operation prior to submitting an application to IDPH. An EMS Medical Director may require specific hours of operation for individual vehicles to assure appropriate coverage within the System.

- 3) For each patient transported to a hospital, the ambulance staff shall, at a minimum, measure and record the information required in Section 515. Appendix E and as outlined below.
 - General information including but not limited to: agency and unit number, county, crash number (when available), date of call and incident location and type, destination location, type of medical control, transport and non-transport information, resource hospital, crew member identification number, incident number, patient zip code.

 - Response time information including: time call received, time dispatched, time enroute, arrival time at location, patient contact time, departure time from location, arrival time at destination.

 - Documentation of who, other than the crew, renders assistance at the scene and the nature of the assistance.

 - Patient assessment including but not limited to: initial vital signs (systolic, diastolic, pulse, respirations), skin condition, Glasgow Coma Scale, past medical history, current illness/symptom (chief and secondary), injury site and type, injury criteria, pupils and where the patient was sitting in the vehicle.

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- Patient information including but not limited to: gender, ethnic origin, date of birth, possible contributing factors to the injury/illness (i.e., motor vehicle, alcohol, equipment, HAZMAT, sports, etc.), protection used by the patient (i.e., seat belt, helmet, etc.), resuscitation status, and approximate pediatric weight.
 - Patient treatment including but not limited to: actual treatment rendered, medications administered, IV type, rate, site and attempts, EKG, body substance isolation, and CPR information (arrest witnessed, defibrillation, etc.), intubations and number of attempted intubations.
- 4) A licensee shall provide emergency service within the service area on a per-need basis without regard to the patient's ability to pay for such service.
- 5) A licensee shall provide documentation of procedures to be followed when a call for service is received and a vehicle is not available, including copies of mutual aid agreements with other ambulance providers.
- 6) A licensee shall not operate its ambulance at a level exceeding the level for which it is licensed (basic life support, intermediate life support, advanced life support), unless such vehicle is operated pursuant to an EMS System-approved in-field service level upgrade.
- 7) IDPH shall relicense qualifying ambulances each year. If the licensee has attained 90 percent compliance with the requirements of this Section on inspections for the previous five years and has no substantiated complaints against it, IDPH shall inspect the licensee's ambulances in alternate years, and the licensee shall self-inspect its ambulances in the other years. The licensee shall use IDPH's inspection form for self-inspection.
- IX) A licensee may use a replacement vehicle for up to 10 days without an IDPH inspection provided that IDPH is notified of the use of the vehicle by the second working day.
- X) Patients, individuals who accompany a patient, and emergency services personnel may not smoke while inside an ambulance or SEMSV. The Illinois Department of Public Health shall impose a civil penalty on an individual who violates this subsection in the amount of \$100. (Section 3.155(h) of the Act)
- XI) Any provider may request a waiver of any requirements in this Section per IDPH Administrative Code 515.150 as outlined below using the IDPH Equipment/Vehicle Waiver Request form.
- A) IDPH may grant a waiver to any provision of the Act or this Part for a specified period of time when it can be demonstrated that there will be no reduction in standards of medical care as determined by the EMS Medical Director or IDPH.

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- B) Any entity may apply in writing to IDPH for a waiver to specific requirements or standards for which it considers compliance to be a hardship. The applicant's EMS Medical Director shall state in writing whether he/she recommends or opposes the application for waiver, the reason for such recommendation or opposition, and how the waiver will or will not reduce the quality of medical care established by the Act and this Part.

- C) When granting a waiver, IDPH shall specify the regulation or portion thereof that is being waived, any alternate requirement that the waiver applicant shall meet, and any procedures or timetable that the waiver applicant shall follow to achieve compliance with the waived regulation.

- D) IDPH shall determine the length of any waiver that it grants, based on the nature and extent of the hardship and the medical needs of the community or areas in which the waiver applicant functions.

EFFECTIVE DATE: 12-07-12

REVISED DATE: 05-07-13

REVIEWED DATE: