

WEST'S LOUISIANA STATUTES ANNOTATED
LOUISIANA REVISED STATUTES
TITLE 40. PUBLIC HEALTH AND SAFETY
CHAPTER 5. MISCELLANEOUS HEALTH PROVISIONS
PART VII. EMERGENCY MEDICAL SERVICES
SUBPART C. EMERGENCY MEDICAL TRANSPORTATION

§1236.4. Required insurance coverage

A. Notwithstanding the provisions of R.S. 33:4791 and 4791.1, each ambulance provider, as defined in this Section, shall continuously have in effect the following minimum amounts of insurance:

- (1) Medical malpractice liability insurance in the amount of five hundred thousand dollars.
- (2) Automobile liability insurance in the amount of five hundred thousand dollars in combined single limits and five hundred thousand dollars in the aggregate.
- (3) General liability insurance in the amount of five hundred thousand dollars per occurrence and five hundred thousand dollars in the aggregate.
- (4) Repealed by Acts 1999, No. 1113, § 2.

B. Each ambulance provider shall submit a certificate of insurance issued by its insurance carrier to the Department of Health and Hospitals as proof of the minimum insurance coverage required by this Section. Each ambulance provider shall also be required to notify the department in writing at least thirty days prior to any material change in or cancellation of such coverage.

C. For purposes of this Section, "ambulance provider" shall mean any entity owning, controlling, or operating any business or service which, as a substantial portion of its business, furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting persons who may need medical attention during transport. However, "ambulance provider" shall not include:

- (1) Agencies of the federal government;
- (2) Volunteer nonprofit organizations or municipal nonprofit organizations operating invalid coaches, as defined in R.S. 40:1231(7);
- (3) Entities rendering assistance to licensed ambulances in the case of a major disaster;

(4) Licensed hospitals providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital;

(5) Entities operating ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside of the state; or

(6) Entities providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

Acts 1990, No. 442, § 1; Acts 1992, No. 678, § 1; Acts 1999, No. 1113, § 2.

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§1236.6. Air ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity, currently operating or planning to operate an air ambulance service shall pay the following fees to the department, as applicable:

(1) An initial licensing fee of one hundred fifty dollars, which shall be submitted with the initial application for a license.

(2) An annual license renewal fee of one hundred dollars, which shall be submitted with each annual application for renewal of a license.

(3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.

(4) An aircraft inspection fee of seventy-five dollars for each aircraft, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for an aircraft added to the service by the applicant.

(5) A delinquent fee of twenty-five dollars for each aircraft for failure to timely pay an aircraft inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the aircraft inspection fee.

(6) A change of address fee of ten dollars for each change of address.

(7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1114, § 1.

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§1236.7. Air ambulance services; violations; penalties; fines; notice; hearings; appeal

A. The opening or operation of an air ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars, and each day's violation shall constitute a separate offense.

B.(1) Any person or entity violating the provisions of this Part when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules in accordance with the Administrative Procedure Act which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.

(2) The schedule of civil fines and other penalties by class of violation is as follows:

(a) Class A Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Part concerning the number or qualifications of personnel, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(b) Class B Violations: If an air ambulance service is found to have been operating in violation of any of the requirements of this Part concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(c) Class C Violations: If an air ambulance is found to have been operated without undergoing any inspection required under the provisions of this Part, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(d) Class D Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Part concerning medical and safety equipment, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

C. The department shall adopt rules and regulations in accordance with the Administrative Procedure Act to provide notice to the air ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.

D. The air ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the air ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.

E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No air ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients and clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1114, § 1.

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§1236.11. Legislative findings

A. The Legislature of Louisiana finds that each year more than three hundred fifty thousand Americans die from out-of-hospital sudden cardiac arrest. More than ninety-five percent of these Americans die, in many cases because a lifesaving defibrillator did not arrive at the scene of the emergency in time.

B. The American Heart Association estimates that more than twenty thousand deaths may be prevented each year if defibrillators were more widely available to designated responders.

C. Many communities throughout the state and nation have invested in 911 emergency response systems, emergency personnel, and ambulance vehicles. However, many of these communities do not have enough defibrillators in their community.

D. It is therefore the intent of the legislature to encourage greater acquisition, deployment, and use of automated external defibrillators in communities throughout the state.

Acts 1999, No. 825, § 1.

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§1236.12. Definitions

As used in this Subpart "automated external defibrillator" and "AED" mean a medical device heart monitor and defibrillator that:

- (1) Has received approval of its pre-market notification filed pursuant to 21 U.S.C. 360(k) from the United States Food and Drug Administration.
- (2) Is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining whether defibrillation should be performed.
- (3) Upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.
- (4) Is capable of delivering the electrical impulse to an individual's heart.

Acts 1999, No. 825, § 1.

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§1236.13. Persons in possession of AED's; training, testing, and notification requirements; manufacturer responsibility

A. In order to ensure public health and safety, any person or entity that possesses an AED shall ensure that:

- (1) The AED is maintained and tested according to the manufacturer's guidelines.
- (2) A licensed physician or advanced practice registered nurse who is authorized to prescribe is involved in the possessor's program to ensure compliance with the requirements for training, emergency medical service (EMS) notification, and maintenance.
- (3)(a) Expected AED users regularly, on the premises of a particular entity, such as a work site, receive appropriate training in cardiopulmonary resuscitation (CPR) and in the use of an AED by the American Heart Association or by any other nationally recognized course in CPR and AED use.
- (b) For purposes of this Paragraph, "expected AED users" shall be any person designated by the possessor to render emergency care.
- (4) The emergency medical services system is activated as soon as possible when an individual renders emergency care to an individual in cardiac arrest by using an AED.
- (5) Any clinical use of the AED is reported to the licensed physician or advanced practice registered nurse involved in the possessor's program.

B. Any person or entity that possesses an AED shall notify the bureau of emergency medical services in the office of public health of the Department of Health and Hospitals and a local provider of emergency medical services, such as 911 service, local ambulance service, or the fire department of the acquisition, location, and type of AED.

C. Any manufacturer, wholesale supplier, or retailer of an AED shall notify purchasers of AED's intended for use in the state of the requirements of this Section.

Acts 1999, No. 825, § 1.

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§1236.14. Limitation of liability

In addition to the civil immunity provided to persons rendering emergency assistance as provided by law, including R.S. 9:2793, R.S. 37:1731, 1732, and 1735, and R.S. 40:1231.2, any prescribing advanced practice registered nurse or physician who authorizes the purchase of the AED, any physician or advanced practice registered nurse involved in the possessor's program, any individual or entity which provides training in cardiopulmonary resuscitation and in the use of an AED, any purchaser of an AED, any person or entity responsible for the site where an AED is located, and any expected user regularly on the premises shall not be liable for any civil damages arising from any act or omission of acts related to the operation of an AED that do not amount to willful or wanton misconduct or gross negligence.

Acts 1999, No. 825, § 1.

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§1236.5. Emergency medical technician fund

A. There is hereby established a special fund in the state treasury to be known as the Emergency Medical Technician Fund, hereafter referred to as "fund", which shall consist of monies generated by the fees collected from the purchase of prestige license plates for certified emergency medical technicians as provided in R.S. 47:463.47. In addition, the legislature may make annual appropriations to the fund for the purposes set forth in this Section.

B. All monies collected pursuant to R.S. 47:463.47 shall be deposited in the Bond Security and Redemption Fund as required by Article VII, Section 9(B) of the Constitution of Louisiana and thereafter shall be credited to the fund.

C. The monies in the fund shall be appropriated to the Department of Health and Hospitals solely for purchasing equipment for the testing of applicants for certification as an emergency medical technician and to cover other testing-related costs. All unexpended and unencumbered monies remaining in the fund at the close of each fiscal year shall remain in the fund. Monies in the fund shall be invested by the state treasurer in the same manner as monies in the state general fund. All interest earned from the investment of monies in the fund shall be deposited and remain to the credit of the fund.

Acts 1997, No. 1131, §1, eff. July 14, 1997.

ACT No. 885

Regular Session, 2004

HOUSE BILL NO. 1584

BY REPRESENTATIVES RICHMOND, FRITH, AND JACKSON

1 AN ACT

2 To enact R.S. 40:1236.13(D), (E), and (F), relative to automated external defibrillators; to
3 require physical fitness facilities and institutions of higher education that compete in
4 intercollegiate sport contests to have an automated external defibrillator on its
5 premises; and to provide for related matters.

6 Be it enacted by the Legislature of Louisiana:

7 Section 1. R.S. 40:1236.13(D), (E), and (F) are hereby enacted to read as follows:

8 §1236.13. Persons in possession of AEDs; training, testing, and notification
9 requirements; manufacturer responsibility; possession required

10 * * *

11 D.(1) The owner of or the entity responsible for a physical fitness facility
12 shall keep an AED on its premises.

13 (2) As used in this Subsection:

14 (a) "Physical fitness facility" means a facility for profit or nonprofit with a
15 membership of over fifty persons that offers physical fitness services. This term
16 includes but is not limited to clubs, studios, health spas, weight control centers,
17 clinics, figure salons, tanning centers, athletic or sport clubs, and YWCA and
18 YMCA organizations.

19 (b) "Physical fitness services" means services for the development of
20 physical fitness through exercise or weight control. It shall not include a business
21 limited solely to the practice of physical therapy, as defined in R.S. 37:2401, by a
22 therapist licensed by the Louisiana State Board of Medical Examiners, nor shall it
23 apply to medically related services performed by a physician licensed by the
24 Louisiana State Board of Medical Examiners in a private office, clinic, or hospital.

1 E. Any institution of higher education that competes in intercollegiate
2 athletics shall have an AED on its premises in its athletic department.

3 F. The office of public health within the Department of Health and Hospitals,
4 through its center for community health, emergency medical services shall
5 promulgate all necessary rules and regulations to implement the provisions of
6 Subsections D and E of this Section. Such rules and regulations shall, at a minimum,
7 provide for compliance, enforcement, and penalties.

8 Section 2. This Act shall become effective on January 1, 2005.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____

ACT No. 443

Regular Session, 2004

HOUSE BILL NO. 1543

BY REPRESENTATIVE BRUNEAU

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AN ACT

To amend and reenact R.S. 40:1236.13(A)(3)(a) and 1236.14, relative to automated external defibrillators; to authorize the use of automated external defibrillators by private security personnel; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1236.13(A)(3)(a) and 1236.14 are hereby amended and reenacted to read as follows:

§1236.13. Persons in possession of AED's; training, testing, and notification requirements; manufacturer responsibility

A. In order to ensure public health and safety, any person or entity that possesses an AED shall ensure that:

* * *

(3)(a) Expected AED users regularly, on the premises of a particular entity, such as a work site or users who carry an AED in a private security patrol vehicle, receive appropriate training in cardiopulmonary resuscitation (CPR) and in the use of an AED ~~by the American Heart Association or by~~ from any other nationally recognized course in CPR and AED use.

* * *

§1236.14. Limitation of liability

In addition to the civil immunity provided to persons rendering emergency assistance as provided by law, including R.S. 9:2793, R.S. 37:1731, 1732, and 1735, and R.S. 40:1231.2, any prescribing advanced practice registered nurse or physician who authorizes the purchase of the AED, any physician or advanced practice registered nurse involved in the possessor's program, any individual or entity which provides training in cardiopulmonary resuscitation and in the use of an AED, any

CODING: Words in ~~struck through~~ type are deletions from existing law; words underscored are additions.

1 purchaser of an AED, any person or entity responsible for the site or the private
2 security patrol vehicle where an AED is located, and any expected user regularly on
3 the premises or in the vehicle shall not be liable for any civil damages arising from
4 any act or omission of acts related to the operation of or failure to operate an AED
5 that do not amount to willful or wanton misconduct or gross negligence.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____

ACT No. 797

Regular Session, 2004

HOUSE BILL NO. 1228

BY REPRESENTATIVE DURAND

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AN ACT

To amend and reenact R.S. 40:1232.6(introductory paragraph) and 1300.51(3) and (5) and R.S. 44:9(F) and (G) and to enact R.S. 40:1300.51(2)(h), relative to emergency medical personnel; to provide grounds for disciplinary proceedings; to modify definitions; to provide for records of violations of municipal ordinances and of state statutes classified as a misdemeanor or felony; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1232.6(introductory paragraph) and 1300.51(3) and (5) are hereby amended and reenacted and R.S. 40:1300.51(2)(h) is hereby enacted to read as follows:

§1232.6. Grounds for disciplinary proceedings

The commission may discipline emergency medical ~~personnel~~ services professionals by directing the bureau to deny, withhold, revoke, restrict, probate, or suspend a certificate to practice as a certified emergency medical technician or certified first responder, impose fines and assess costs, or otherwise discipline an EMS professional, and the commission may direct the bureau to limit, restrict, or deny a student EMS professional from entering or continuing the clinical phase of EMS education for the following causes:

* * *

§1300.51. Definitions

For the purposes of this Part:

* * *

(2) "Employer" means any of the following facilities, agencies, or programs:

* * *

(h) A nonemergency, nonambulance medical transportation facility or entity.

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§1231. Definitions

For purposes of this Part:

- (1) "Ambulance" means any authorized emergency vehicle, equipped with warning devices, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such. "Ambulance" shall not mean a hearse or other funeral home vehicle utilized for the transportation of the dead.
- (2) "Ambulance service" or "ambulance provider" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in ambulances, individuals who may need medical attention during transport. However, "ambulance service" and "ambulance provider" shall not include any of the following:
- (a) An agency of the federal government.
 - (b) A volunteer nonprofit organization or municipal nonprofit organization operating an invalid coach or coaches.
 - (c) An entity rendering assistance to a licensed ambulance or ambulances in the case of a major disaster.
 - (d) A licensed hospital providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital.
 - (e) An entity operating an ambulance or ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport a patient or patients from a medical facility inside of the state to a location outside of the state.
 - (f) An entity providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

(3) "Air ambulance" means any aircraft, either fixed-wing or rotary-winged, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such.

(3.1) "Air ambulance service" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in air ambulances, individuals who may need medical attention during transport.

(3.2) "Auto-injector" means a spring-loaded needle and syringe with a single dose of epinephrine that will automatically release and inject the medicine.

(4) "Bureau" means the Department of Health and Hospitals, office of public health, bureau of emergency medical services.

(5) "Certified emergency medical technician" means an individual who is certified as any one of the following:

(a) A certified emergency medical technician-basic.

(b) A certified emergency medical technician-intermediate.

(c) A certified emergency medical technician-paramedic.

(6) "Certified emergency medical technician-basic" means an individual who has successfully completed an emergency medical technician- basic training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(7) "Certified emergency medical technician-intermediate" means any individual who has successfully completed an emergency medical technician- intermediate training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(8) "Certified emergency medical technician-paramedic" means any individual who has successfully completed an emergency medical technician- paramedic training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(9) "Certified first responder" means any individual who has successfully completed a training course developed and promulgated by the United States Department of Transportation and adopted by the bureau and who is certified by the bureau.

(10) "Commission" means the Louisiana Emergency Medical Services Certification Commission.

(11) "Department" means the Department of Health and Hospitals.

(12) "Emergency medical personnel" or "emergency service person(s)" means individuals who are certified first responders or certified emergency medical technicians.

