

202 KAR 7:401. Paramedics.

RELATES TO: 311A.025, 311A.030, 311A.080, 311A.110, 311A.135, 311A.170

STATUTORY AUTHORITY: KRS 311A.020, 311A.025, 311A.030, 311A.115, 311A.125, 311A.135, 311A.170

NECESSITY, FUNCTION, AND CONFORMITY: KRS 311A.025 requires the board to promulgate administrative regulations relating to requirements and procedures for licensure, relicensure and reciprocity for paramedics. This administrative regulation establishes those requirements and procedures.

Section 1. Paramedic Student Eligibility. Individuals shall be eligible to enroll as a student in a paramedic education and training program if the applicant:

- (1) Is at least eighteen (18) years of age;
- (2) Holds a high school diploma or GED;
- (3) Understands, reads, speaks, and writes the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;
- (4) Holds current unrestricted certification as an EMT in Kentucky or holds current unrestricted registration with the NREMT as an NREMT-B;
- (5) Is not currently subject to disciplinary action pursuant to KRS Chapter 311A that would prevent licensure.
- (6) Meets all additional requirements established by the EMS-TEI; and
- (7) Holds a valid motor vehicle operators license from a state or territory of the United States.

Section 2. Licensure Requirements. (1) Individuals desiring initial licensure as a paramedic shall:

- (a) Meet all of the requirements contained in Section 1 of this administrative regulation;
 - (b) Successfully complete, within thirty (30) months of the beginning of the course, all EMS-TEI requirements for the education or training program which:
 1. Utilize the United States Department of Transportation, National Highway Traffic Safety Administration, 1998 National Standard Curriculum for Emergency Medical Technician-Paramedic, which shall not be satisfied by the completion of refresher or transition courses alone; and
 2. Shall not contain less than the median number of didactic, practical laboratory, and clinical and field internship hours for each subject and skill as contained in the "Field and Pilot Test Didactic and Practical Laboratory Hours Report" and "Field and Pilot Test Clinical Report" of the United States Department of Transportation, National Highway Traffic Administration, 1998 National Standard Curriculum for Emergency Medical Technician-Paramedic;
 - (c) Present evidence of completion of education and training regarding determination of death and preservation of evidence as required by KRS 311A.185;
 - (d) Obtain NREMT registration as a NREMT-P;
 - (e) Submit a signed "Application for Paramedic Examination and Licensure";
 - (f) Present written evidence of completion of current HIV/AIDS education or training required by KRS 311A.110; and
 - (g) Pay the fee required by 202 KAR 7:030.
- (2) An applicant for licensure as a paramedic shall successfully complete all NREMT testing and become Kentucky licensed within two (2) years after fulfilling all of the requirements of their paramedic education or training program, including the completion of the field summative

evaluation.

Section 3. Relicensure and Continuing Education Requirements. (1) A paramedic shall be eligible for relicensure if:

(a) The applicant submits to the KBEMS office a signed, completed "Universal Application for Recertification/Relicensure";

(b) The applicant maintains written evidence of completion of current education or training in CPR that:

1. Shall be taught by an individual who holds instructor certification at an appropriate level from:

- a. The American Red Cross;
- b. The AHA;
- c. The National Safety Council;
- d. The ASHI; or
- e. Another board approved organization; and

2. Shall provide instruction and testing in:

- a. One (1) rescuer CPR;
- b. Two (2) rescuer CPR;
- c. Techniques of changing from one (1) to two (2) rescuers during the performance of CPR;
- d. Techniques of changing rescuers during the performance of two (2) rescuer CPR;
- e. Techniques for relief of obstruction of the airway;
- f. CPR of infants and small children;
- g. Barrier-to-mouth, barrier-to-nose, or barrier-to-stoma resuscitation for adults, small children, and infants;
- h. Use of oral and nasal airways;
- i. Use of bag-valve-mask or other ventilation device;
- j. Use of supplemental oxygen; and
- k. Use and operation of an AED;

(c) The applicant maintains written evidence of completion of current HIV/AIDS training required by KRS 311A.110;

(d) The applicant pays the fee established in 202 KAR 7:030; and

(e) The applicant maintains evidence of any of the following:

- 1. Current registration by the NREMT as an NREMT-P;
- 2. Successful completion of the University of Maryland Baltimore Campus Critical Care Emergency Medical Transport Program; or

3. Successful completion of sixty (60) hours of continuing education of which:

a. A maximum of sixteen (16) hours per course may be claimed for obtaining, maintaining, or instructing provider certification in:

- (i) ACLS;
- (ii) PALS;
- (iii) BTLS;
- (iv) PHTLS; or
- (v) PEPP; and

b. Thirty (30) of the required sixty (60) hours shall be obtained in the following areas:

- (i) Two (2) in preparatory;
- (ii) Four (4) in airway management;
- (iii) Five (5) in cardiac management;
- (iv) Four (4) in medical or behavioral emergencies;
- (v) Five (5) in trauma;

- (vi) Two (2) in obstetrics or gynecology;
- (vii) Five (5) in pediatrics; and
- (viii) Three (3) in operations.

(2) All applicants for relicensure shall complete a minimum of one (1) hour in disaster management or mass casualty incidents education or training.

(3) Each applicant shall provide evidence of current certification in ACLS through either the AHA or ASHI at the time of application.

(4) All continuing education shall be validated by:

(a) The instructor, medical director, training officer, course coordinator, or provider of the continuing education offering; or

(b) A medical director, service director, or training officer of the ambulance service, first response agency, fire department, rescue squad or other medical employer.

(5) An application for renewal of licensure shall be denied if:

(a) Prior to the licensure expiration date, the paramedic applicant has not met the applicable requirements of this administrative regulation; or

(b) The applicant has been subjected to disciplinary action that prevents relicensure at the time of application.

(6) A licensed paramedic, in good standing, who is a member of a National Guard or a military reserve unit and is called to active duty by presidential order pursuant to 10 U.S.C. 121 and 673b may be given a one (1) year extension following release from active duty to meet the applicable requirements for relicensure listed in this section. The paramedic shall submit a written request for this extension within sixty (60) days of release from active duty.

(7) The KBEMS office may audit a paramedic's continuing education and continuing education records.

(8) The paramedic shall maintain documentation of all continuing education for four (4) years from the date of completion.

Section 4. Paramedic Reciprocity. (1) A person certified or licensed in another state or territory of the United States or registered by the NREMT as an NREMT-P shall be eligible for direct reciprocity for initial Kentucky licensure as a paramedic if the individual:

(a) Is at least eighteen (18) years of age;

(b) Holds current unrestricted registration as a NREMT-P;

(c) Holds a high school diploma or GED; and

(d) Holds a valid motor vehicle operators license from a state or territory of the United States.

(2) The individual shall:

(a) Understand, read, speak, and write the English language with a comprehension and performance level equal to at least the ninth grade of education, otherwise known as Level 4, verified by testing as necessary;

(b) Not have been found guilty of, entered a guilty plea or Alford plea to a felony offense or have completed a diversion program for a felony offense;

(c) Not have been subjected to discipline that would prevent reciprocity at the time of application;

(d) Submit an "Out-Of-State Paramedic Application" signed by the applicant;

(e) Submit written evidence of completion of current HIV/AIDS training required by KRS 311A.110;

(f) Present evidence of completion of training regarding the protocol governing the discontinuance of resuscitation, determination of death and preservation of evidence;

(g) Pay the fee required by 202 KAR 7:030; and

(h) Have successfully completed a training program, which utilized the United States Department of Transportation, National Highway Traffic Safety Administration, 1998 National Standard Curriculum, Emergency Medical Technician-Paramedic as the curriculum for education if any individual initially certified or licensed after January 1, 1985. An earlier edition of the National Standard Curriculum which was in effect in at the time of initial certification or licensure shall be considered to meet this requirement.

Section 5. Exemptions from Paramedic Administrative Regulations. The Kentucky licensure requirements for a paramedic shall not apply to:

(1) United States military personnel or state National Guard or employees of the United States government while providing services on a United States government-owned or operated facility, while engaged in the performance of their official duties under federal law, or while providing assistance in mass casualty or disaster type situation; or

(2) A paramedic licensed or certified in another state or territory of the United States who:

(a) Comes into Kentucky to transport a patient from another state into Kentucky; or

(b) Is transporting a patient through the state of Kentucky to an out-of-Kentucky location.

Section 6. Reinstatement of License. (1) A paramedic whose license has lapsed for a period not exceeding five (5) years, may reinstate their license by submitting:

(a) A signed "Universal Reinstatement Application";

(b) Written evidence of current completion of training in CPR meeting the requirements as outlined in Section 3(1)(b) of this administrative regulation;

(c) Written evidence of completion of current HIV/AIDS training required by KRS 311A.110;

(d) Payment of the fee established in 202 KAR 7:030;

(e) Evidence of previous certification or licensure as a paramedic in Kentucky; and

(f) Evidence of successful completion within twelve (12) months preceding their application for reinstatement of the National Standard Curriculum for EMT-Paramedic Refresher Course or continuing education hours that meet the requirements of the curriculum.

(2) A paramedic, whose license has lapsed for a period that exceeds five (5) years, may reinstate their license by complying with Sections 1 and 2 of this administrative regulation.

(3) An application for reinstatement of licensure shall not be considered if:

(a) The applicant is subject to disciplinary action pursuant to KRS Chapter 311A;

(b) The applicant is an individual who has been convicted of, entered a guilty plea or Alford plea to a felony offense, or has completed a diversion program for a felony offense; or

(c) The applicant has been subjected to discipline that would prevent reinstatement at the time of application.

Section 7. Demonstration of Competency. A paramedic applying for relicensing or reinstatement shall demonstrate continuing competency of skills by:

(1) Written verification of competency as evidenced by signature on the relicensure or reinstatement application of a medical director, ambulance service director or ambulance service training director; or

(2) Submission of evidence of current registration as a:

(a) NREMT-P; or

(b) Completion of:

1. ACLS;

2. PALS or PEPP; and

3. BTLS, PHTLS, or CCEMTP.

Section 8. Critical Care Endorsement. (1) A paramedic licensed by the board may be granted a critical care endorsement MTP upon presentation of a board approved application and completion of a training program that minimally meets the objectives of the University of Maryland Baltimore Campus CCEMTP Program. The ambulance service director and EMS medical director shall validate verification of the program having met the specified training standards.

(2) The critical care endorsement shall be valid so long as the paramedic maintains:

(a) Current licensure as a paramedic by the board; and

(b) Current certification as a CCEMTP or verification of continued clinical competence by the paramedic's EMS medical director.

(3) A paramedic with a critical care endorsement shall be authorized to perform the skills and procedures included in their education and training subject to authorization by the medical director through established protocols.

(4) A licensed paramedic with a critical care endorsement shall be responsible for providing the KBEMS office with copies of their current CCEMTP credentials.

Section 9. Public Notice of Negative Action. The KBEMS office shall cause to be published, in the KBEMS News or similar publication of the board, or otherwise disseminate the name of a paramedic that is fined, is placed on probationary status, is placed on a restricted status, is suspended, or has had their license revoked.

Section 10. Temporary Certificate. (1) KBEMS staff may issue a temporary certificate to an individual who:

(a) Submits a completed "Application for Temporary Certificate";

(b) Is at least eighteen (18) years of age;

(c) Understands, reads, speaks, and writes the English language with a comprehension and performance level equal to at least the 9th grade of education, otherwise known as Level 4, verified by testing as necessary;

(d) Provides proof of being currently certified or licensed as a paramedic in another state or territory of the United States or is currently registered by the NREMT as a paramedic;

(e) Presents written evidence of completion of current HIV/AIDS training required by KRS 311A.110;

(f) Presents written evidence of completion of current training in CPR that meets the requirements of Section 2 of this administrative regulation;

(g) Pays the fee required by 202 KAR 7:030;

(h) Provides the board with a copy of a statewide criminal background check from their state of residence;

(i) Is not an individual who has been convicted of, entered a guilty plea or Alford plea to a felony offense, or has completed a diversion program for a felony offense; and

(j) Has not been disciplined by or has action pending against or had a certificate or license in the field of health care denied, limited, suspended, or probated by a certifying or licensing entity in Kentucky or other state or territory under the jurisdiction of the United States.

(2) A temporary certificate may be issued for a period which shall not exceed six (6) months and shall not be reissued or renewed.

Section 11. Determination of Death Protocol. (1) The paramedic shall determine and document that the following signs of death are present:

(a) Unresponsiveness;

(b) Apnea;

(c) Absence of a palpable pulse at the carotid site;

(d) Bilaterally-fixed and dilated pupils; and
(e) Except in a case of trauma, a systole determined in two (2) leads on an electrocardiograph.

(2) The paramedic shall determine that one (1) of the following factors or conditions exist:

(a) Lividity of any degree;

(b) Rigor mortis of any degree;

(c) Presence of venous pooling in the body;

(d) Damage or destruction of the body which is incompatible with life; or

(e) A copy of the EMS "Do Not Resuscitate (DNR) Form" or identification bracelet or other means of identification evidencing a patient's desire not to be resuscitated in accordance with KRS 311A.170.

(3) If a paramedic has determined and documented that the conditions of subsections (1) and (2) of this section exist, the paramedic may, subject to the provisions of this administrative regulation, declare the patient dead.

(4) The paramedic may contact medical control or other licensed physician, if authorized in writing by the medical director, for advice and assistance in making a determination required by this administrative regulation.

(5) If a paramedic determines a patient to be dead, the paramedic shall remain on the scene unless their personal safety is jeopardized, until the arrival of the coroner, deputy coroner, or law enforcement officer from that jurisdiction.

Section 12. Discontinuance of Resuscitative Efforts. (1) A paramedic may discontinue resuscitation if:

(a) The patient has suffered cardiac arrest prior to arrival at the hospital;

(b) The paramedic has performed the resuscitative efforts required in the resuscitation protocol of the ambulance service medical director;

(c) The resuscitative efforts were unsuccessful; and

(d) The patient meets the criteria established in Section 11(1) of this administrative regulation.

(2) A paramedic may also discontinue resuscitation:

(a) If the safety of the paramedic is at risk; or

(b) At mass casualty incidents.

(3) A paramedic may discontinue resuscitation initiated by someone other than a paramedic if:

(a) The patient has suffered cardiac arrest;

(b) The resuscitative efforts required in the resuscitation protocol of the ambulance service medical director have been performed and documented;

(c) The resuscitative efforts were unsuccessful; and

(d) The patient meets the criteria established in Section 11(1) of this administrative regulation.

(4) If a paramedic discontinues resuscitation on a patient prior to transport of the patient to a medical facility, the paramedic shall make the notifications required by KRS 72.020 and at least one (1) member of the ambulance crew shall remain on the scene until the arrival of a coroner, deputy coroner or law enforcement officer.

(5) If a paramedic discontinues resuscitation on a patient during transport to a medical facility, the paramedic shall make the notifications required by KRS 72.020 to the officials of the county in which the paramedic discontinued resuscitation. Upon making the notification, the paramedic shall determine from the coroner whether to remain at that location, to return the deceased to a facility within the primary service area of the ambulance provider, or to continue

on to the medical facility with the deceased.

(6) A paramedic shall discontinue resuscitation efforts if presented with a properly executed EMS DNR Form.

Section 13. The paramedic shall document all items required by Sections 11 and 12 of this administrative regulation on the Ambulance Run Form required by KRS 311A.190.

Section 14. Training of Paramedics in Determination of Death and Preservation of Evidence.

(1) The training program shall not be less than one (1) hour in length and, at a minimum, shall include:

- (a) Information on and a copy of KRS 311A.170;
- (b) Information on and a copy of this administrative regulation;
- (c) Information on and a copy of KRS 72.020;
- (d) Information on and a copy of KRS 446.400;
- (e) Information on the duties of and role of the coroner and state medical examiner; and
- (f) Information on preservation of evidence at the scene of a death.

(2) The training shall be:

- (a) Provided as part of a paramedic training course conducted by an approved EMS-TEI via:
 1. Classroom instruction;
 2. Video conferencing or other distance learning media; or
 3. Video taped presentation or computer based learning; and
- (b) Conducted under the supervision of a medical director.

(3) The medical director of the ambulance service or EMS provider conducting the training shall request the coroner of the county in which the training is provided to attend and participate in the training.

(4) The EMS-TEI or the medical director providing the training shall maintain the following records:

- (a) A copy of the course outline used in the training to verify that the training has been conducted in accordance with the requirements of this administrative regulation;
 - (b) A sign-in sheet with the printed and signed names and certification or license numbers and state of license of all paramedics who successfully completed the training, including the signature of the educator supervising the education program; and
 - (c) Curriculum vitae for each member of the course faculty.
- (5) A certificate or letter of certification shall be provided to each participant in the program at the conclusion of the training.

(6) The KBEMS office shall maintain an approved curriculum that may be used by entities providing training specified by this administrative regulation.

Section 15. Incorporation by Reference. (1) The following material is incorporated by reference:

(a) The United States Department of Transportation, National Highway Traffic Administration, "1998 National Standard Curriculum, Emergency Medical Technician-Paramedic" (1998 Edition);

(b) Field and Pilot Test Didactic and Practical Laboratory Hours Report of the United States Department of Transportation, National Highway Traffic Administration, 1998 National Standard Curriculum for Emergency Medical Technician-Paramedic;

(c) Field and Pilot Test Clinical Report of the United States Department of Transportation, National Highway Traffic Administration, 1998 National Standard Curriculum for Emergency Medical Technician-Paramedic;

- (d) "Application For Paramedic Examination and Licensure" (June 2003);
 - (e) "Out Of State Paramedic Application" (June 2003);
 - (f) "Application for Paramedic License Reinstatement" (June 2003);
 - (g) Kentucky Board of Emergency Medical Services, Pre-Hospital Determination of Death and Preservation of Evidence Training Curriculum (05-02); and
 - (h) "Kentucky Emergency Medical Services Do Not Resuscitate (DNR) Order".
- (2) This material may be inspected, obtained, or copied, subject to applicable copyright law, at the Office of the Kentucky Board of Emergency Medical Services, 2545 Lawrenceburg Road, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. (30 Ky.R. 152; 920; 1218; 1480; eff. 11-19-2003; Crt eff. 2-19-2019.)