

4765-6-01

Procedures for additional services.

- (A) The board shall evaluate whether emergency medical responders, emergency medical technicians, advanced emergency medical technicians, and paramedics may perform additional services beyond those contained in Chapter 4765. of the Revised Code and Chapters 4765-12, 4765-15, 4765-16, and 4765-17 of the Administrative Code.
- (B) If the board approves additional services, it shall specify whether such services require prior written or verbal authorization. Additional services will be posted on the EMS scope of practice matrix located on the EMS web site at <http://www.ems.ohio.gov>. The board will also list any additional approved services in the respective EMS provider rules pertaining to scope of practice ~~on a yearly basis~~ during the next applicable five year review period.

4765-6-02

General provisions.

[Comment: For dates and availability of material incorporated by reference in this rule see rule 4765-1-03 of the Administrative Code.]

- (A) An EMS training program for a certificate to practice as an emergency medical responder, emergency medical technician, advanced emergency medical technician and paramedic shall meet all knowledge and skill standards set forth in rules 4765-12-05, 4765-15-05, 4765-16-06, and 4765-17-04 of the Administrative Code.
- (B) The "National EMS Education Standards" shall be used as a guideline for development of all EMS training curriculums.
- (C) An EMS training program shall be taught through an EMS accredited institution pursuant to section 4765.15 of the Revised Code and this chapter.
- (D) An EMS continuing education program shall be taught through an EMS accredited or EMS approved institution pursuant to section 4765.15 of the Revised Code and this chapter.
- (E) All EMS training programs shall be taught by a person who holds a certificate to teach at the level appropriate for the course, pursuant to section 4765.16 of the Revised Code and this chapter and Chapter 4765-18 of the Administrative Code.
- (F) An EMS training program for advanced emergency medical technician or paramedic, with the approval of the program director and program medical director, may accept previous training of the student, by documenting the student's competency in the objectives, as established by the board for the section that credit is given. The training program shall assess the student's competency through written and practical testing.
 - (1) Any student in an advanced emergency medical technician or paramedic program who is given credit for previous training, shall possess a certificate to practice as an emergency medical technician issued by the board pursuant to section 4765.30 of the Revised Code, prior to receiving credit for an advanced emergency medical technician or paramedic training program.
 - (2) No previous training credit shall be given to a student for certification as an emergency medical responder or emergency medical technician.

4765-6-03

Additional services in a declared emergency.

In the event of an emergency declared by the governor that affects the public's health, an EMS provider, certified in accordance with section 4765.30 of the Revised Code and Chapter 4765-8 of the Administrative Code, may perform immunizations and administer drugs or dangerous drugs, in relation to the emergency, provided the EMS provider is under physician medical direction and has received appropriate training regarding the administration of such immunizations and/or drugs.

4765-6-04

Research study impacting scope of practice.

- (A) The board may allow emergency medical responders, emergency medical technicians, advanced emergency medical technicians, and paramedics to perform services beyond their respective scopes of practice, as set forth in Chapter 4765. of the Revised Code and rules 4765-12-04, 4765-15-04, 4765-16-04, and 4765-17-03 of the Administrative Code, pursuant to a board-approved research study.
- (B) An entity applying to become a board-approved research study, in furtherance of paragraph (A) of this rule, must meet the following requirements:
- (1) Submit a research proposal to the board, which shall include, at a minimum, goals and objectives, training requirements, participating entities, and implementation plan;
 - (2) Submit a written statement from the medical director(s) of the EMS organization(s) or training program(s) that supports the research study;
 - (3) Submit a written statement regarding how the research proposal contains activities outside the scope of practice and outline the mechanisms by which EMS providers will be trained in such skills or activities;
 - (4) Submit evidence that an institutional review board has approved the research study;
 - (5) Propose clear starting and ending dates for the research study;
 - (6) Agree to brief all participants on the specific boundaries within which the research study can or cannot be conducted;
 - (7) Upon request, appear before the board and/or board committees to answer additional questions or present additional information regarding the research study;
 - (8) Agree to maintain documentation of EMS providers participating in the study throughout the duration of such study.
- (C) The board is not obligated to approve a proposed research study. In addition, the board may amend the elements of a proposed study, including changing the starting and ending dates, before approving such study.
- (D) Following completion of a board-approved research study, an entity must do the

following:

- (1) Submit a final written report, with conclusions and recommendations, to the board;
 - (2) Upon request, appear before the board and/or board committees to answer questions or present additional information regarding the research study.
- (E) The board is not obligated to accept the entity's recommendations to permanently amend the scope of practice for EMS providers, based on the results of the research study.
- (F) This rule does not apply to prehospital research conducted within the current scope of practice.

4765-6-05

Exposure to a nerve or organophosphate agent.

An EMS provider, certified in accordance with section 4765.30 of the Revised Code and Chapter 4765-8 of the Administrative Code, may administer appropriate drugs in response to suspected or known exposure to a nerve or organophosphate agent provided the EMS provider is under physician medical direction and has received appropriate training regarding the administration of such drug. An emergency medical responder or emergency medical technician shall be limited to administration of such drugs from a pre-filled auto-injector.

4765-6-06

Withdrawing of blood for evidence collection.

- (A) An advanced emergency medical technician or a paramedic may withdraw blood for the purpose of determining the alcohol, drug, controlled substance, metabolite of a controlled substance, or combination content of the whole blood, blood serum, or blood plasma as provided in division (D) of sections 4765.38 and 4765.39 of the Revised Code and in accordance with this rule.
- (B) A physician or cooperating physician advisory board that serves as the medical director for any EMS organization may limit the ability of an advanced emergency medical technician and paramedic, who provide emergency medical services under the auspices of the physician's certificate to practice medicine and surgery, or osteopathic medicine and surgery, to withdraw blood for evidence. The withdrawal of blood for evidence collection shall be performed in accordance with protocols and training requirements established by the medical director of the emergency medical service organization with which the advanced emergency medical technician or paramedic is affiliated.
- (C) The advanced emergency medical technician or paramedic must have received training approved by the local medical director regarding the withdrawal of blood for evidence collection before performing the withdrawal of blood for evidence.
- (D) In the course of providing emergency medical treatment and at the request of a law enforcement officer, an advanced emergency medical technician or paramedic may withdraw blood as provided under sections 1547.11, 4506.17, and 4511.19 of the Revised Code. The advanced emergency medical technician or paramedic shall not respond to the request to withdraw blood for the purpose of evidence collection unless the advanced emergency medical technician or paramedic is also responding to a request for emergency medical treatment and transport of the patient to a health care facility. A clinically competent patient may refuse transport.
- (E) The advanced emergency medical technician or paramedic shall not attempt to withdraw blood, if any of the following apply:
 - (1) In the opinion of the advanced emergency medical technician or paramedic, the physical welfare of the patient, any EMS provider, or any other person would be endangered by the withdrawing of blood;
 - (2) In the opinion of the advanced emergency medical technician or paramedic, the withdrawing of blood would cause an unreasonable delay in the treatment or transport of the patient or any other person;
 - (3) Consent of the patient is not obtained by the advanced emergency medical technician or paramedic. Any person who is unconscious, or who otherwise is

in a condition rendering the person incapable of refusal, shall be deemed to have consented;

- (4) Blood would be withdrawn from a pre-existing central venous access device;
- (5) The withdrawing of blood would result in a violation of any rule in this chapter;
or
- (6) The person is deceased.

(F) The withdrawing of blood shall only be done at the request of a law enforcement officer having reasonable grounds to believe the person was violating section 1547.11, 4506.17 or 4511.19 of the Revised Code. As set forth in section 4511.191 of the Revised Code, the law enforcement officer shall request the person to submit to the withdrawing of blood and shall be responsible for advising the person of the consequences of submitting to, or refusing to submit to, the test.

(G) Blood shall only be collected utilizing the appropriate blood collection kit furnished by the law enforcement officer making the request and in compliance with rule 3701-53-05 of the Administrative Code. The withdrawing of blood must take place under the observation of the law enforcement officer. The blood sample must be immediately provided to the law enforcement officer.

4765-6-07

Rescue task force awareness training requirements.

[Comment: For dates and availability of material incorporated by reference in this rule see rule 4765-1-03 of the Administrative Code.]

(A) ~~Effective September 1, 2019, all~~ All accredited EMS institutions providing training programs for emergency medical responder or emergency medical technician ~~started on or after this date~~ shall include rescue task force awareness training.

(1) The training shall utilize the "Rescue Task Force Awareness Training" program approved by the board.

(2) The training requirements shall be fulfilled in either of the following ways:

(a) A student may complete the online module available at the Ohio department of public safety training campus and provide a copy of the certificate of completion issued upon successful completion of the module to the accredited institution prior to receiving a certificate of completion for the EMR or EMT course.

(b) The training may be provided by the instructor of the training program utilizing the "Rescue Task Force Awareness Training" instructional material approved by the board and available at the division's website. A certificate of completion for the "Rescue Task Force Awareness Training" shall be issued to the student following completion of the training.

~~(B) Any EMR, EMT, advanced EMT, or paramedic whose initial training did not include the "Rescue Task Force Awareness Training" program approved by the board shall complete the training no later than the expiration date of the first full certification cycle following the effective date of this rule.~~

~~(1) The training shall be completed utilizing the online module available at the Ohio department of public safety training campus.~~

~~(2) A copy of the certificate of completion issued upon successful completion of the module shall be maintained by the certificate holder and provided upon request to the division.~~

~~(E)~~ (B) Completion of the "Rescue Task Force Awareness Training" may be used to meet a portion of the continuing education credit required for renewal of a certificate to practice.

~~(D)~~ (C) No holder of a certificate to practice shall be required to complete the "Rescue Task Force Awareness Training" more than once.