(13) "Emergency medical response vehicle" means a marked emergency vehicle with fully visual and audible warning signals operated by a certified ambulance service, the primary purpose of which is to respond to the scene of a medical emergency to provide emergency medical stabilization or support, or command, control, and communications, but which is not an ambulance designed or intended for the purpose of transporting a victim from the scene to a medical facility regardless of its designation. Included are such vehicles referred to but not limited to the designation as "sprint car", "quick response vehicle", "special response vehicle", "triage trucks", "staff cars", "supervisor units", and other similar designations. Emergency medical response vehicles shall not include fire apparatus and law enforcement patrol vehicles which carry first aid or emergency medical supplies and which respond to medical emergencies as part of their routine duties.

(14) "Emergency medical services" or "EMS" means a system that represents the combined efforts of several professionals and agencies to provide prehospital emergency care to the sick and injured.

(15) "EMS task force" means the Emergency Medical Services Task Force, composed of individuals appointed by the assistant secretary of the office of public health, subject to the approval of the secretary of the department, which advises and makes recommendations to the office and the department on matters related to emergency medical services.

(16) "First aid certificate" means a certificate in the Emergency Response Course issued by the American Red Cross or other certificate in a first aid course approved by the bureau and issued to any individual who has successfully completed the required training and met the established standards of such organizations.

(17) "Industrial ambulance" means any vehicle owned and operated by an industrial facility and used for transporting any employee who becomes sick, injured, or otherwise incapacitated in the course and scope of his employment from a job site to an appropriate medical facility.

(18) Repealed by Acts 2001, No. 625, § 2.

(19) "Municipal nonprofit organization" means an organization owned by a parish, municipality, or entity of a parish or municipality which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician.

(20) "Physician" means a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(21) "Volunteer nonprofit organization" means an organization which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician and which is chartered as a nonprofit organization under Section 501c of the United States Internal Revenue Code, as a volunteer fire department by the Louisiana state fire marshal's office, or as a nonprofit organization by the Louisiana secretary of state.

Amended by Acts 1968, No. 278,§ 1; Acts 1976, No. 393,§ 1; Acts 1977, No. 626,§ 1; Acts 1978, No. 469,§ 1; Acts 1978, No. 786,§ 5, eff. July 17, 1978; Acts 1979, No. 554,§ 1; Acts 1985, No. 750,§ 1, eff. Jan. 1, 1987; Acts 1991, No. 974,§ 1, eff. July 24, 1991; Acts 1997, No. 297,§ 2; Acts 1997, No. 913,§ 2; Acts 1999, No. 1113,§ 1; Acts 1999, No. 1114,§ 1; Acts 2001, No. 385,§ 1; Acts 2001, No. 625,§ 2.

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§1231.2. Immunity from civil damages

No parish, specialty, component, or state medical society or organization, or its designee, which is statutorily mandated by this Part to participate without compensation or gratuitously participates in an emergency services system, nor any committee of such parish, specialty, component, or state medical society or organization, including the individual members of such committee, or its designee, shall be liable for any civil damages as a result of any act or omission in the performance of their administrative duties or donated services with such emergency services system, including, without limitation, advice, instructions, or other duties regarding policy, protocol, administration, and efficiency of the emergency medical services system. The immunity extended to a parish, specialty, component, or state medical society or organization, or any committee thereof, including the individual members of such committee, including their insurers, or its designee, shall not be applicable for willful or wanton acts or omissions. The immunity extended herein shall be applicable only to an action brought by the person damaged as a result of the performance of any administrative duties or donated services rendered pursuant to the provisions of this Section.

Added by Acts 1979, No. 554, § 2. Amended by Acts 1990, No. 428, § 1; Acts 1997, No. 913, § 2.

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SUBPART B. EMERGENCY MEDICAL PERSONNEL

§1232. Emergency medical personnel training; certification

A. The bureau shall promulgate rules and regulations in accordance with the Administrative Procedure Act for the following:

- (1) To define and authorize appropriate functions and pre-certification and post-certification training programs for emergency medical personnel. All such training programs shall meet or exceed the performance requirements developed by the United States Department of Transportation.
- (2) To specify minimum operational requirements which will assure medical direction, supervision, and control over emergency medical services.
- (3) To specify minimum testing and continuing education requirements for all emergency medical personnel.
- (4) To provide for the issuance of certificates and renewals of certificates for emergency medical personnel.
- (5) To specify initial certification and certification renewal requirements consistent with the National Registry of Emergency Medical Technicians for each level of emergency medical personnel.
- (6) To establish fees for certification and certification renewal.

B. An individual petitioning for certification or certification renewal as a certified emergency medical technician or a certified first responder shall submit an application to the bureau on forms provided by the bureau. The application shall be accompanied by the appropriate fee.

C. The bureau shall affirmatively provide that there is no discrimination toward any individual in the certification process on the basis of race, religion, creed, national origin, sex, or age.

Amended by Acts 1976, No. 393, § 2, 3; Acts 1977, No. 626, § 1; Acts 1985, No. 750, § 1, eff. Jan. 1, 1987; Acts 1987, No. 665, § 2, eff. July 9, 1987; Acts 1997, No. 913, § 2.

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§1232.1. Fee schedule; fees for certification prohibited

A.(1) The bureau shall not require or collect any fee or charges for certification or recertification of emergency medical personnel who serve as such on a voluntary basis and who receive no compensation of any kind for such services.

(2) The bureau shall not set the fee for certification of an emergency medical technician-basic to exceed fifteen dollars for any individual who is an employee of a municipal law enforcement agency, fire service, or fire protection district who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.

(3) The bureau shall not set the fee for recertification of an emergency medical technician-basic to exceed ten dollars for any individual who is an employee of a municipal law enforcement agency, fire service, or fire protection district who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.

B. Except as provided in Subsection A of this Section, the bureau shall assess fees for testing and certification based on the following schedule:

(1) Test fees: Fee

(a) First responder-written only \$ 15.00

(b) First responder-written only

(out of state) 15.00

(c) Basic initial written & practical 60.00

(d) Basic entire practical exam 30.00

(e) Basic partial practical 15.00

(f) Basic testing/retesting-written only 15.00

(g) Basic testing/retesting-written only

(out of state) 15.00

(h) Intermediate initial written & practical 75.00

(i) Intermediate initial written & practical
(out of state) 100.00

(j) Intermediate retest entire practical 50.00

(k) Intermediate retest entire practical
(out of state) 65.00

(l) Intermediate retest partial practical 30.00

(m) Intermediate retest partial practical
(out of state) 30.00

(n) Intermediate testing/retesting-written only
(exam only) 15.00

(o) Intermediate testing/retesting-written only
(exam only) (out of state) 15.00

(p) Paramedic initial written & practical 90.00

(q) Paramedic initial written & practical
(out of state) 125.00

(r) Paramedic retesting-entire practical 60.00

(s) Paramedic retesting-entire practical
(out of state) 75.00

(t) Paramedic retesting-partial practical 35.00

(u) Paramedic retesting-partial practical
(out of state) 40.00

(v) Paramedic testing/retesting written 15.00

(w) Paramedic testing/retesting written

(out of state) 15.00

(2) Certification fees

(a) First responder 10.00

(b) Basic EMT 30.00

(c) Intermediate 40.00

(d) Paramedic 50.00

(3) Recertification

(a) First responder 5.00

(b) Basic EMT 25.00

(c) Intermediate 35.00

(d) Paramedic 45.00

(4) Reciprocity

(a) Basic EMT 60.00

(b) Intermediate 80.00

(c) Paramedic 100.00

C. The department may adopt rules and regulations in accordance with the Administrative Procedure Act to provide for the collection of fees required by the fee schedule provided in this Section.

Acts 1997, No. 913, § 2; Acts 2001, No. 515, § 1.

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§1232.2. Louisiana Emergency Medical Services Certification Commission; creation; membership; qualifications; terms; vacancies; meetings; officers; compensation; domicile

A. The Louisiana Emergency Medical Services Certification Commission is hereby created within the Department of Health and Hospitals.

B.(1) The commission shall be composed of nine voting members appointed by the governor as follows:

(a) Two emergency medical services administrators, including one representing the private sector and one representing the public sector.

(b) Two certified emergency medical technician-paramedics and one emergency medical technician-basic, at least one of whom shall be a full-time employee of a fire department, who are certified as emergency medical services instructors by the bureau.

(c) Four physicians, one from each of the following organizations:

(i) The American College of Emergency Physicians.

(ii) The American College of Surgeons.

(iii) The Louisiana State Medical Society.

(iv) The American Academy of Pediatrics.

(2) The commission shall also have one nonvoting member appointed by the governor who is a registered nurse and who is a state-certified paramedic to be nominated by the Louisiana State Nurses Association from a list of two names submitted by the Louisiana Emergency Nurses Association.

C. Each member of the commission shall be a resident of Louisiana for at least one year, have had three years experience in his respective field of practice, and be actively engaged in the practice of emergency medical services at the time of his appointment.

D.(1) The initial voting members of the commission shall be appointed no later than October 1, 1997, from a list of two nominees for each appointment submitted by the task force. If the task force fails to submit a list of nominees to the governor by September 1,

1997, the governor shall appoint the respective members of the commission without the nomination list required by this Section.

(2) The nonvoting member shall be appointed to serve terms of three years. The initial member shall be appointed by the governor to an initial term of three years by October 1, 1997 or within thirty days of receipt of the list from the Louisiana State Nurses Association, whichever is later.

E. Each appointment by the governor shall be submitted to the Senate for confirmation.

F.(1) The voting members appointed to the commission shall serve as follows: three members shall be appointed to serve an initial term of one year; three members shall be appointed to serve an initial term of two years; and three members shall be appointed to serve an initial term of three years. Thereafter, each member shall be appointed to serve a term of three years.

(2) No individual shall serve more than two consecutive terms.

G.(1) Subsequent to the appointment of the initial members, the voting members shall be appointed from a list of two nominees for each appointment submitted by the task force. No later than thirty days prior to the termination date of a member's term, the task force or, for the nonvoting member, the Louisiana State Nurses Association, shall submit a list of nominees to the governor. If the Louisiana State Nurses Association or the task force fails to submit the required list of nominees to the governor within thirty days, the governor shall appoint the respective member to fill the vacancy without the nomination list required.

(2) A vacancy on the commission prior to the expiration of a term shall be filled for the remainder of the term. No later than thirty days after the occurrence of a vacancy prior to the expiration of a term, the task force or, for the nonvoting member, the Louisiana State Nurses Association, shall submit a list of nominees to the governor. If the Louisiana State Nurses Association or the task force fails to submit the required list of nominees to the governor within thirty days, the governor shall appoint the respective member to fill the vacancy without the nomination list required.

H. The governor shall call the first meeting of the commission no later than November 30, 1997. At a minimum, the commission shall meet on a quarterly basis and, in addition, shall meet when called by the chairman or upon the written request of at least four voting members of the commission.

I. The commission shall annually elect a chairman, vice chairman, and secretary from among its voting membership and shall maintain a record of the attendance of its members at commission meetings.

J. For each day while performing his official duties, a member of the commission may be reimbursed for expenses and mileage at the same rate set by the division of administration for state employees under the provisions of R.S. 39:231.

K. The commission shall be domiciled in Baton Rouge.

L. The governor shall remove a member of the commission after a hearing by the commission during which charges for removal have been established and provided that a majority of the members have recommended removal.

Acts 1997, No. 913, § 2.

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§1232.3. Powers and duties of the commission

The commission shall:

- (1) Recommend to the bureau requirements and standards of practice for individuals seeking to be certified under this Subpart.
- (2) Approve requirements and standards of practice submitted by the bureau for emergency medical personnel consistent with this Subpart.
- (3) Recommend continuing education requirements and standards to the bureau in accordance with criteria established by the National Registry of Emergency Medical Technicians for individuals seeking to renew a certificate.
- (4) Conduct disciplinary hearings for emergency medical personnel.
- (5) Request that the bureau conduct investigations as necessary.
- (6) Cause the prosecution of any individual who violates any provision of this Subpart.
- (7) Maintain a record of all commission proceedings.

Acts 1997, No. 913, § 2.

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§1232.4. Powers and duties of the bureau

The bureau shall:

- (1) Issue a certificate and renew a certificate to any duly qualified applicant for certification or for certification renewal as a certified first responder or certified emergency medical technician.
- (2) Prescribe application forms for certification and certification renewal.
- (3) Adopt requirements and standards of practice approved by the commission for emergency medical personnel.
- (4) Conduct investigations as requested by the commission.
- (5) Deny, withhold, revoke, restrict, probate, or suspend a certificate as directed by the commission under the provisions of R.S. 40:1232.6.
- (6) Prepare, publish, and update a roster of all emergency medical personnel, including the name and address of each individual.
- (7) Adopt continuing education requirements and standards for individuals seeking to renew a certificate.
- (8) Prepare an annual report detailing the activities of the commission during the past fiscal year including the number and nature of the hearings conducted under the provisions of R.S. 40:1232.7.
- (9) Adopt rules and regulations to implement the provisions of this Subpart in accordance with the Administrative Procedure Act.

Acts 1997, No. 913, § 2.

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§1232.5. Certification; requirements; renewal

A. Applicants for initial certification as emergency medical personnel shall submit the following evidence to the bureau:

(1) Completion of the required approved educational program.

(2) Documentation that the applicant meets the qualifications and requirements as established by the bureau.

B. In lieu of the evidence required by Subsection A of this Section, an applicant may submit evidence that he has been duly licensed or certified in another state, territory, or country or has received military training and certification as emergency medical personnel as defined in R.S. 40:1231, and meets the qualifications and requirements established by the bureau.

C.(1) The certificate shall be renewed every two years provided the applicant seeking renewal completes the application and meets the requirements for renewal established by the bureau prior to the expiration date on his current certificate.

(2) An individual whose certificate expires by his failure to renew as provided may be reinstated provided the applicant submits a completed application and meets any additional requirements established by the bureau for an individual who has failed to timely renew his certificate.

Acts 1997, No. 913, § 2.

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§1232.6. Grounds for disciplinary proceedings

The commission may discipline emergency medical personnel by directing the bureau to deny, withhold, revoke, restrict, probate, or suspend a certificate to practice as a certified emergency medical technician or certified first responder, impose fines and assess costs, or otherwise discipline an EMS professional, and the commission may direct the bureau to limit, restrict, or deny a student EMS professional from entering or continuing the clinical phase of EMS education for the following causes:

- (1) Conviction of selling or attempting to sell, falsely obtaining, or furnishing to a person a certified emergency medical technician or certified first responder certification document.
- (2) Conviction of a crime or offense which reflects the inability of a certified emergency medical technician or certified first responder to provide emergency medical services with due regard for the health and safety of clients or patients or enters a plea of guilty or nolo contendere to a criminal charge regardless of final disposition of the criminal proceeding, including but not limited to expungement or nonadjudication.
- (3) Is unfit or incompetent by reason of negligence, habit, or other cause.
- (4) Is habitually intemperate in the use of or abuses alcohol or habit-forming drugs.
- (5) Is guilty of aiding or abetting another person in the violation of this Subpart.
- (6) Is mentally incompetent.
- (7) Endeavors to deceive or defraud the public.
- (8) Professional or medical incompetency.
- (9) Unprofessional conduct.
- (10) Continuing or recurring practices which fail to meet the standards of EMS care in this state.
- (11) Abandonment of a patient.
- (12) Has had a certification or license to practice as an EMS professional or to practice as another health care provider denied, revoked, suspended, or otherwise restricted.
- (13) Is guilty of moral turpitude.
- (14) Has violated any rules and regulations of the commission or the bureau or any provision of this Subpart.

Acts 1997, No. 913, §2; Acts 2003, No. 208, §1.

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§1232.7. Hearings of the commission; appeal of decision

A. If the commission determines there are grounds for a disciplinary proceeding against an individual based upon an investigation by the bureau, the chairman of the commission shall set a time and place for a hearing. No later than ten days prior to the date set for the hearing, the commission shall send notice of the time and place for the hearing and an explanation of the grounds for the disciplinary proceedings to the individual by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.

B. The commission may compel the attendance of witnesses, the production of books, papers, and documents, and administer oaths at the hearing. The commission shall not be bound by strict rules of procedure or other laws of evidence in the conduct of its proceedings. The individual under investigation may appear personally, by counsel, or personally and by counsel, produce witnesses and evidence on his own behalf, and cross-examine witnesses. Such proceedings shall be closed to the general public and the records of the proceeding shall be confidential.

C. Notwithstanding any privilege of confidentiality recognized by law, a physician or health care agency with which the individual under investigation is associated shall not assert such privilege by failing or refusing to respond to a lawfully issued subpoena of the commission for any medical information, testimony, records, data, reports, or other documents, tangible items, or information relative to any patient cared for or assigned to the individual under investigation. Any such items obtained pursuant to a subpoena shall be confidential. Furthermore, the transcript of testimony from the hearing shall be altered to prevent the disclosure of the identity of the patient to whom such records relate.

D. Notice of the commission's decision to revoke, restrict, suspend, or deny a certificate shall be sent to the individual under investigation by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.

E. An individual whose certification has been revoked, restricted, suspended, placed in probation, or denied may have the proceedings of the commission reviewed by a court of competent jurisdiction, provided that an appeal is made no later than thirty days after the date indicated on the registered mail receipt of the notice required by Subsection D of this Section. The decision of the commission shall remain in force until an appeal is granted unless the court orders a stay. If an appeal is granted, the decision of the commission shall be suspended until a final disposition of the matter is ultimately rendered by the court affirming the decision of the commission.

F. The commission may maintain the confidentiality of an individual under investigation whenever the commission determines the public interest will be best served by alternatives to the disciplinary hearing process.

Acts 1997, No. 913, § 2.

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§1232.8. Injunction

The commission, through the bureau, may obtain an injunction without bond forbidding any person from violating or continuing to violate any of the provisions of this Subpart. This injunction shall not be subject to release upon bond.

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§1232.9. Violations

No person or individual shall engage in any of the following activities:

- (1) Sell, or attempt to sell, falsely obtain, or furnish to any person any emergency medical personnel diploma, certification document, or record, or aid or abet therein.
- (2) Practice as a certified emergency medical technician or certified first responder under any diploma or certificate illegally obtained or signed or issued unlawfully.
- (3) Practice as a certified emergency medical technician or certified first responder unless certified to do so under the provisions of this Subpart.
- (4) Use in connection with his name any designation tending to imply that he is a certified emergency medical technician or certified first responder unless duly authorized to practice under the provisions of this Subpart.
- (5) Practice as a certified emergency medical technician or certified first responder during the time the certification issued under the provisions of this Subpart is suspended or revoked.
- (6) Practice as a certified emergency medical technician or certified first responder during the time his certification has lapsed by reason of his intentional failure to renew the certification.
- (7) Conduct or serve as an assistant instructor in conducting any course claiming to prepare students for certification as emergency medical personnel under the provisions of this Subpart, unless both the course and the instructor have been approved by the bureau.
- (8) Knowingly aid or abet another person in the violation of this Subpart.

Acts 1997, No. 913, § 2.

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§1232.10. Prosecution

A. Any person who violates the provisions of R.S. 40:1232.9 shall be subject to prosecution. This prosecution shall be brought in the name of the state, provided the provisions of this Subpart shall not prevent or interfere with a prosecution brought by the district attorney of a parish when a prosecution or a pre-prosecution proceeding has been initiated by the district attorney.

B. Whoever is found guilty of violating any provision of R.S. 40:1232.9 shall, upon a first conviction, be fined not more than five hundred dollars or imprisoned for not more than six months, or both. Upon a second or subsequent conviction, the offender shall be imprisoned with or without hard labor for not more than two years and fined not more than five thousand dollars.

Acts 1997, No. 913, § 2.

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§1232.11. Exceptions

This Subpart shall not apply to the practice of emergency medical services by a legally qualified emergency medical technician who is employed by the United States government, or by any bureau, division, or agency thereof, while in the discharge of his official duties.

Acts 1997, No. 913, § 2.

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§1233. Civil immunity

A.(1) Any emergency medical person certified pursuant to the provisions of this Subpart who renders emergency medical care to an individual while in the performance of his medical duties and following the instructions of a physician shall not be individually liable to such an individual for civil damages as a result of acts or omissions in rendering the emergency medical care, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to such an individual. Nothing herein shall relieve the driver of the emergency vehicle from liability arising from the operation or use of such vehicle.

(2) The immunity granted to emergency medical personnel by the provisions of this Subpart shall extend to parish governing authorities, police departments, sheriffs' offices, fire department, or other public agencies engaged in rendering emergency medical services and its insurers with respect to such emergency medical services unless the emergency medical personnel employed by such agencies would be personally liable under the provisions of Paragraph (1) of this Subsection.

B. Any physician who provides instructions to any emergency medical personnel by use of electronic or other means of transmission in connection with the rendering of emergency medical services to an individual shall not be liable unto such personnel or to an individual or both for civil damages arising from his opinion, judgments, actions, or duties, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to the individual, while exercising that degree of skill and care ordinarily employed by members of his profession in good standing.

C. No hospital facility which allows the use of telemetry or other equipment to maintain contact between a certified emergency medical technician and a physician shall be liable for any civil damages arising out of the use of such equipment except for acts or omissions by hospital personnel that are grossly negligent which result in harm to an individual.

D. No registered nurse, certified emergency medical technician, or other health professional licensed in Louisiana who supervises, instructs, or trains emergency medical personnel in accordance with curricula developed or adopted by the bureau shall be liable for any civil damages arising out of the actions or negligence of the emergency medical personnel whom he supervised, instructed, or trained.

E. There shall be no cause of action or civil liability, and no certificate holder or applicant shall have any cause of action or any claim for damages against any individual, person, or institution providing information to the commission or its agents or employees when that individual, person, or institution acts without malice and when there is a reasonable belief that such information is accurate.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1997, No. 913, § 2.

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§1234. Duties of emergency medical personnel

A.(1) A certified emergency medical technician-basic may perform any of the following functions:

(a) Rescue, first aid, resuscitation, and other services to the extent that he has been trained to perform such services under the provisions of the National Standard EMT-Basic training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) When authorized by medical direction, an emergency medical technician-basic or an emergency medical technician-intermediate may administer or aid the patient in the administration of a dose of epinephrine from an auto-injector to treat allergic reaction and anaphylaxis.

(c) Services which may be performed by a certified emergency medical technician-intermediate as provided in Subsection B of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-intermediate clinical or field internship program and while he is under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(d) Services which may be performed by a certified emergency medical technician-paramedic, as provided in Subsection C of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-paramedic clinical or field internship program and while he is under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by the certified emergency medical technician-basic under any of the following conditions:

(a) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's order.

(b) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

B.(1) A certified emergency medical technician-intermediate may perform any of the following functions:

(a) Any services to the extent that he has been trained to perform such services under the provisions of the National Standard EMT-Intermediate training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) Services which may be performed by a certified emergency medical technician-paramedic, as provided in Subsection C of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-paramedic clinical or field internship program and while under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by the certified emergency medical technician-intermediate under any of the following conditions:

(a) While caring for a patient in a participating hospital under the direct supervision of a physician.

(b) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's orders.

(c) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

C.(1) A certified emergency medical technician-paramedic may perform any of the following functions:

(a) Any services to the extent that he has been trained to perform such service under the provisions of the National Standard EMT-Paramedic training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) Administration of other drugs or procedures for which the certified emergency medical technician-paramedic has received training, certification, and approval by the commission and which may be considered necessary by the ordering physician.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by a certified emergency medical technician-paramedic under any of the following conditions:

(a) While his caring for a patient in a participating hospital under the direct supervision of a physician.

(b) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's orders.

(c) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

D. A certified first responder may perform any of the following functions:

(1) Rescue, first aid, resuscitation, and other services to the extent that he has been trained to perform such services under the provisions of the first responder training curriculum developed and adopted by the bureau.

(2) Administration of automated cardiac defibrillation in accordance with rules and regulations promulgated by the bureau in accordance with the Administrative Procedure Act and a protocol that shall be approved by the local parish medical society, or its designee, and the local physician medical director.

E.(1) In a case of a life-threatening situation as determined by a certified emergency medical technician-intermediate or an emergency medical technician-paramedic, when voice contact with a physician or when telemetered electrocardiogram communication is delayed, not possible, or when the delay in treatment could endanger the life of the patient, such a person may render services, in accordance with a protocol that shall be established by the emergency medical services committee or the executive committee of the parish or component medical society, or its designee, until voice or telemetered electrocardiogram communication can be established at the earliest possible time.

(2) Such services may be rendered for the following conditions:

(a) Cardiac arrest.

(b) Ventricular tachycardia.

(c) Supraventricular tachycardia.

(d) Premature ventricular ectopy when greater than six per minute, multifocal, bigeminal, occurring in bursts of two or more, falling on or close to the T wave.

(e) Severe, unrelieved, suspected cardiogenic chest pain, or suspected myocardial infarction.

(f) Bradycardias.

(g) Hypoglycemia.

(h) Anaphylactic reactions.

(i) Hypovolemic shock.

(j) Unconsciousness, altered mental status, or respiratory depression from suspected drug overdose.

(k) Treatment induced unconsciousness, altered mental status, hypotension, or respiratory depression from physician ordered or protocol appropriate paramedic administered narcotics.

(l) Respiratory failure or respiratory arrest.

(m) Active seizure.

(3) Nothing in this Subsection shall be construed to authorize a certified emergency medical technician-paramedic to administer any Schedule II narcotic without a direct order by a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners or in accordance with an approved protocol adopted pursuant to Subsection E(1) and (2).

F.(1) The bureau shall adopt rules and regulations to allow emergency medical personnel to institute a program for the delivery of automated cardiac defibrillation in the pre-hospital setting.

(2) The bureau shall adopt rules and regulations for training to allow all levels of certified medical technicians to carry and administer epinephrine by auto-injectors to patients experiencing allergic reactions or anaphylaxis.

G. Any individual, training organization, organization, or other entity violating the provisions of this Section shall be guilty of a misdemeanor, conviction of which shall subject the offender to a fine of not less than five hundred dollars nor more than one thousand dollars for each separate offense.

H. In the event that there is no organized or functional local parish medical society in a parish of the state, the provisions of this Section which require the approval of an emergency medical service protocol by the local parish medical society or its designee may be performed by a parish or multiparish medical society which is adjacent or contiguous to the parish without an organized or functional local parish medical society. In the absence of such adjacent or contiguous parish or multiparish medical society, the district medical society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society. In the event the district medical society does not approve an emergency medical service protocol for the parish without an organized or functional local parish medical society, the disaster and emergency medical services committee of the Louisiana State Medical Society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society.

I. The department shall promulgate rules and regulations establishing basic guidelines for statewide emergency medical service protocols. Such rules and regulations shall be based on the recommendations of the Louisiana State Medical Society's disaster and emergency medical services committee, which shall serve as an advisory committee to the department for this purpose.

Acts 1977, No. 626, § 2; Amended by Acts 1978, No. 469, § 1; Acts 1979, No. 688, § 1; Acts 1984, No. 242, § 1; Acts 1984, No. 243, § 1; Acts 1986, No. 630, § 1, eff. July 6, 1986; Acts 1987, No. 665, § 1, eff. July 9, 1987; Acts 1988, No. 776, § 1; Acts 1989, No. 195, § 1, eff. June 26, 1989; Acts 1990, No. 211, § 1, eff. Jan. 1, 1991; Acts 1991, No. 974, § 1, eff. July 24, 1991; Acts 1997, No. 913, §§ 2, 3; Acts 1999, No. 427, § 1; Acts 2001, No. 385, § 1.

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§1234.1. Hazardous substance transportation emergencies; payment for emergency medical services

The person or entity who in the course of transporting hazardous substances or materials causes or contributes to a discharge of a hazardous substance or material that causes an emergency condition shall be obligated to pay the reasonable costs of any emergency medical services provider whose presence or service, including standby, is requested at such hazardous substance emergency by any person authorized by the Department of Public Safety and Corrections or the Department of Environmental Quality to respond to a hazardous substance transportation emergency. Nothing in this Section shall affect the rights of any party to recover under any other provision of law.

Acts 1999, No. 209, § 1.

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§1235. Qualifications to operate ambulances; equipment; penalty

A.(1) No person or individual shall conduct, maintain, or operate an ambulance on any street, alley, or public way or place in the state unless the ambulance is staffed with a minimum of two persons, one of whom shall be a certified emergency medical technician.

(2)(a) No person or individual shall provide services in any capacity on any ambulance unless he is a certified first responder, a certified emergency medical technician, a licensed registered or practical nurse, or a physician.

(b) No individual shall transport any ill or injured person on a stretcher in a vehicle that is not staffed, equipped, insured, and licensed as an ambulance under this Subpart.

(c) No individual shall provide services in any capacity on any ambulance unless he holds a cardiopulmonary resuscitation provider card issued by the American Heart Association or the American Red Cross.

(d) No individual shall transport any ill or injured person by ambulance unless the sick or injured person is attended by a certified emergency medical technician, a registered nurse, or a physician in the patient compartment.

(3)(a) The Department of Health and Hospitals shall promulgate rules and regulations establishing a list of required medical and safety equipment which shall be carried as part of the regular equipment of every ambulance. No person shall conduct, maintain, or operate an ambulance which does not carry with it, in fully operational condition, all of the equipment included in the list, which shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1234 and which shall be based upon the recommendations of an advisory committee known as the Ambulance Standards Committee.

(b) After its initial establishment, the list shall be subject to review after four years and at any time thereafter. The list shall not be changed more often than once every four years. However, nothing in this Paragraph shall prohibit the department from supplementing the list with state-of-the-art, newly developed devices, equipment, or medications approved by the Ambulance Standards Committee that may be carried in lieu of other items on the list.

(4) The Ambulance Standards Committee of the Emergency Medical Services Task Force as established by the assistant secretary of the office of public health is hereby established. The committee shall be composed of the following members and such additional members as the assistant secretary of the office of public health may appoint:

- (a) The medical director of the Department of Health and Hospitals.
- (b) The director of the bureau of emergency medical services of the Department of Health and Hospitals.
- (c) A representative of the health standards section of the Department of Health and Hospitals.
- (d) One representative, appointed by the assistant secretary of the office of public health, from each of the following:
 - (i) The Louisiana State Medical Society.
 - (ii) The American College of Emergency Physicians.
 - (iii) The American College of Surgeons.
 - (iv) The American Academy of Pediatrics.
 - (v) The Louisiana Ambulance Association.
 - (vi) The Louisiana Rural Ambulance Alliance.
 - (vii) The Louisiana Association of Nationally Registered Emergency Medical Technicians.
 - (viii) The Governor's Emergency Medical Services for Children Advisory Council.
 - (ix) Municipal third service ambulance providers.
 - (x) Rural ambulance providers.
 - (xi) Private sector ambulance providers.
 - (xii) Fire service-based ambulance providers.
 - (xiii) Hospital-based emergency medical services providers.
 - (xiv) Professional firefighters.
 - (xv) The Professional Firefighters Association of Louisiana.

(5) Nothing herein shall prohibit the transportation of an injured or ill person in an ambulance or industrial ambulance staffed by persons with less than the required qualifications in an emergency situation where there is no reasonable expectation of the prompt response by an ambulance staffed by persons with the required qualifications.

(6) Nothing herein shall prohibit a firefighter, law enforcement officer, or good Samaritan from assisting an ambulance at the scene of an emergency or while transporting a patient to a medical facility at the request of the emergency medical technician.

(7) Nothing herein shall prohibit an individual without the required qualifications from riding in an ambulance for the purpose of training, observation, or continuing education.

B.(1) Repealed by Acts 2001, No. 625, § 2.

(2) Nothing in this Subpart shall be construed to prohibit the transportation of an injured or ill individual in an invalid coach in an emergency situation where there is no reasonable expectation of the prompt response of an ambulance or industrial ambulance.

C. The department shall conduct or may authorize another public agency to conduct an inspection of any ambulance service provider or invalid coach provider and to report any violation to the appropriate district attorney's office.

D.(1) The provisions of this Section shall not apply:

(a) To ambulances operated by a federal agency of the United States government.

(b) Repealed by Acts 2001, No. 625, § 2.

(c) To ambulances which are rendering assistance to licensed ambulances in the case of a major disaster, be it natural or manmade, in which the licensed ambulances are insufficient or otherwise not capable of coping.

(d) Repealed by Acts 2001, No. 625, § 2.

(e) To ambulances which are operated from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside the state, but no such ambulance shall transport any patient point to point within the state except in the case of disaster as outlined in this Subpart.

(2) This provision shall not apply to individuals who are employed to function on licensed air ambulances solely to act as pilots.

(3) The provisions of this Section shall not apply to industrial ambulances providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

E. The provisions of this Section shall apply to all parishes or municipalities except those electing not to comply as expressed to the department in a written resolution by the governing body of such parish or municipality. If any parish or municipality elects to be excluded from this Section, it may later elect to be included by resolution. The election of any parish to be included or excluded from this Section shall in no way affect the election of any municipality to be included or excluded.

F. Whoever violates this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days or both. The penalty prescribed by this Section shall be doubled for any subsequent offense.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1986, No. 632, § 1; Acts 1987, No. 480, § 1, eff. July 9, 1987; Acts 1997, No. 913, § 2; Acts 1997, No. 982, § 1, eff. July 10, 1997; Acts 2001, No. 625, § 1 and 2.

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§1235.1. Qualifications to operate emergency medical response vehicles; vehicle requirements; equipment; penalties

A.(1) No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle on any street, alley, or public way or place in the state unless the vehicle is staffed with at least one individual who is a Louisiana state-certified nationally registered emergency medical technician.

(2) No person shall provide services in any capacity on an emergency medical response vehicle unless he is the holder of a certification by the Department of Health and Hospitals or its agent as a first responder; or a certification of an emergency medical technician issued by the National Registry of Emergency Medical Technicians; or a certificate of licensure as a registered nurse or licensed practical nurse; or is a physician or surgeon licensed to practice medicine by the Louisiana State Board of Medical Examiners. No person shall provide services in any capacity without holding a valid certification of cardiopulmonary resuscitation issued by the American National Red Cross or the American Heart Association.

B. No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle which:

(1) Does not carry with it as part of its regular equipment the list of equipment for emergency medical response vehicles as prescribed in rules and regulations promulgated by the Department of Health and Hospitals based on the recommendations of the Ambulance Standards Committee of the Emergency Medical Services Task Force as established by the assistant secretary of the office of public health. This list shall be based upon the recommendations of the American College of Surgeons as provided in R.S. 40:1235(A)(3). The list shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1234. After initial promulgation, such list shall be subject to review after four years and anytime thereafter. The list shall not be changed more often than once every four years. However, nothing shall preclude the Department of Health and Hospitals from supplementing the list with state of the art, newly developed devices, equipment, or medications approved by the Ambulance Standards Committee of the Emergency Medical Services Task Force that may be carried in lieu of other items on the list of equipment.

(2) Is not marked with the company name or logo on both sides and the rear and does not have fully visible and audible warning signals in accordance with rules and regulations promulgated by the Department of Health and Hospitals.

(3) Does not meet the minimum motor vehicle safety standards as prescribed in the rules and regulations promulgated pursuant to the Motor Vehicle Inspection Act, R.S. 32:1302 et seq.

(4) Is not insured in accordance with the provisions of R.S. 40:1236.4.

(5) Is not owned or leased by the certified ambulance service operating the vehicle.

C.(1) The Department of Health and Hospitals or its designee shall be empowered to conduct inspections of emergency medical response vehicles. The department shall certify such vehicles and shall have the authority to deny, probate, suspend, or revoke certifications. The department shall also have the authority to report any violations to the appropriate district attorney's office.

(2) Certification issued by the Department of Health and Hospitals shall serve as authorization of the ambulance service to operate the emergency medical response vehicle pursuant to the provisions of this Section.

D. Whoever violates the provisions of this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days, or both. The penalty prescribed by this Subsection shall be doubled for any subsequent offense.

Acts 1997, No. 297, § 2.

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§1235.2. Ambulance providers; licensure

A. No person, firm, corporation, association, or government entity shall conduct, manage, operate, or maintain an ambulance service in Louisiana without a valid current license from the department.

B. The application for such license shall be submitted to the department on forms provided for that purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an ambulance provider as specified by regulations promulgated by the department under the Administrative Procedure Act.

C. An applicant seeking licensure as an ambulance provider shall:

(1) Submit a completed application to the department on such forms and including such information and supporting documentation as required by the department. Such information shall include:

(a) A notarized certificate of insurance verifying that the provider has the legally mandated insurance coverage.

(b) Proof that the provider has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(c) All medical protocols signed by the physician-medical director with their prescribed approvals by the parish or component medical society.

(d) Copies of personnel certifications. However, the department may provide for inspection and review of these certifications at an applicant's offices by prior agreement between the applicant and the department.

(e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.

(2) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.

(3) Successfully complete an inspection by the department which includes the following:

(a) An inspection of all vehicles to determine that they are in safe and working order and that they are equipped with all of the prescribed medical equipment as required by this Section and R.S. 40:1235 and 1235.1. What is safe and working order shall be determined pursuant to provisions of Title 32 of the Louisiana Revised Statutes of 1950 and the Louisiana Motor Vehicle Inspection Manual in addition to the provisions of this Section and R.S. 40:1235 and 1235.1. Each vehicle successfully completing the inspection shall receive a permit authorizing it to be operated as part of the applicant's service.

(b) An inspection of all personnel certifications to verify that they meet the requirements of law.

(c) Inspection and, when deemed necessary by the department, verification of the information provided as required by Paragraph (1) of this Subsection and that such information remains current.

(d) Verification that the provider has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the provider has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.

(e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.

D. If an applicant's background investigation indicates that the applicant has a felony conviction or has had any license pertaining to the provision of emergency medical services revoked in another jurisdiction, then the license may be denied.

E. In order to renew an ambulance provider license, the applicant shall:

(1) Submit a renewal application to the department not more than thirty days prior to expiration of the license.

(2) Provide any required documentation.

(3) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any vehicle as deemed appropriate by the department.

F. Intentional falsification of material information provided pursuant to this Section shall be grounds for immediate revocation of any license granted pursuant to this Section.

G. Failure to comply with any of the provisions of this Section shall constitute grounds for probation or license suspension or revocation in accordance with rules and regulations established pursuant to the Administrative Procedure Act.

H. Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.

I. Any entity currently certified to provide ambulance services in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1999, No. 1113, § 1; Acts 2001, No. 517, § 1; Acts 2001, No. 1032, § 14.

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§1235.3. Ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity currently operating or planning to operate an ambulance service shall pay the following fees to the department, as applicable:

(1) An initial licensing fee of one hundred fifty dollars, to be submitted with the initial application for a license.

(2) An annual license renewal fee of one hundred dollars, to be submitted with each annual application for renewal of a license.

(3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.

(4) A vehicle inspection fee of seventy-five dollars for each ambulance or emergency medical response vehicle, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for a vehicle added to service by the applicant.

(5) A delinquent fee of one hundred dollars for each ambulance and emergency medical response vehicle, for failure to timely pay a vehicle inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the vehicle inspection fee.

(6) A change of address fee of ten dollars for each change of address.

(7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1113, § 1.

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§1235.4. Ambulance services; violations; penalties; fines; notices; hearings; appeals

A. The opening or operation of an ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars. Each day's violation shall constitute a separate offense.

B.(1) Any person or entity violating the provisions of this Part when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules, in accordance with the Administrative Procedure Act, which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.

(2) The schedule of civil fines and other penalties by class of violation is as follows:

(a) Class A violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Part concerning the number or qualifications of personnel, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(b) Class B violations: If an ambulance service is found to have been operating in violation of any of the requirements of this Part concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(c) Class C violations: If an ambulance or emergency medical response vehicle is found to have been operated without undergoing any inspection required under the provisions of this Part, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(d) Class D violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Part concerning medical and safety equipment, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

(e) Class E violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of Chapter 7 of Title 32 of the Louisiana Revised Statutes of 1950, the ambulance or emergency response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

C. The department shall adopt rules and regulations, in accordance with the Administrative Procedure Act, to provide notice to the ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.

D. The ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.

E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients or clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1113, § 1.

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§1236. Advanced emergency medical technicians

In addition to the requirements of R.S. 40:1235, any hospital, ancillary medical facility, or ambulance service, whether public or private, may conduct a program utilizing any certified emergency medical technician-intermediate or certified emergency medical technician-paramedic to supervise and direct the delivery of emergency medical care to the sick and injured at the scene of an emergency during transport to a hospital, while in the hospital emergency department, and until care responsibility is assumed by the regular hospital staff.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1997, No. 913, § 2.

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§1236.1. Unauthorized response by commercial ambulances; penalties

A. No commercial ambulance shall make any emergency run based solely on information intercepted by use of a radio communication scanner or similar device except in cases where human life is threatened, unless that commercial ambulance has been specifically requested to respond to such emergency. Nothing in this Section shall be construed to prohibit service to a subscriber of a commercial ambulance service. No person certified under this Part or certified or licensed pursuant to any provision of Louisiana law shall operate a commercial ambulance in violation of this Section.

B. The certificate or license of any person certified under this Part or certified or licensed pursuant to Louisiana law who violates the provisions of this Section shall be suspended by the appropriate certification or licensing authority for not less than thirty days, nor more than six months.

C. Proceedings to enforce the provisions of this Section shall be conducted in accordance with the Administrative Procedure Act.

Acts 1987, No. 187, § 1.

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§1236.2. Air ambulance services; licensure

A. No person, firm, corporation, association, or governmental entity shall conduct, manage, operate, or maintain an air ambulance service in the state without a valid current license from the department.

B. The application for such license shall be submitted to the department on forms provided for this purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an air ambulance service as specified by regulations promulgated by the department in accordance with the Administrative Procedure Act.

C. An applicant seeking licensure as an air ambulance service shall:

(1) Submit a completed application to the department on such forms and including such information as specified by the department.

(2) Submit the appropriate initial license fee as provided in this Part.

(3) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.

(4) Submit to and successfully complete an inspection by the department to include the following:

(a) An inspection of all aircraft utilized as air ambulances to ensure that all required medical and safety equipment is present and operational. The medical and safety equipment shall conform to local protocol as established by the medical director of the air ambulance service. The list of required medical and safety equipment shall be established under rules promulgated by the department and shall be based upon the recommendations of an advisory committee to be composed of the following persons:

(i) The medical director of the department.

(ii) The director of the bureau.

(iii) One representative of the health standards section of the department's office of the secretary, bureau of health services financing.

(iv) One representative of the Governor's Emergency Medical Services for Children Advisory Council.

(v) One representative of the Department of Transportation and Development, office of public works and intermodal transportation, aviation section.

(vi) One representative of each air ambulance service certified or licensed in accordance with this Part.

(b) Verification that all aircraft meet the appropriate Federal Aviation Administration requirements.

(c) Review of certifications of all personnel to ensure that they meet all Federal Aviation Administration requirements and local pilot and medical personnel staffing protocols.

(d) Verification that the applicant is in receipt of an original notarized certificate of insurance for the following coverage:

(i) Five hundred thousand dollars of aircraft liability insurance.

(ii) Five hundred thousand dollars of medical malpractice insurance or proof of participation in the Patient's Compensation Fund.

(iii) Five hundred thousand dollars of commercial general liability insurance.

(e) Verification that the service has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(f) A review of medical protocols signed by the physician medical director of the air ambulance service, accompanied by the necessary approvals of the parish or component medical society in the service's parish of domicile.

(g) Verification that the service has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the service has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.

(5) Certify that all aircraft and crew members meet applicable Federal Aviation Administration regulations.

(6) Specify if the service uses either fixed-wing or rotary-winged aircraft, or both.

D. If a service provides interhospital air transport, air transport from hospital to another facility, air transport from hospital to home, or similar air transport, the service must certify that a medical director is employed to advise the service on the appropriate

staffing, equipment, and supplies to be used for the transport of patients aboard an air ambulance.

E. In order to renew a license for an air ambulance service, the applicant shall:

(1) Submit a renewal application to the department not more than ninety days before the expiration of the license.

(2) Submit the appropriate fee as provided herein in Subsection B.

(3) Provide documentation that current standards for issuance of a license are met.

(4) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any airplane deemed appropriate by the department.

F. Intentional falsification of information provided pursuant to this Section or failure to comply with any provisions hereof shall be grounds for immediate revocation of any license granted pursuant to this Section.

G.(1) Nothing in this Section shall be construed to prohibit, limit, or regulate random mercy flights made by a person or corporation in privately or publicly owned aircraft who may on occasion transport individuals who may need medical attention during transport, or human organs, intended for transplantation, including but not limited to the heart, lungs, kidneys, liver, and other soft tissue and bones, on either a not-for-profit basis or gratuitously.

(2) Failure to comply with any of the provisions of this Section shall constitute grounds for probation, suspension, revocation of license, or other administrative sanction in accordance with rules and regulations established by the department.

(3) Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.

H. Any entity currently certified to provide ambulance service in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1988, No. 982, § 1; Acts 1999, No. 1114, § 1; Acts 2001, No. 517, § 1.

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§1236.3. Emergency transportation in ambulances; payment

A. Payment under Title XIX of the Social Security Act medical assistance program for emergency transportation services of a person by ambulance shall be the same rate, but not to exceed the rate established under Medicare.

B. Emergency medical transportation services shall include but not be limited to the following:

- (1) Basic life support.
- (2) Advanced life support.
- (3) Mileage.
- (4) Oxygen.
- (5) Intravenous fluids.
- (6) Disposable supplies.

Acts 1990, No. 448, § 1.

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§1236.7. Air ambulance services; violations; penalties; fines; notice; hearings; appeal

A. The opening or operation of an air ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars, and each day's violation shall constitute a separate offense.

B.(1) Any person or entity violating the provisions of this Part when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules in accordance with the Administrative Procedure Act which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.

(2) The schedule of civil fines and other penalties by class of violation is as follows:

(a) Class A Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Part concerning the number or qualifications of personnel, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(b) Class B Violations: If an air ambulance service is found to have been operating in violation of any of the requirements of this Part concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(c) Class C Violations: If an air ambulance is found to have been operated without undergoing any inspection required under the provisions of this Part, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(d) Class D Violations: If an air ambulance is found to have been operated in violation of any of the requirements of this Part concerning medical and safety equipment, the air ambulance shall be immediately taken out of service until it meets those requirements, and the air ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

C. The department shall adopt rules and regulations in accordance with the Administrative Procedure Act to provide notice to the air ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.

D. The air ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the air ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.

E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No air ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients and clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1114, § 1.

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SUBPART D. AUTOMATED EXTERNAL DEFIBRILLATORS

§1236.11. Legislative findings

A. The Legislature of Louisiana finds that each year more than three hundred fifty thousand Americans die from out-of-hospital sudden cardiac arrest. More than ninety-five percent of these Americans die, in many cases because a lifesaving defibrillator did not arrive at the scene of the emergency in time.

B. The American Heart Association estimates that more than twenty thousand deaths may be prevented each year if defibrillators were more widely available to designated responders.

C. Many communities throughout the state and nation have invested in 911 emergency response systems, emergency personnel, and ambulance vehicles. However, many of these communities do not have enough defibrillators in their community.

D. It is therefore the intent of the legislature to encourage greater acquisition, deployment, and use of automated external defibrillators in communities throughout the state.

Acts 1999, No. 825, § 1.

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§1236.12. Definitions

As used in this Subpart "automated external defibrillator" and "AED" mean a medical device heart monitor and defibrillator that:

- (1) Has received approval of its pre-market notification filed pursuant to 21 U.S.C. 360(k) from the United States Food and Drug Administration.
- (2) Is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining whether defibrillation should be performed.
- (3) Upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.
- (4) Is capable of delivering the electrical impulse to an individual's heart.

Acts 1999, No. 825, § 1.

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SUBPART D. AUTOMATED EXTERNAL DEFIBRILLATORS

§1236.13. Persons in possession of AED's; training, testing, and notification requirements; manufacturer responsibility

A. In order to ensure public health and safety, any person or entity that possesses an AED shall ensure that:

- (1) The AED is maintained and tested according to the manufacturer's guidelines.
- (2) A licensed physician or advanced practice registered nurse who is authorized to prescribe is involved in the possessor's program to ensure compliance with the requirements for training, emergency medical service (EMS) notification, and maintenance.
- (3)(a) Expected AED users regularly, on the premises of a particular entity, such as a work site, receive appropriate training in cardiopulmonary resuscitation (CPR) and in the use of an AED by the American Heart Association or by any other nationally recognized course in CPR and AED use.
- (b) For purposes of this Paragraph, "expected AED users" shall be any person designated by the possessor to render emergency care.
- (4) The emergency medical services system is activated as soon as possible when an individual renders emergency care to an individual in cardiac arrest by using an AED.
- (5) Any clinical use of the AED is reported to the licensed physician or advanced practice registered nurse involved in the possessor's program.

B. Any person or entity that possesses an AED shall notify the bureau of emergency medical services in the office of public health of the Department of Health and Hospitals and a local provider of emergency medical services, such as 911 service, local ambulance service, or the fire department of the acquisition, location, and type of AED.

C. Any manufacturer, wholesale supplier, or retailer of an AED shall notify purchasers of AED's intended for use in the state of the requirements of this Section.

Acts 1999, No. 825, § 1.

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SUBPART D. AUTOMATED EXTERNAL DEFIBRILLATORS

§1236.14. Limitation of liability

In addition to the civil immunity provided to persons rendering emergency assistance as provided by law, including R.S. 9:2793, R.S. 37:1731, 1732, and 1735, and R.S. 40:1231.2, any prescribing advanced practice registered nurse or physician who authorizes the purchase of the AED, any physician or advanced practice registered nurse involved in the possessor's program, any individual or entity which provides training in cardiopulmonary resuscitation and in the use of an AED, any purchaser of an AED, any person or entity responsible for the site where an AED is located, and any expected user regularly on the premises shall not be liable for any civil damages arising from any act or omission of acts related to the operation of an AED that do not amount to willful or wanton misconduct or gross negligence.

Acts 1999, No. 825, § 1.

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SUBPART C. EMERGENCY MEDICAL TRANSPORTATION

§1236.5. Emergency medical technician fund

A. There is hereby established a special fund in the state treasury to be known as the Emergency Medical Technician Fund, hereafter referred to as "fund", which shall consist of monies generated by the fees collected from the purchase of prestige license plates for certified emergency medical technicians as provided in R.S. 47:463.47. In addition, the legislature may make annual appropriations to the fund for the purposes set forth in this Section.

B. All monies collected pursuant to R.S. 47:463.47 shall be deposited in the Bond Security and Redemption Fund as required by Article VII, Section 9(B) of the Constitution of Louisiana and thereafter shall be credited to the fund.

C. The monies in the fund shall be appropriated to the Department of Health and Hospitals solely for purchasing equipment for the testing of applicants for certification as an emergency medical technician and to cover other testing-related costs. All unexpended and unencumbered monies remaining in the fund at the close of each fiscal year shall remain in the fund. Monies in the fund shall be invested by the state treasurer in the same manner as monies in the state general fund. All interest earned from the investment of monies in the fund shall be deposited and remain to the credit of the fund.

Acts 1997, No. 1131, §1, eff. July 14, 1997.

ACT No. 885

Regular Session, 2004

HOUSE BILL NO. 1584

BY REPRESENTATIVES RICHMOND, FRITH, AND JACKSON

1 AN ACT

2 To enact R.S. 40:1236.13(D), (E), and (F), relative to automated external defibrillators; to
3 require physical fitness facilities and institutions of higher education that compete in
4 intercollegiate sport contests to have an automated external defibrillator on its
5 premises; and to provide for related matters.

6 Be it enacted by the Legislature of Louisiana:

7 Section 1. R.S. 40:1236.13(D), (E), and (F) are hereby enacted to read as follows:

8 §1236.13. Persons in possession of AEDs; training, testing, and notification
9 requirements; manufacturer responsibility; possession required

10 * * *

11 D.(1) The owner of or the entity responsible for a physical fitness facility
12 shall keep an AED on its premises.

13 (2) As used in this Subsection:

14 (a) "Physical fitness facility" means a facility for profit or nonprofit with a
15 membership of over fifty persons that offers physical fitness services. This term
16 includes but is not limited to clubs, studios, health spas, weight control centers,
17 clinics, figure salons, tanning centers, athletic or sport clubs, and YWCA and
18 YMCA organizations.

19 (b) "Physical fitness services" means services for the development of
20 physical fitness through exercise or weight control. It shall not include a business
21 limited solely to the practice of physical therapy, as defined in R.S. 37:2401, by a
22 therapist licensed by the Louisiana State Board of Medical Examiners, nor shall it
23 apply to medically related services performed by a physician licensed by the
24 Louisiana State Board of Medical Examiners in a private office, clinic, or hospital.

1 E. Any institution of higher education that competes in intercollegiate
2 athletics shall have an AED on its premises in its athletic department.

3 F. The office of public health within the Department of Health and Hospitals,
4 through its center for community health, emergency medical services shall
5 promulgate all necessary rules and regulations to implement the provisions of
6 Subsections D and E of this Section. Such rules and regulations shall, at a minimum,
7 provide for compliance, enforcement, and penalties.

8 Section 2. This Act shall become effective on January 1, 2005.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____

ACT No. 443

Regular Session, 2004

HOUSE BILL NO. 1543

BY REPRESENTATIVE BRUNEAU

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AN ACT

To amend and reenact R.S. 40:1236.13(A)(3)(a) and 1236.14, relative to automated external defibrillators; to authorize the use of automated external defibrillators by private security personnel; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1236.13(A)(3)(a) and 1236.14 are hereby amended and reenacted to read as follows:

§1236.13. Persons in possession of AED's; training, testing, and notification requirements; manufacturer responsibility

A. In order to ensure public health and safety, any person or entity that possesses an AED shall ensure that:

* * *

(3)(a) Expected AED users regularly, on the premises of a particular entity, such as a work site or users who carry an AED in a private security patrol vehicle, receive appropriate training in cardiopulmonary resuscitation (CPR) and in the use of an AED ~~by the American Heart Association or by~~ from any other nationally recognized course in CPR and AED use.

* * *

§1236.14. Limitation of liability

In addition to the civil immunity provided to persons rendering emergency assistance as provided by law, including R.S. 9:2793, R.S. 37:1731, 1732, and 1735, and R.S. 40:1231.2, any prescribing advanced practice registered nurse or physician who authorizes the purchase of the AED, any physician or advanced practice registered nurse involved in the possessor's program, any individual or entity which provides training in cardiopulmonary resuscitation and in the use of an AED, any

1 purchaser of an AED, any person or entity responsible for the site or the private
2 security patrol vehicle where an AED is located, and any expected user regularly on
3 the premises or in the vehicle shall not be liable for any civil damages arising from
4 any act or omission of acts related to the operation of or failure to operate an AED
5 that do not amount to willful or wanton misconduct or gross negligence.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____

ACT No. 797

Regular Session, 2004

HOUSE BILL NO. 1228

BY REPRESENTATIVE DURAND

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AN ACT

To amend and reenact R.S. 40:1232.6(introductory paragraph) and 1300.51(3) and (5) and R.S. 44:9(F) and (G) and to enact R.S. 40:1300.51(2)(h), relative to emergency medical personnel; to provide grounds for disciplinary proceedings; to modify definitions; to provide for records of violations of municipal ordinances and of state statutes classified as a misdemeanor or felony; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1232.6(introductory paragraph) and 1300.51(3) and (5) are hereby amended and reenacted and R.S. 40:1300.51(2)(h) is hereby enacted to read as follows:

§1232.6. Grounds for disciplinary proceedings

The commission may discipline emergency medical ~~personnel~~ services professionals by directing the bureau to deny, withhold, revoke, restrict, probate, or suspend a certificate to practice as a certified emergency medical technician or certified first responder, impose fines and assess costs, or otherwise discipline an EMS professional, and the commission may direct the bureau to limit, restrict, or deny a student EMS professional from entering or continuing the clinical phase of EMS education for the following causes:

* * *

§1300.51. Definitions

For the purposes of this Part:

* * *

(2) "Employer" means any of the following facilities, agencies, or programs:

* * *

(h) A nonemergency, nonambulance medical transportation facility or entity.

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SUBPART A. GENERAL PROVISIONS

§1231. Definitions

For purposes of this Part:

(1) "Ambulance" means any authorized emergency vehicle, equipped with warning devices, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such. "Ambulance" shall not mean a hearse or other funeral home vehicle utilized for the transportation of the dead.

(2) "Ambulance service" or "ambulance provider" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in ambulances, individuals who may need medical attention during transport. However, "ambulance service" and "ambulance provider" shall not include any of the following:

(a) An agency of the federal government.

(b) A volunteer nonprofit organization or municipal nonprofit organization operating an invalid coach or coaches.

(c) An entity rendering assistance to a licensed ambulance or ambulances in the case of a major disaster.

(d) A licensed hospital providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital.

(e) An entity operating an ambulance or ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport a patient or patients from a medical facility inside of the state to a location outside of the state.

(f) An entity providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

(3) "Air ambulance" means any aircraft, either fixed-wing or rotary-winged, designed and operated as a part of a regular course of conduct or business to transport a sick or injured individual or which is advertised or otherwise held out to the public as such.

(3.1) "Air ambulance service" means any person, firm, association, or government entity owning, controlling, or operating any business or service which furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting, in air ambulances, individuals who may need medical attention during transport.

(3.2) "Auto-injector" means a spring-loaded needle and syringe with a single dose of epinephrine that will automatically release and inject the medicine.

(4) "Bureau" means the Department of Health and Hospitals, office of public health, bureau of emergency medical services.

(5) "Certified emergency medical technician" means an individual who is certified as any one of the following:

(a) A certified emergency medical technician-basic.

(b) A certified emergency medical technician-intermediate.

(c) A certified emergency medical technician-paramedic.

(6) "Certified emergency medical technician-basic" means an individual who has successfully completed an emergency medical technician- basic training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(7) "Certified emergency medical technician-intermediate" means any individual who has successfully completed an emergency medical technician- intermediate training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(8) "Certified emergency medical technician-paramedic" means any individual who has successfully completed an emergency medical technician- paramedic training program developed and promulgated by the United States Department of Transportation and adopted by the bureau, who is nationally registered, and who is certified by the bureau.

(9) "Certified first responder" means any individual who has successfully completed a training course developed and promulgated by the United States Department of Transportation and adopted by the bureau and who is certified by the bureau.

(10) "Commission" means the Louisiana Emergency Medical Services Certification Commission.

(11) "Department" means the Department of Health and Hospitals.

(12) "Emergency medical personnel" or "emergency service person(s)" means individuals who are certified first responders or certified emergency medical technicians.

(13) "Emergency medical response vehicle" means a marked emergency vehicle with fully visual and audible warning signals operated by a certified ambulance service, the primary purpose of which is to respond to the scene of a medical emergency to provide emergency medical stabilization or support, or command, control, and communications, but which is not an ambulance designed or intended for the purpose of transporting a victim from the scene to a medical facility regardless of its designation. Included are such vehicles referred to but not limited to the designation as "sprint car", "quick response vehicle", "special response vehicle", "triage trucks", "staff cars", "supervisor units", and other similar designations. Emergency medical response vehicles shall not include fire apparatus and law enforcement patrol vehicles which carry first aid or emergency medical supplies and which respond to medical emergencies as part of their routine duties.

(14) "Emergency medical services" or "EMS" means a system that represents the combined efforts of several professionals and agencies to provide prehospital emergency care to the sick and injured.

(15) "EMS task force" means the Emergency Medical Services Task Force, composed of individuals appointed by the assistant secretary of the office of public health, subject to the approval of the secretary of the department, which advises and makes recommendations to the office and the department on matters related to emergency medical services.

(16) "First aid certificate" means a certificate in the Emergency Response Course issued by the American Red Cross or other certificate in a first aid course approved by the bureau and issued to any individual who has successfully completed the required training and met the established standards of such organizations.

(17) "Industrial ambulance" means any vehicle owned and operated by an industrial facility and used for transporting any employee who becomes sick, injured, or otherwise incapacitated in the course and scope of his employment from a job site to an appropriate medical facility.

(18) Repealed by Acts 2001, No. 625, § 2.

(19) "Municipal nonprofit organization" means an organization owned by a parish, municipality, or entity of a parish or municipality which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician.

(20) "Physician" means a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(21) "Volunteer nonprofit organization" means an organization which in its regular course of business responds to a call for help and renders medical treatment and whose attendants are emergency medical personnel, a registered nurse, or a physician and which is chartered as a nonprofit organization under Section 501c of the United States Internal Revenue Code, as a volunteer fire department by the Louisiana state fire marshal's office, or as a nonprofit organization by the Louisiana secretary of state.

Amended by Acts 1968, No. 278,§ 1; Acts 1976, No. 393,§ 1; Acts 1977, No. 626,§ 1; Acts 1978, No. 469,§ 1; Acts 1978, No. 786,§ 5, eff. July 17, 1978; Acts 1979, No. 554,§ 1; Acts 1985, No. 750,§ 1, eff. Jan. 1, 1987; Acts 1991, No. 974,§ 1, eff. July 24, 1991; Acts 1997, No. 297,§ 2; Acts 1997, No. 913,§ 2; Acts 1999, No. 1113,§ 1; Acts 1999, No. 1114,§ 1; Acts 2001, No. 385,§ 1; Acts 2001, No. 625,§ 2.

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§1231.2. Immunity from civil damages

No parish, specialty, component, or state medical society or organization, or its designee, which is statutorily mandated by this Part to participate without compensation or gratuitously participates in an emergency services system, nor any committee of such parish, specialty, component, or state medical society or organization, including the individual members of such committee, or its designee, shall be liable for any civil damages as a result of any act or omission in the performance of their administrative duties or donated services with such emergency services system, including, without limitation, advice, instructions, or other duties regarding policy, protocol, administration, and efficiency of the emergency medical services system. The immunity extended to a parish, specialty, component, or state medical society or organization, or any committee thereof, including the individual members of such committee, including their insurers, or its designee, shall not be applicable for willful or wanton acts or omissions. The immunity extended herein shall be applicable only to an action brought by the person damaged as a result of the performance of any administrative duties or donated services rendered pursuant to the provisions of this Section.

Added by Acts 1979, No. 554, § 2. Amended by Acts 1990, No. 428, § 1; Acts 1997, No. 913, § 2.

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SUBPART B. EMERGENCY MEDICAL PERSONNEL

§1232. Emergency medical personnel training; certification

A. The bureau shall promulgate rules and regulations in accordance with the Administrative Procedure Act for the following:

- (1) To define and authorize appropriate functions and pre-certification and post-certification training programs for emergency medical personnel. All such training programs shall meet or exceed the performance requirements developed by the United States Department of Transportation.
- (2) To specify minimum operational requirements which will assure medical direction, supervision, and control over emergency medical services.
- (3) To specify minimum testing and continuing education requirements for all emergency medical personnel.
- (4) To provide for the issuance of certificates and renewals of certificates for emergency medical personnel.
- (5) To specify initial certification and certification renewal requirements consistent with the National Registry of Emergency Medical Technicians for each level of emergency medical personnel.
- (6) To establish fees for certification and certification renewal.

B. An individual petitioning for certification or certification renewal as a certified emergency medical technician or a certified first responder shall submit an application to the bureau on forms provided by the bureau. The application shall be accompanied by the appropriate fee.

C. The bureau shall affirmatively provide that there is no discrimination toward any individual in the certification process on the basis of race, religion, creed, national origin, sex, or age.

Amended by Acts 1976, No. 393, § 2, 3; Acts 1977, No. 626, § 1; Acts 1985, No. 750, § 1, eff. Jan. 1, 1987; Acts 1987, No. 665, § 2, eff. July 9, 1987; Acts 1997, No. 913, § 2.

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SUBPART B. EMERGENCY MEDICAL PERSONNEL

§1232.1. Fee schedule; fees for certification prohibited

A.(1) The bureau shall not require or collect any fee or charges for certification or recertification of emergency medical personnel who serve as such on a voluntary basis and who receive no compensation of any kind for such services.

(2) The bureau shall not set the fee for certification of an emergency medical technician-basic to exceed fifteen dollars for any individual who is an employee of a municipal law enforcement agency, fire service, or fire protection district who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.

(3) The bureau shall not set the fee for recertification of an emergency medical technician-basic to exceed ten dollars for any individual who is an employee of a municipal law enforcement agency, fire service, or fire protection district who does not perform emergency medical services outside of the individual's official governmental responsibilities for any form of compensation.

B. Except as provided in Subsection A of this Section, the bureau shall assess fees for testing and certification based on the following schedule:

(1) Test fees: Fee

(a) First responder-written only \$ 15.00

(b) First responder-written only

(out of state) 15.00

(c) Basic initial written & practical 60.00

(d) Basic entire practical exam 30.00

(e) Basic partial practical 15.00

(f) Basic testing/retesting-written only 15.00

(g) Basic testing/retesting-written only

- (out of state) 15.00
- (h) Intermediate initial written & practical 75.00
- (i) Intermediate initial written & practical
(out of state) 100.00
- (j) Intermediate retest entire practical 50.00
- (k) Intermediate retest entire practical
(out of state) 65.00
- (l) Intermediate retest partial practical 30.00
- (m) Intermediate retest partial practical
(out of state) 30.00
- (n) Intermediate testing/retesting-written only
(exam only) 15.00
- (o) Intermediate testing/retesting-written only
(exam only) (out of state) 15.00
- (p) Paramedic initial written & practical 90.00
- (q) Paramedic initial written & practical
(out of state) 125.00
- (r) Paramedic retesting-entire practical 60.00
- (s) Paramedic retesting-entire practical
(out of state) 75.00
- (t) Paramedic retesting-partial practical 35.00
- (u) Paramedic retesting-partial practical
(out of state) 40.00

(v) Paramedic testing/retesting written 15.00

(w) Paramedic testing/retesting written

(out of state) 15.00

(2) Certification fees

(a) First responder 10.00

(b) Basic EMT 30.00

(c) Intermediate 40.00

(d) Paramedic 50.00

(3) Recertification

(a) First responder 5.00

(b) Basic EMT 25.00

(c) Intermediate 35.00

(d) Paramedic 45.00

(4) Reciprocity

(a) Basic EMT 60.00

(b) Intermediate 80.00

(c) Paramedic 100.00

C. The department may adopt rules and regulations in accordance with the Administrative Procedure Act to provide for the collection of fees required by the fee schedule provided in this Section.

Acts 1997, No. 913, § 2; Acts 2001, No. 515, § 1.

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SUBPART B. EMERGENCY MEDICAL PERSONNEL

§1232.2. Louisiana Emergency Medical Services Certification Commission; creation; membership; qualifications; terms; vacancies; meetings; officers; compensation; domicile

A. The Louisiana Emergency Medical Services Certification Commission is hereby created within the Department of Health and Hospitals.

B.(1) The commission shall be composed of nine voting members appointed by the governor as follows:

(a) Two emergency medical services administrators, including one representing the private sector and one representing the public sector.

(b) Two certified emergency medical technician-paramedics and one emergency medical technician-basic, at least one of whom shall be a full-time employee of a fire department, who are certified as emergency medical services instructors by the bureau.

(c) Four physicians, one from each of the following organizations:

(i) The American College of Emergency Physicians.

(ii) The American College of Surgeons.

(iii) The Louisiana State Medical Society.

(iv) The American Academy of Pediatrics.

(2) The commission shall also have one nonvoting member appointed by the governor who is a registered nurse and who is a state-certified paramedic to be nominated by the Louisiana State Nurses Association from a list of two names submitted by the Louisiana Emergency Nurses Association.

C. Each member of the commission shall be a resident of Louisiana for at least one year, have had three years experience in his respective field of practice, and be actively engaged in the practice of emergency medical services at the time of his appointment.

D.(1) The initial voting members of the commission shall be appointed no later than October 1, 1997, from a list of two nominees for each appointment submitted by the task force. If the task force fails to submit a list of nominees to the governor by September 1,

1997, the governor shall appoint the respective members of the commission without the nomination list required by this Section.

(2) The nonvoting member shall be appointed to serve terms of three years. The initial member shall be appointed by the governor to an initial term of three years by October 1, 1997 or within thirty days of receipt of the list from the Louisiana State Nurses Association, whichever is later.

E. Each appointment by the governor shall be submitted to the Senate for confirmation.

F.(1) The voting members appointed to the commission shall serve as follows: three members shall be appointed to serve an initial term of one year; three members shall be appointed to serve an initial term of two years; and three members shall be appointed to serve an initial term of three years. Thereafter, each member shall be appointed to serve a term of three years.

(2) No individual shall serve more than two consecutive terms.

G.(1) Subsequent to the appointment of the initial members, the voting members shall be appointed from a list of two nominees for each appointment submitted by the task force. No later than thirty days prior to the termination date of a member's term, the task force or, for the nonvoting member, the Louisiana State Nurses Association, shall submit a list of nominees to the governor. If the Louisiana State Nurses Association or the task force fails to submit the required list of nominees to the governor within thirty days, the governor shall appoint the respective member to fill the vacancy without the nomination list required.

(2) A vacancy on the commission prior to the expiration of a term shall be filled for the remainder of the term. No later than thirty days after the occurrence of a vacancy prior to the expiration of a term, the task force or, for the nonvoting member, the Louisiana State Nurses Association, shall submit a list of nominees to the governor. If the Louisiana State Nurses Association or the task force fails to submit the required list of nominees to the governor within thirty days, the governor shall appoint the respective member to fill the vacancy without the nomination list required.

H. The governor shall call the first meeting of the commission no later than November 30, 1997. At a minimum, the commission shall meet on a quarterly basis and, in addition, shall meet when called by the chairman or upon the written request of at least four voting members of the commission.

I. The commission shall annually elect a chairman, vice chairman, and secretary from among its voting membership and shall maintain a record of the attendance of its members at commission meetings.

J. For each day while performing his official duties, a member of the commission may be reimbursed for expenses and mileage at the same rate set by the division of administration for state employees under the provisions of R.S. 39:231.

K. The commission shall be domiciled in Baton Rouge.

L. The governor shall remove a member of the commission after a hearing by the commission during which charges for removal have been established and provided that a majority of the members have recommended removal.

Acts 1997, No. 913, § 2.

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§1232.3. Powers and duties of the commission

The commission shall:

- (1) Recommend to the bureau requirements and standards of practice for individuals seeking to be certified under this Subpart.
- (2) Approve requirements and standards of practice submitted by the bureau for emergency medical personnel consistent with this Subpart.
- (3) Recommend continuing education requirements and standards to the bureau in accordance with criteria established by the National Registry of Emergency Medical Technicians for individuals seeking to renew a certificate.
- (4) Conduct disciplinary hearings for emergency medical personnel.
- (5) Request that the bureau conduct investigations as necessary.
- (6) Cause the prosecution of any individual who violates any provision of this Subpart.
- (7) Maintain a record of all commission proceedings.

Acts 1997, No. 913, § 2.

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§1232.4. Powers and duties of the bureau

The bureau shall:

- (1) Issue a certificate and renew a certificate to any duly qualified applicant for certification or for certification renewal as a certified first responder or certified emergency medical technician.
- (2) Prescribe application forms for certification and certification renewal.
- (3) Adopt requirements and standards of practice approved by the commission for emergency medical personnel.
- (4) Conduct investigations as requested by the commission.
- (5) Deny, withhold, revoke, restrict, probate, or suspend a certificate as directed by the commission under the provisions of R.S. 40:1232.6.
- (6) Prepare, publish, and update a roster of all emergency medical personnel, including the name and address of each individual.
- (7) Adopt continuing education requirements and standards for individuals seeking to renew a certificate.
- (8) Prepare an annual report detailing the activities of the commission during the past fiscal year including the number and nature of the hearings conducted under the provisions of R.S. 40:1232.7.
- (9) Adopt rules and regulations to implement the provisions of this Subpart in accordance with the Administrative Procedure Act.

Acts 1997, No. 913, § 2.

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§1232.5. Certification; requirements; renewal

A. Applicants for initial certification as emergency medical personnel shall submit the following evidence to the bureau:

(1) Completion of the required approved educational program.

(2) Documentation that the applicant meets the qualifications and requirements as established by the bureau.

B. In lieu of the evidence required by Subsection A of this Section, an applicant may submit evidence that he has been duly licensed or certified in another state, territory, or country or has received military training and certification as emergency medical personnel as defined in R.S. 40:1231, and meets the qualifications and requirements established by the bureau.

C.(1) The certificate shall be renewed every two years provided the applicant seeking renewal completes the application and meets the requirements for renewal established by the bureau prior to the expiration date on his current certificate.

(2) An individual whose certificate expires by his failure to renew as provided may be reinstated provided the applicant submits a completed application and meets any additional requirements established by the bureau for an individual who has failed to timely renew his certificate.

Acts 1997, No. 913, § 2.

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§1232.6. Grounds for disciplinary proceedings

The commission may discipline emergency medical personnel by directing the bureau to deny, withhold, revoke, restrict, probate, or suspend a certificate to practice as a certified emergency medical technician or certified first responder, impose fines and assess costs, or otherwise discipline an EMS professional, and the commission may direct the bureau to limit, restrict, or deny a student EMS professional from entering or continuing the clinical phase of EMS education for the following causes:

- (1) Conviction of selling or attempting to sell, falsely obtaining, or furnishing to a person a certified emergency medical technician or certified first responder certification document.
- (2) Conviction of a crime or offense which reflects the inability of a certified emergency medical technician or certified first responder to provide emergency medical services with due regard for the health and safety of clients or patients or enters a plea of guilty or nolo contendere to a criminal charge regardless of final disposition of the criminal proceeding, including but not limited to expungement or nonadjudication.
- (3) Is unfit or incompetent by reason of negligence, habit, or other cause.
- (4) Is habitually intemperate in the use of or abuses alcohol or habit-forming drugs.
- (5) Is guilty of aiding or abetting another person in the violation of this Subpart.
- (6) Is mentally incompetent.
- (7) Endeavors to deceive or defraud the public.
- (8) Professional or medical incompetency.
- (9) Unprofessional conduct.
- (10) Continuing or recurring practices which fail to meet the standards of EMS care in this state.
- (11) Abandonment of a patient.
- (12) Has had a certification or license to practice as an EMS professional or to practice as another health care provider denied, revoked, suspended, or otherwise restricted.
- (13) Is guilty of moral turpitude.
- (14) Has violated any rules and regulations of the commission or the bureau or any provision of this Subpart.

Acts 1997, No. 913, §2; Acts 2003, No. 208, §1.

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§1232.7. Hearings of the commission; appeal of decision

A. If the commission determines there are grounds for a disciplinary proceeding against an individual based upon an investigation by the bureau, the chairman of the commission shall set a time and place for a hearing. No later than ten days prior to the date set for the hearing, the commission shall send notice of the time and place for the hearing and an explanation of the grounds for the disciplinary proceedings to the individual by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.

B. The commission may compel the attendance of witnesses, the production of books, papers, and documents, and administer oaths at the hearing. The commission shall not be bound by strict rules of procedure or other laws of evidence in the conduct of its proceedings. The individual under investigation may appear personally, by counsel, or personally and by counsel, produce witnesses and evidence on his own behalf, and cross-examine witnesses. Such proceedings shall be closed to the general public and the records of the proceeding shall be confidential.

C. Notwithstanding any privilege of confidentiality recognized by law, a physician or health care agency with which the individual under investigation is associated shall not assert such privilege by failing or refusing to respond to a lawfully issued subpoena of the commission for any medical information, testimony, records, data, reports, or other documents, tangible items, or information relative to any patient cared for or assigned to the individual under investigation. Any such items obtained pursuant to a subpoena shall be confidential. Furthermore, the transcript of testimony from the hearing shall be altered to prevent the disclosure of the identity of the patient to whom such records relate.

D. Notice of the commission's decision to revoke, restrict, suspend, or deny a certificate shall be sent to the individual under investigation by registered mail, return receipt requested, at his last known address as it appears on the records of the bureau.

E. An individual whose certification has been revoked, restricted, suspended, placed in probation, or denied may have the proceedings of the commission reviewed by a court of competent jurisdiction, provided that an appeal is made no later than thirty days after the date indicated on the registered mail receipt of the notice required by Subsection D of this Section. The decision of the commission shall remain in force until an appeal is granted unless the court orders a stay. If an appeal is granted, the decision of the commission shall be suspended until a final disposition of the matter is ultimately rendered by the court affirming the decision of the commission.

F. The commission may maintain the confidentiality of an individual under investigation whenever the commission determines the public interest will be best served by alternatives to the disciplinary hearing process.

Acts 1997, No. 913, § 2.

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§1232.8. Injunction

The commission, through the bureau, may obtain an injunction without bond forbidding any person from violating or continuing to violate any of the provisions of this Subpart. This injunction shall not be subject to release upon bond.

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§1232.9. Violations

No person or individual shall engage in any of the following activities:

- (1) Sell, or attempt to sell, falsely obtain, or furnish to any person any emergency medical personnel diploma, certification document, or record, or aid or abet therein.
- (2) Practice as a certified emergency medical technician or certified first responder under any diploma or certificate illegally obtained or signed or issued unlawfully.
- (3) Practice as a certified emergency medical technician or certified first responder unless certified to do so under the provisions of this Subpart.
- (4) Use in connection with his name any designation tending to imply that he is a certified emergency medical technician or certified first responder unless duly authorized to practice under the provisions of this Subpart.
- (5) Practice as a certified emergency medical technician or certified first responder during the time the certification issued under the provisions of this Subpart is suspended or revoked.
- (6) Practice as a certified emergency medical technician or certified first responder during the time his certification has lapsed by reason of his intentional failure to renew the certification.
- (7) Conduct or serve as an assistant instructor in conducting any course claiming to prepare students for certification as emergency medical personnel under the provisions of this Subpart, unless both the course and the instructor have been approved by the bureau.
- (8) Knowingly aid or abet another person in the violation of this Subpart.

Acts 1997, No. 913, § 2.

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§1232.10. Prosecution

A. Any person who violates the provisions of R.S. 40:1232.9 shall be subject to prosecution. This prosecution shall be brought in the name of the state, provided the provisions of this Subpart shall not prevent or interfere with a prosecution brought by the district attorney of a parish when a prosecution or a pre-prosecution proceeding has been initiated by the district attorney.

B. Whoever is found guilty of violating any provision of R.S. 40:1232.9 shall, upon a first conviction, be fined not more than five hundred dollars or imprisoned for not more than six months, or both. Upon a second or subsequent conviction, the offender shall be imprisoned with or without hard labor for not more than two years and fined not more than five thousand dollars.

Acts 1997, No. 913, § 2.

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§1232.11. Exceptions

This Subpart shall not apply to the practice of emergency medical services by a legally qualified emergency medical technician who is employed by the United States government, or by any bureau, division, or agency thereof, while in the discharge of his official duties.

Acts 1997, No. 913, § 2.

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§1233. Civil immunity

A.(1) Any emergency medical person certified pursuant to the provisions of this Subpart who renders emergency medical care to an individual while in the performance of his medical duties and following the instructions of a physician shall not be individually liable to such an individual for civil damages as a result of acts or omissions in rendering the emergency medical care, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to such an individual. Nothing herein shall relieve the driver of the emergency vehicle from liability arising from the operation or use of such vehicle.

(2) The immunity granted to emergency medical personnel by the provisions of this Subpart shall extend to parish governing authorities, police departments, sheriffs' offices, fire department, or other public agencies engaged in rendering emergency medical services and its insurers with respect to such emergency medical services unless the emergency medical personnel employed by such agencies would be personally liable under the provisions of Paragraph (1) of this Subsection.

B. Any physician who provides instructions to any emergency medical personnel by use of electronic or other means of transmission in connection with the rendering of emergency medical services to an individual shall not be liable unto such personnel or to an individual or both for civil damages arising from his opinion, judgments, actions, or duties, except for acts or omissions intentionally designed to harm, or for grossly negligent acts or omissions which result in harm to the individual, while exercising that degree of skill and care ordinarily employed by members of his profession in good standing.

C. No hospital facility which allows the use of telemetry or other equipment to maintain contact between a certified emergency medical technician and a physician shall be liable for any civil damages arising out of the use of such equipment except for acts or omissions by hospital personnel that are grossly negligent which result in harm to an individual.

D. No registered nurse, certified emergency medical technician, or other health professional licensed in Louisiana who supervises, instructs, or trains emergency medical personnel in accordance with curricula developed or adopted by the bureau shall be liable for any civil damages arising out of the actions or negligence of the emergency medical personnel whom he supervised, instructed, or trained.

E. There shall be no cause of action or civil liability, and no certificate holder or applicant shall have any cause of action or any claim for damages against any individual, person, or institution providing information to the commission or its agents or employees when that individual, person, or institution acts without malice and when there is a reasonable belief that such information is accurate.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1997, No. 913, § 2.

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§1234. Duties of emergency medical personnel

A.(1) A certified emergency medical technician-basic may perform any of the following functions:

(a) Rescue, first aid, resuscitation, and other services to the extent that he has been trained to perform such services under the provisions of the National Standard EMT-Basic training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) When authorized by medical direction, an emergency medical technician-basic or an emergency medical technician-intermediate may administer or aid the patient in the administration of a dose of epinephrine from an auto-injector to treat allergic reaction and anaphylaxis.

(c) Services which may be performed by a certified emergency medical technician-intermediate as provided in Subsection B of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-intermediate clinical or field internship program and while he is under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(d) Services which may be performed by a certified emergency medical technician-paramedic, as provided in Subsection C of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-paramedic clinical or field internship program and while he is under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by the certified emergency medical technician-basic under any of the following conditions:

(a) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's order.

(b) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

B.(1) A certified emergency medical technician-intermediate may perform any of the following functions:

(a) Any services to the extent that he has been trained to perform such services under the provisions of the National Standard EMT-Intermediate training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) Services which may be performed by a certified emergency medical technician-paramedic, as provided in Subsection C of this Section, but only while he is enrolled in good standing in an approved emergency medical technician-paramedic clinical or field internship program and while under the direct supervision of a physician, registered nurse, certified emergency technician-paramedic, or other preceptor approved by the bureau.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by the certified emergency medical technician-intermediate under any of the following conditions:

(a) While caring for a patient in a participating hospital under the direct supervision of a physician.

(b) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's orders.

(c) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

C.(1) A certified emergency medical technician-paramedic may perform any of the following functions:

(a) Any services to the extent that he has been trained to perform such service under the provisions of the National Standard EMT-Paramedic training curriculum developed and promulgated by the United States Department of Transportation that are adopted by the bureau.

(b) Administration of other drugs or procedures for which the certified emergency medical technician-paramedic has received training, certification, and approval by the commission and which may be considered necessary by the ordering physician.

(2) The functions authorized by Paragraph (1) of this Subsection may be performed by a certified emergency medical technician-paramedic under any of the following conditions:

(a) While his caring for a patient in a participating hospital under the direct supervision of a physician.

(b) While he is at the scene of a medical or other emergency where voice contact is established with a physician and under the physician's orders.

(c) While he is at the scene of a life threatening emergency and under a protocol that has been approved by the local parish medical society, or its designee, until voice communication with the physician is established at the earliest possible time.

D. A certified first responder may perform any of the following functions:

(1) Rescue, first aid, resuscitation, and other services to the extent that he has been trained to perform such services under the provisions of the first responder training curriculum developed and adopted by the bureau.

(2) Administration of automated cardiac defibrillation in accordance with rules and regulations promulgated by the bureau in accordance with the Administrative Procedure Act and a protocol that shall be approved by the local parish medical society, or its designee, and the local physician medical director.

E.(1) In a case of a life-threatening situation as determined by a certified emergency medical technician-intermediate or an emergency medical technician-paramedic, when voice contact with a physician or when telemetered electrocardiogram communication is delayed, not possible, or when the delay in treatment could endanger the life of the patient, such a person may render services, in accordance with a protocol that shall be established by the emergency medical services committee or the executive committee of the parish or component medical society, or its designee, until voice or telemetered electrocardiogram communication can be established at the earliest possible time.

(2) Such services may be rendered for the following conditions:

(a) Cardiac arrest.

(b) Ventricular tachycardia.

(c) Supraventricular tachycardia.

(d) Premature ventricular ectopy when greater than six per minute, multifocal, bigeminal, occurring in bursts of two or more, falling on or close to the T wave.

(e) Severe, unrelieved, suspected cardiogenic chest pain, or suspected myocardial infarction.

(f) Bradycardias.

(g) Hypoglycemia.

(h) Anaphylactic reactions.

(i) Hypovolemic shock.

(j) Unconsciousness, altered mental status, or respiratory depression from suspected drug overdose.

(k) Treatment induced unconsciousness, altered mental status, hypotension, or respiratory depression from physician ordered or protocol appropriate paramedic administered narcotics.

(l) Respiratory failure or respiratory arrest.

(m) Active seizure.

(3) Nothing in this Subsection shall be construed to authorize a certified emergency medical technician-paramedic to administer any Schedule II narcotic without a direct order by a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners or in accordance with an approved protocol adopted pursuant to Subsection E(1) and (2).

F.(1) The bureau shall adopt rules and regulations to allow emergency medical personnel to institute a program for the delivery of automated cardiac defibrillation in the pre-hospital setting.

(2) The bureau shall adopt rules and regulations for training to allow all levels of certified medical technicians to carry and administer epinephrine by auto-injectors to patients experiencing allergic reactions or anaphylaxis.

G. Any individual, training organization, organization, or other entity violating the provisions of this Section shall be guilty of a misdemeanor, conviction of which shall subject the offender to a fine of not less than five hundred dollars nor more than one thousand dollars for each separate offense.

H. In the event that there is no organized or functional local parish medical society in a parish of the state, the provisions of this Section which require the approval of an emergency medical service protocol by the local parish medical society or its designee may be performed by a parish or multiparish medical society which is adjacent or contiguous to the parish without an organized or functional local parish medical society. In the absence of such adjacent or contiguous parish or multiparish medical society, the district medical society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society. In the event the district medical society does not approve an emergency medical service protocol for the parish without an organized or functional local parish medical society, the disaster and emergency medical services committee of the Louisiana State Medical Society shall approve an emergency medical service protocol for the parish without an organized or functional local parish medical society.

I. The department shall promulgate rules and regulations establishing basic guidelines for statewide emergency medical service protocols. Such rules and regulations shall be based on the recommendations of the Louisiana State Medical Society's disaster and emergency medical services committee, which shall serve as an advisory committee to the department for this purpose.

Acts 1977, No. 626, § 2; Amended by Acts 1978, No. 469, § 1; Acts 1979, No. 688, § 1; Acts 1984, No. 242, § 1; Acts 1984, No. 243, § 1; Acts 1986, No. 630, § 1, eff. July 6, 1986; Acts 1987, No. 665, § 1, eff. July 9, 1987; Acts 1988, No. 776, § 1; Acts 1989, No. 195, § 1, eff. June 26, 1989; Acts 1990, No. 211, § 1, eff. Jan. 1, 1991; Acts 1991, No. 974, § 1, eff. July 24, 1991; Acts 1997, No. 913, §§ 2, 3; Acts 1999, No. 427, § 1; Acts 2001, No. 385, § 1.

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§1234.1. Hazardous substance transportation emergencies; payment for emergency medical services

The person or entity who in the course of transporting hazardous substances or materials causes or contributes to a discharge of a hazardous substance or material that causes an emergency condition shall be obligated to pay the reasonable costs of any emergency medical services provider whose presence or service, including standby, is requested at such hazardous substance emergency by any person authorized by the Department of Public Safety and Corrections or the Department of Environmental Quality to respond to a hazardous substance transportation emergency. Nothing in this Section shall affect the rights of any party to recover under any other provision of law.

Acts 1999, No. 209, § 1.

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SUBPART C. EMERGENCY MEDICAL TRANSPORTATION

§1235. Qualifications to operate ambulances; equipment; penalty

A.(1) No person or individual shall conduct, maintain, or operate an ambulance on any street, alley, or public way or place in the state unless the ambulance is staffed with a minimum of two persons, one of whom shall be a certified emergency medical technician.

(2)(a) No person or individual shall provide services in any capacity on any ambulance unless he is a certified first responder, a certified emergency medical technician, a licensed registered or practical nurse, or a physician.

(b) No individual shall transport any ill or injured person on a stretcher in a vehicle that is not staffed, equipped, insured, and licensed as an ambulance under this Subpart.

(c) No individual shall provide services in any capacity on any ambulance unless he holds a cardiopulmonary resuscitation provider card issued by the American Heart Association or the American Red Cross.

(d) No individual shall transport any ill or injured person by ambulance unless the sick or injured person is attended by a certified emergency medical technician, a registered nurse, or a physician in the patient compartment.

(3)(a) The Department of Health and Hospitals shall promulgate rules and regulations establishing a list of required medical and safety equipment which shall be carried as part of the regular equipment of every ambulance. No person shall conduct, maintain, or operate an ambulance which does not carry with it, in fully operational condition, all of the equipment included in the list, which shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1234 and which shall be based upon the recommendations of an advisory committee known as the Ambulance Standards Committee.

(b) After its initial establishment, the list shall be subject to review after four years and at any time thereafter. The list shall not be changed more often than once every four years. However, nothing in this Paragraph shall prohibit the department from supplementing the list with state-of-the-art, newly developed devices, equipment, or medications approved by the Ambulance Standards Committee that may be carried in lieu of other items on the list.

(4) The Ambulance Standards Committee of the Emergency Medical Services Task Force as established by the assistant secretary of the office of public health is hereby established. The committee shall be composed of the following members and such additional members as the assistant secretary of the office of public health may appoint:

(a) The medical director of the Department of Health and Hospitals.

(b) The director of the bureau of emergency medical services of the Department of Health and Hospitals.

(c) A representative of the health standards section of the Department of Health and Hospitals.

(d) One representative, appointed by the assistant secretary of the office of public health, from each of the following:

(i) The Louisiana State Medical Society.

(ii) The American College of Emergency Physicians.

(iii) The American College of Surgeons.

(iv) The American Academy of Pediatrics.

(v) The Louisiana Ambulance Association.

(vi) The Louisiana Rural Ambulance Alliance.

(vii) The Louisiana Association of Nationally Registered Emergency Medical Technicians.

(viii) The Governor's Emergency Medical Services for Children Advisory Council.

(ix) Municipal third service ambulance providers.

(x) Rural ambulance providers.

(xi) Private sector ambulance providers.

(xii) Fire service-based ambulance providers.

(xiii) Hospital-based emergency medical services providers.

(xiv) Professional firefighters.

(xv) The Professional Firefighters Association of Louisiana.

(5) Nothing herein shall prohibit the transportation of an injured or ill person in an ambulance or industrial ambulance staffed by persons with less than the required qualifications in an emergency situation where there is no reasonable expectation of the prompt response by an ambulance staffed by persons with the required qualifications.

(6) Nothing herein shall prohibit a firefighter, law enforcement officer, or good Samaritan from assisting an ambulance at the scene of an emergency or while transporting a patient to a medical facility at the request of the emergency medical technician.

(7) Nothing herein shall prohibit an individual without the required qualifications from riding in an ambulance for the purpose of training, observation, or continuing education.

B.(1) Repealed by Acts 2001, No. 625, § 2.

(2) Nothing in this Subpart shall be construed to prohibit the transportation of an injured or ill individual in an invalid coach in an emergency situation where there is no reasonable expectation of the prompt response of an ambulance or industrial ambulance.

C. The department shall conduct or may authorize another public agency to conduct an inspection of any ambulance service provider or invalid coach provider and to report any violation to the appropriate district attorney's office.

D.(1) The provisions of this Section shall not apply:

(a) To ambulances operated by a federal agency of the United States government.

(b) Repealed by Acts 2001, No. 625, § 2.

(c) To ambulances which are rendering assistance to licensed ambulances in the case of a major disaster, be it natural or manmade, in which the licensed ambulances are insufficient or otherwise not capable of coping.

(d) Repealed by Acts 2001, No. 625, § 2.

(e) To ambulances which are operated from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside the state, but no such ambulance shall transport any patient point to point within the state except in the case of disaster as outlined in this Subpart.

(2) This provision shall not apply to individuals who are employed to function on licensed air ambulances solely to act as pilots.

(3) The provisions of this Section shall not apply to industrial ambulances providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

E. The provisions of this Section shall apply to all parishes or municipalities except those electing not to comply as expressed to the department in a written resolution by the governing body of such parish or municipality. If any parish or municipality elects to be excluded from this Section, it may later elect to be included by resolution. The election of any parish to be included or excluded from this Section shall in no way affect the election of any municipality to be included or excluded.

F. Whoever violates this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days or both. The penalty prescribed by this Section shall be doubled for any subsequent offense.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1986, No. 632, § 1; Acts 1987, No. 480, § 1, eff. July 9, 1987; Acts 1997, No. 913, § 2; Acts 1997, No. 982, § 1, eff. July 10, 1997; Acts 2001, No. 625, § 1 and 2.

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§1235.1. Qualifications to operate emergency medical response vehicles; vehicle requirements; equipment; penalties

A.(1) No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle on any street, alley, or public way or place in the state unless the vehicle is staffed with at least one individual who is a Louisiana state-certified nationally registered emergency medical technician.

(2) No person shall provide services in any capacity on an emergency medical response vehicle unless he is the holder of a certification by the Department of Health and Hospitals or its agent as a first responder; or a certification of an emergency medical technician issued by the National Registry of Emergency Medical Technicians; or a certificate of licensure as a registered nurse or licensed practical nurse; or is a physician or surgeon licensed to practice medicine by the Louisiana State Board of Medical Examiners. No person shall provide services in any capacity without holding a valid certification of cardiopulmonary resuscitation issued by the American National Red Cross or the American Heart Association.

B. No person shall conduct, maintain, or operate an emergency medical response vehicle as an emergency vehicle which:

(1) Does not carry with it as part of its regular equipment the list of equipment for emergency medical response vehicles as prescribed in rules and regulations promulgated by the Department of Health and Hospitals based on the recommendations of the Ambulance Standards Committee of the Emergency Medical Services Task Force as established by the assistant secretary of the office of public health. This list shall be based upon the recommendations of the American College of Surgeons as provided in R.S. 40:1235(A)(3). The list shall be consistent with the scope of practice for emergency medical technicians established in R.S. 40:1234. After initial promulgation, such list shall be subject to review after four years and anytime thereafter. The list shall not be changed more often than once every four years. However, nothing shall preclude the Department of Health and Hospitals from supplementing the list with state of the art, newly developed devices, equipment, or medications approved by the Ambulance Standards Committee of the Emergency Medical Services Task Force that may be carried in lieu of other items on the list of equipment.

(2) Is not marked with the company name or logo on both sides and the rear and does not have fully visible and audible warning signals in accordance with rules and regulations promulgated by the Department of Health and Hospitals.

(3) Does not meet the minimum motor vehicle safety standards as prescribed in the rules and regulations promulgated pursuant to the Motor Vehicle Inspection Act, R.S. 32:1302 et seq.

(4) Is not insured in accordance with the provisions of R.S. 40:1236.4.

(5) Is not owned or leased by the certified ambulance service operating the vehicle.

C.(1) The Department of Health and Hospitals or its designee shall be empowered to conduct inspections of emergency medical response vehicles. The department shall certify such vehicles and shall have the authority to deny, probate, suspend, or revoke certifications. The department shall also have the authority to report any violations to the appropriate district attorney's office.

(2) Certification issued by the Department of Health and Hospitals shall serve as authorization of the ambulance service to operate the emergency medical response vehicle pursuant to the provisions of this Section.

D. Whoever violates the provisions of this Section shall be guilty of a misdemeanor and upon conviction shall be fined not more than five hundred dollars or imprisoned for not more than thirty days, or both. The penalty prescribed by this Subsection shall be doubled for any subsequent offense.

Acts 1997, No. 297, § 2.

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§1235.2. Ambulance providers; licensure

A. No person, firm, corporation, association, or government entity shall conduct, manage, operate, or maintain an ambulance service in Louisiana without a valid current license from the department.

B. The application for such license shall be submitted to the department on forms provided for that purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an ambulance provider as specified by regulations promulgated by the department under the Administrative Procedure Act.

C. An applicant seeking licensure as an ambulance provider shall:

(1) Submit a completed application to the department on such forms and including such information and supporting documentation as required by the department. Such information shall include:

(a) A notarized certificate of insurance verifying that the provider has the legally mandated insurance coverage.

(b) Proof that the provider has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(c) All medical protocols signed by the physician-medical director with their prescribed approvals by the parish or component medical society.

(d) Copies of personnel certifications. However, the department may provide for inspection and review of these certifications at an applicant's offices by prior agreement between the applicant and the department.

(e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.

(2) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.

(3) Successfully complete an inspection by the department which includes the following:

(a) An inspection of all vehicles to determine that they are in safe and working order and that they are equipped with all of the prescribed medical equipment as required by this Section and R.S. 40:1235 and 1235.1. What is safe and working order shall be determined pursuant to provisions of Title 32 of the Louisiana Revised Statutes of 1950 and the Louisiana Motor Vehicle Inspection Manual in addition to the provisions of this Section and R.S. 40:1235 and 1235.1. Each vehicle successfully completing the inspection shall receive a permit authorizing it to be operated as part of the applicant's service.

(b) An inspection of all personnel certifications to verify that they meet the requirements of law.

(c) Inspection and, when deemed necessary by the department, verification of the information provided as required by Paragraph (1) of this Subsection and that such information remains current.

(d) Verification that the provider has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the provider has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.

(e) For those providers providing advanced life support, verification that the provider possesses a Louisiana Controlled Substance License and a United States Drug Enforcement Administration Controlled Substance Registration.

D. If an applicant's background investigation indicates that the applicant has a felony conviction or has had any license pertaining to the provision of emergency medical services revoked in another jurisdiction, then the license may be denied.

E. In order to renew an ambulance provider license, the applicant shall:

(1) Submit a renewal application to the department not more than thirty days prior to expiration of the license.

(2) Provide any required documentation.

(3) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any vehicle as deemed appropriate by the department.

F. Intentional falsification of material information provided pursuant to this Section shall be grounds for immediate revocation of any license granted pursuant to this Section.

G. Failure to comply with any of the provisions of this Section shall constitute grounds for probation or license suspension or revocation in accordance with rules and regulations established pursuant to the Administrative Procedure Act.

H. Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.

I. Any entity currently certified to provide ambulance services in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1999, No. 1113, § 1; Acts 2001, No. 517, § 1; Acts 2001, No. 1032, § 14.

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§1235.3. Ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity currently operating or planning to operate an ambulance service shall pay the following fees to the department, as applicable:

(1) An initial licensing fee of one hundred fifty dollars, to be submitted with the initial application for a license.

(2) An annual license renewal fee of one hundred dollars, to be submitted with each annual application for renewal of a license.

(3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.

(4) A vehicle inspection fee of seventy-five dollars for each ambulance or emergency medical response vehicle, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for a vehicle added to service by the applicant.

(5) A delinquent fee of one hundred dollars for each ambulance and emergency medical response vehicle, for failure to timely pay a vehicle inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the vehicle inspection fee.

(6) A change of address fee of ten dollars for each change of address.

(7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1113, § 1.

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§1235.4. Ambulance services; violations; penalties; fines; notices; hearings; appeals

A. The opening or operation of an ambulance service without a current license therefor shall be a misdemeanor, punishable upon conviction by a fine of not less than one thousand dollars and not more than five thousand dollars. Each day's violation shall constitute a separate offense.

B.(1) Any person or entity violating the provisions of this Part when such violation poses a threat to the health, safety, rights, or welfare of a patient or client may be liable to civil fines and other penalties, to be assessed by the department, in addition to any criminal action which may be brought under other applicable laws. The department shall adopt rules, in accordance with the Administrative Procedure Act, which define specific classifications of violations, articulate factors in assessing civil fines including mitigating circumstances, and explain the treatment of continuing and repeat deficiencies.

(2) The schedule of civil fines and other penalties by class of violation is as follows:

(a) Class A violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Part concerning the number or qualifications of personnel, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(b) Class B violations: If an ambulance service is found to have been operating in violation of any of the requirements of this Part concerning insurance coverage, its license shall be immediately suspended until it meets those requirements, and it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(c) Class C violations: If an ambulance or emergency medical response vehicle is found to have been operated without undergoing any inspection required under the provisions of this Part, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than five hundred dollars for the first violation and not more than one thousand dollars per day for each repeat violation.

(d) Class D violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of this Part concerning medical and safety equipment, the ambulance or emergency medical response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

(e) Class E violations: If an ambulance or emergency medical response vehicle is found to have been operated in violation of any of the requirements of Chapter 7 of Title 32 of the Louisiana Revised Statutes of 1950, the ambulance or emergency response vehicle shall be immediately taken out of service until it meets those requirements, and the ambulance service operating it shall be subject to a civil fine of not more than one hundred dollars for the first violation and not more than five hundred dollars per day for each repeat violation.

C. The department shall adopt rules and regulations, in accordance with the Administrative Procedure Act, to provide notice to the ambulance service of any violation, of its right to an informal reconsideration process, and of the available appeal procedure, including judicial review. Such appeal shall be suspensive.

D. The ambulance service shall furnish, with an appeal, bond in the minimum amount of one and one-half times the amount of the fine imposed by the department. The bond shall provide in substance that it is furnished as security that the ambulance service will prosecute its appeal and that any judgment against it, including court costs, will be paid or satisfied from the amount furnished. The appeal shall be heard as a summary proceeding which shall be given precedence over other pending matters.

E. The department may institute all necessary civil court action to collect fines imposed and not timely appealed. No ambulance service may claim imposed fines as reimbursable costs, nor increase charges to patients or clients as a result of such fines. Interest shall begin to accrue on any fine at the current judicial rate on the day following the date on which the fine becomes due and payable.

Acts 1999, No. 1113, § 1.

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§1236. Advanced emergency medical technicians

In addition to the requirements of R.S. 40:1235, any hospital, ancillary medical facility, or ambulance service, whether public or private, may conduct a program utilizing any certified emergency medical technician-intermediate or certified emergency medical technician-paramedic to supervise and direct the delivery of emergency medical care to the sick and injured at the scene of an emergency during transport to a hospital, while in the hospital emergency department, and until care responsibility is assumed by the regular hospital staff.

Acts 1977, No. 626, § 2. Amended by Acts 1978, No. 469, § 1; Acts 1997, No. 913, § 2.

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§1236.1. Unauthorized response by commercial ambulances; penalties

A. No commercial ambulance shall make any emergency run based solely on information intercepted by use of a radio communication scanner or similar device except in cases where human life is threatened, unless that commercial ambulance has been specifically requested to respond to such emergency. Nothing in this Section shall be construed to prohibit service to a subscriber of a commercial ambulance service. No person certified under this Part or certified or licensed pursuant to any provision of Louisiana law shall operate a commercial ambulance in violation of this Section.

B. The certificate or license of any person certified under this Part or certified or licensed pursuant to Louisiana law who violates the provisions of this Section shall be suspended by the appropriate certification or licensing authority for not less than thirty days, nor more than six months.

C. Proceedings to enforce the provisions of this Section shall be conducted in accordance with the Administrative Procedure Act.

Acts 1987, No. 187, § 1.

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§1236.2. Air ambulance services; licensure

A. No person, firm, corporation, association, or governmental entity shall conduct, manage, operate, or maintain an air ambulance service in the state without a valid current license from the department.

B. The application for such license shall be submitted to the department on forms provided for this purpose. The application shall provide documentation that the applicant meets the appropriate requirements for an air ambulance service as specified by regulations promulgated by the department in accordance with the Administrative Procedure Act.

C. An applicant seeking licensure as an air ambulance service shall:

(1) Submit a completed application to the department on such forms and including such information as specified by the department.

(2) Submit the appropriate initial license fee as provided in this Part.

(3) Submit to a background investigation which includes but is not limited to fingerprinting and a criminal history check by the Department of Public Safety and Corrections, office of state police.

(4) Submit to and successfully complete an inspection by the department to include the following:

(a) An inspection of all aircraft utilized as air ambulances to ensure that all required medical and safety equipment is present and operational. The medical and safety equipment shall conform to local protocol as established by the medical director of the air ambulance service. The list of required medical and safety equipment shall be established under rules promulgated by the department and shall be based upon the recommendations of an advisory committee to be composed of the following persons:

(i) The medical director of the department.

(ii) The director of the bureau.

(iii) One representative of the health standards section of the department's office of the secretary, bureau of health services financing.

(iv) One representative of the Governor's Emergency Medical Services for Children Advisory Council.

(v) One representative of the Department of Transportation and Development, office of public works and intermodal transportation, aviation section.

(vi) One representative of each air ambulance service certified or licensed in accordance with this Part.

(b) Verification that all aircraft meet the appropriate Federal Aviation Administration requirements.

(c) Review of certifications of all personnel to ensure that they meet all Federal Aviation Administration requirements and local pilot and medical personnel staffing protocols.

(d) Verification that the applicant is in receipt of an original notarized certificate of insurance for the following coverage:

(i) Five hundred thousand dollars of aircraft liability insurance.

(ii) Five hundred thousand dollars of medical malpractice insurance or proof of participation in the Patient's Compensation Fund.

(iii) Five hundred thousand dollars of commercial general liability insurance.

(e) Verification that the service has a medical director and that such director is a physician licensed to practice medicine by the Louisiana State Board of Medical Examiners.

(f) A review of medical protocols signed by the physician medical director of the air ambulance service, accompanied by the necessary approvals of the parish or component medical society in the service's parish of domicile.

(g) Verification that the service has complied with all applicable federal, state, and local statutes, rules, and regulations, and that the service has obtained all necessary and applicable licenses, permits, and certifications, including certificates of need or certificates of public convenience and necessity.

(5) Certify that all aircraft and crew members meet applicable Federal Aviation Administration regulations.

(6) Specify if the service uses either fixed-wing or rotary-winged aircraft, or both.

D. If a service provides interhospital air transport, air transport from hospital to another facility, air transport from hospital to home, or similar air transport, the service must certify that a medical director is employed to advise the service on the appropriate

staffing, equipment, and supplies to be used for the transport of patients aboard an air ambulance.

E. In order to renew a license for an air ambulance service, the applicant shall:

(1) Submit a renewal application to the department not more than ninety days before the expiration of the license.

(2) Submit the appropriate fee as provided herein in Subsection B.

(3) Provide documentation that current standards for issuance of a license are met.

(4) Successfully complete a review of any required documentation and any inspection or verification of any documentation of any airplane deemed appropriate by the department.

F. Intentional falsification of information provided pursuant to this Section or failure to comply with any provisions hereof shall be grounds for immediate revocation of any license granted pursuant to this Section.

G.(1) Nothing in this Section shall be construed to prohibit, limit, or regulate random mercy flights made by a person or corporation in privately or publicly owned aircraft who may on occasion transport individuals who may need medical attention during transport, or human organs, intended for transplantation, including but not limited to the heart, lungs, kidneys, liver, and other soft tissue and bones, on either a not-for-profit basis or gratuitously.

(2) Failure to comply with any of the provisions of this Section shall constitute grounds for probation, suspension, revocation of license, or other administrative sanction in accordance with rules and regulations established by the department.

(3) