

ARTICLE 44:05

AMBULANCE OPERATION

Chapter

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CHAPTER 44:05:01

DEFINITIONS

Section

44:05:01:01	Definitions.
44:05:01:02	Definition of unprofessional or dishonorable conduct.

44:05:01:01. Definitions. Words defined in SDCL 34-11-2 shall have the same meaning when used in this article. In addition, terms used in this article mean:

- (1) "Ambulance service director," a person in charge of the day-to-day management of a ground or air ambulance service;
- (2) "Attendants," ambulance personnel who have completed a course of instruction in emergency care approved by the department pursuant to SDCL 34-11-6 and who are responsible for the rendering of direct patient care to the sick or injured;
- (3) "C.F.R.," Code of Federal Regulations;

(4) "Department," the South Dakota Department of Health;

(5) "Emergency medical responder (EMR)," a person who has completed an emergency medical responder course approved by the department and who has successfully demonstrated entry-level competency through the NREMT and is certified by the department;

(6) "Emergency medical technician (EMT)," a person who has completed an emergency medical technician course approved by the department and who has successfully demonstrated entry-level competency through the NREMT and is ~~currently~~ certified by the department;

~~(6) "Emergency medical technician basic," a person who has successfully completed the 1994 United States Department of Transportation (USDOT) emergency medical technician basic course and is certified by the department;~~

~~(7) "Emergency medical technician basic course," the standard 1994 USDOT course of instruction in emergency medical care with written and practical examinations approved by the National Registry of Emergency Medical Technicians;~~

~~(8)~~(7) "EVOC," ~~the~~ an emergency vehicle operator course approved by the department consisting of a curriculum of ~~at least four hours of~~ didactic instruction and ~~four hours of~~ actual driving, developed to improve emergency vehicle driving skills;

(8) "Gross incompetence," general or severe lack of the ability, skill, or knowledge reasonably necessary to serve as an ambulance driver or attendant;

(9) "Licensee," a person or entity that has obtained and is in possession of a currently valid license to operate a ground or air ambulance service in this state;

(10) "Medical air transport," the transport of a patient by a licensed air ambulance when the patient, at the time of departure, is not in need of emergency medical care;

(11) "Medical director," a person licensed to practice medicine in this state under SDCL 36-4 who is responsible for providing medical supervision and direction to a licensed ambulance service;

(12) "National Registry of Emergency Medical Technicians (NREMT)," the National EMS Certification Agency responsible for validating entry-level competency of pre-hospital providers;

(13) "Primary response ground ambulance," or "ground ambulance," a motor vehicle operated over public roadways under the jurisdiction of this state that is in compliance with chapter 44:05:04 and is used to respond to medical emergencies and to transport the sick or injured;

~~(13)~~(14) "Response," ~~the act of responding to a request for emergency medical services~~ response of an ambulance vehicle and personnel to an emergency for the purpose of rendering medical care or transportation, or both, to someone ill or injured, including cancelled calls, no transports, and standby events where medical care may be rendered;

~~(14)~~(15) "Secondary response ground ambulance," a motor vehicle operated over public roadways under the jurisdiction of this state that is in compliance with chapter 44:05:04 and is used to respond to medical emergencies and to transport the sick or injured to a facility for medical treatment only in cases of mass disaster, scheduled transfer, or when primary response ground ambulances are not available;

~~(15) "Gross incompetence," general or severe lack of the ability, skill, or knowledge reasonably necessary to serve as an ambulance driver or attendant.~~

Source: 2 SDR 26, effective October 9, 1975; 6 SDR 93, effective July 1, 1980; 12 SDR 58, effective October 14, 1985; 20 SDR 204, effective June 9, 1994; 30 SDR 125, effective February 22, 2004; 41 SDR 218, effective July 1, 2015; 42 SDR 173, effective July 1, 2016.

General Authority: SDCL 34-11-5, 34-11-6.1.

Law Implemented: SDCL 34-11-6.1.

44:05:01:02. Definition of unprofessional or dishonorable conduct. The term, unprofessional or dishonorable conduct, as used in this chapter includes:

(1) Willfully betraying a professional confidence;

- (2) Conviction of any felony offense, any conviction of a criminal offense arising out of the practice of pre-hospital emergency medical care, or one in connection with any criminal offense involving moral turpitude;
- (3) Habits of intemperance or drug addiction, calculated in the opinion of the department to affect the licensee's practice of the profession;
- (4) Sustaining any physical or mental disability that renders the further practice of a licensee's profession dangerous;
- (5) Failure to comply with state or federal laws on keeping records regarding possessing and dispensing of narcotics, barbiturates, and habit-forming drugs;
- (6) Falsifying the medical records of a patient or any official record regarding possession and dispensing of narcotics, barbiturates, and habit-forming drugs or regarding any phase of medical treatment of a patient;
- (7) Presenting to the department any license, certificate, or diploma which was obtained by fraud or deception practiced in passing a required examination or which was obtained by the giving of false statements or information on applying for the license;
- (8) Illegally, fraudulently, or wrongfully obtaining a license required by this article by the use of any means, device, deception, or help in passing any examination or by making any false statement or misrepresentation in any application or information presented;
- (9) The exercise of influence within the EMR-patient relationship or EMT-patient relationship for the purposes of engaging a patient in sexual activity. For the purpose of this subdivision, the ~~patient~~ patient is presumed incapable of giving free, full, and informed consent to sexual activity with the EMR or EMT;
- (10) Engaging in gross or immoral sexual harassment or sexual contact;
- (11) Consistently providing or prescribing medical services or treatments which are inappropriate or unnecessary;

(12) Any practice or conduct that tends to constitute a danger to the health, welfare, or safety of the public or patients or engaging in conduct which is unbecoming a person certified to practice as an EMR or EMT;

(13) Discipline by another state, territorial, or provincial licensing board or the licensing board of the District of Columbia; and

(14) Violation of any state or federal statute or rule pertaining to the practice of pre-hospital emergency care.

Source: 30 SDR 125, effective February 22, 2004; 34 SDR 201, effective January 31, 2008.

General Authority: SDCL 34-11-5, 34-11-6.1.

Law Implemented: SDCL 34-11-6.1.

CHAPTER 44:05:03

PERSONNEL REQUIREMENTS

Section

44:05:03:01 Inspection of ambulance services.

44:05:03:02 Twenty-four hour, seven-day service required.

44:05:03:02.01 Mandatory response time.

44:05:03:02.02 Publication of phone number when not on 911.

44:05:03:02.03 Ground ambulance used exclusively on private property exempt from chapter.

44:05:03:03 Ambulance trip report forms.

44:05:03:04 Repealed.

44:05:03:04.01 Ambulance personnel minimum requirements.

44:05:03:04.02 Ambulance personnel minimum age requirement.

44:05:03:05 List of drivers and attendants required.

44:05:03:05.01 EMR certification.

44:05:03:05.02 EMR reciprocity.

44:05:03:05.03 EMR recertification.

44:05:03:05.04 EMR scope of practice.

44:05:03:05.05 EMT certification.

44:05:03:05.06 EMT reciprocity.

44:05:03:05.07 EMT recertification.

44:05:03:05.08 EMT scope of practice.

44:05:03:06 Repealed.

44:05:03:06.01 Repealed.

44:05:03:06.02 Repealed.

44:05:03:06.03 Repealed.

44:05:03:07 Repealed.

44:05:03:08 Periodic retraining required.

44:05:03:09 Repealed.

44:05:03:10 Revocation of certification.

44:05:03:01. Inspection of ambulance services. The department shall inspect as needed each ground and air ambulance service operating within this state for compliance with the provisions of this article ~~at least once every two years. In addition, the department may make other inspections as considered necessary~~ to protect the public safety.

Source: 2 SDR 26, effective October 9, 1975; 6 SDR 93, effective July 1, 1980; 20 SDR 204, effective June 9, 1994.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-5.

44:05:03:04.01. Ambulance personnel minimum requirements. On every call ~~response~~ a licensee must provide a minimum of one advanced life support personnel licensed pursuant to SDCL Chapter 36-4B or one EMT certified pursuant to SDCL 34-11-6 and one driver or EMR. The driver must complete a state-approved course to demonstrate competencies in:

- (1) Cardiopulmonary resuscitation (CPR) and automated external defibrillation (AED);
- (2) Health Insurance Portability and Accountability Act (HIPAA) compliance;
- (3) Infection control;
- (4) Patient movement;
- (5) Equipment and communication systems; and
- (6) Emergency vehicle operation.

A physician licensed pursuant to SDCL Chapter 36-4, physician assistant licensed pursuant to SDCL Chapter 36-4A, nurse licensed pursuant to SDCL Chapter 36-9, or certified nurse practitioner or certified nurse midwife licensed pursuant to SDCL Chapter 36-9A may replace any ~~advanced life support personnel or EMT ambulance service personnel~~ on any type of response.

Documentation of completion of driver competencies must be maintained by the licensee and available upon request.

Source: 42 SDR 173, effective July 1, 2016.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-5.

44:05:03:04.02. Ambulance personnel minimum age requirement. Any ambulance service personnel shall be at least eighteen years of age.

Source: 42 SDR 173, effective July 1, 2016.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-5.

44:05:03:05.01. EMR certification. The department may certify an EMR following completion of a department approved application. The application must include a current NREMT EMR certification and current CPR certification approved by the department.

Source:

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:05.02. EMR reciprocity. The department may grant reciprocity following completion of a department approved application. The application must include a current NREMT EMR certification card and current CPR certification approved by the department. A candidate holding a current state EMR certification must show proof of successfully completing the NREMT EMR examination at least once. EMR reciprocity may be granted following completion of a department approved application including current CPR certification approved by the department.

Source:

General Authority: SDCL 34-11-5.2.

Law Implemented: SDCL 34-11-5.2, 34-11-6

44:05:03:05.03. EMR recertification. An EMR shall submit an application and record of required continuing medical education hours approved by the department by September 30 biennially. The recertification year is based on the date issued by the NREMT or on the date the department granted reciprocity.

Source:

General Authority: SDCL 34-11-5.2.

Law Implemented: SDCL 34-11-5.2, 34-11-6.

44:05:03:05.04. EMR scope of practice. The emergency medical responder core scope of practice includes simple, noninvasive skills focused on lifesaving interventions for critical patients based on assessment findings. The emergency medical responder renders on-scene emergency care while awaiting additional emergency medical services response and may serve as part of the transporting crew, but not as the primary care provider. An emergency medical responder may not make decisions regarding the appropriate disposition of any patient. An emergency medical responder must function with an emergency medical technician or higher level personnel during the transportation of patients.

The following skills may be performed by an EMR:

- (1) Insertion of airway adjuncts intended to go into the oropharynx;
- (2) Use of positive pressure ventilation devices such as the bag-valve-mask;
- (3) Suction of the upper airway;
- (4) Supplemental oxygen therapy;
- (5) Use of unit dose auto-injectors for the administration of life saving medications intended for self or peer rescue in hazardous materials situations;
- (6) Cardiopulmonary Resuscitation;

- (7) Use of an automated external defibrillator;
- (8) Manual stabilization of suspected cervical spine injuries;
- (9) Manual stabilization of extremity fractures;
- (10) Bleeding control; and
- (11) Emergency moves.

Source:

General Authority: SDCL 34-11-5.2.

Law Implemented: SDCL 34-11-5.2, 34-11-6.

44:05:03:05.05. EMT certification. The department may certify an EMT following completion of a department approved application. The application must include a current NREMT EMT certification and current CPR certification approved by the department.

Source:

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:05.06. EMT reciprocity. The department may grant reciprocity following completion of a department approved application. The application must include a current NREMT EMT certification card and current CPR certification approved by the department. A candidate holding a current state EMT certification must show proof of successfully completing the NREMT EMT examination at least once. EMT reciprocity may be granted following completion of a department approved application including current CPR certification approved by the department.

Source:

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:05.07. EMT recertification. An EMT shall submit application and record of required continuing medical education hours approved by the department by March 31 biennially. The recertification year is based on the date the certificate was issued by the NREMT or on the date the department granted reciprocity.

Source:

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:05.08 EMT scope of practice. An emergency medical technician's core scope of practice includes basic interventions to reduce the morbidity and mortality associated with a medical response. Emergency care is based on assessment findings.

In addition to the skills listed in 44:05:03:05.04, the following skills may be performed by an EMT:

- (1) Insertion of airway adjuncts intended to go into the oropharynx or nasopharynx;
- (2) Insertion of supraglottic airway devices
- (3) Use of positive pressure ventilation devices;
- (4) Assistance to patients in taking their own prescribed medications;
- (5) Administration of the following over-the-counter medications with appropriate

medical oversight:

- (a) Oral glucose for suspected hypoglycemia; and

- (b) Aspirin for chest pain of suspected ischemic origin;
- (6) Use of unit dose auto-injectors for the administration of life saving medications intended for self or peer rescue in hazardous materials situations;
- (7) Use of epi-pens for a patient in anaphylaxis;
- (8) Use of an auto-injector or nasal spray for the administration of a narcotic antagonist to a patient suspected of narcotic overdose;
- (9) Application and inflation of the pneumatic anti-shock garment (PASG) for fracture stabilization; and
- _____ (10) Application and management of spinalization devices.

Source:

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:10. Revocation of certification. The department shall revoke the certification of any ~~emergency medical technician EMT or EMR certified in the State of South Dakota~~ found by the department to have engaged in any unprofessional or dishonorable conduct as defined in § 44:05:01:02. No person whose certification has been revoked pursuant to this rule is eligible to retest for their certification until all court-ordered sanctions or requirements, including incarceration or participation in the 24/7 program, have been discharged.

Source: 40 SDR 39, effective September 9, 2013.

General Authority: SDCL 34-11-5.2, 34-11-6.4.

Law Implemented: SDCL 34-11-5.2, 34-11-6.4.

CHAPTER 44:05:05

AIR AMBULANCES

Section

44:05:05:01	Criteria for aircraft.
44:05:05:02	Required certificate of airworthiness.
44:05:05:03	Securing of equipment.
44:05:05:04	Stretcher security.
44:05:05:05	Aircraft doors.
44:05:05:06	Interior height requirements.
44:05:05:07	Required lighting.
44:05:05:08	Required portable lights.
44:05:05:09	Levels of licensure.
44:05:05:10	Medical director required.
44:05:05:11	Attendant training required.
44:05:05:12	Required medical equipment.
44:05:05:13	Equipment storage.
44:05:05:14	Trip reports required.
44:05:05:15	Electrical power minimums.
44:05:05:16	Inverter requirements.
44:05:05:17	Length of licensing period.
44:05:05:18	Permit display.
44:05:05:19	Required inspection.
44:05:05:20	Ground ambulance component for air ambulance service.

44:05:05:21 Vehicle requirements for ground ambulance component.

44:05:05:22 Personnel requirements for ground ambulance component.

44:05:05:11. Attendant training required. Each basic life support air ambulance transport must have an attendant who has completed a course of instruction in emergency care approved by the department pursuant to SDCL 34-11-6. Each advanced life support air ambulance transport must have two licensed attendants, at least one of whom is currently licensed as ~~an emergency medical technician-paramedic~~ a paramedic.

A physician, nurse practitioner, physician assistant, registered respiratory therapist, or registered nurse who is currently licensed in South Dakota may replace the attendant on any basic life support or one or both attendants on any advanced life support transport with the written approval of the medical director of the air ambulance service.

Source: 16 SDR 147, effective March 18, 1990; 20 SDR 204, effective June 9, 1994; 30 SDR 125, effective February 22, 2004; 34 SDR 201, effective January 31, 2008; 41 SDR 218, effective July 1, 2015.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-5.

Cross-References:

Advanced life support personnel, SDCL 36-4B, art 20:61.

Physicians and surgeons, SDCL 36-4, art 20:47.

Physician assistants, SDCL 36-4A, art 20:52.

Registered and practical nurses, SDCL 36-9, art 20:48.

Nurse practitioners and midwives, SDCL 36-9A, art 20:62.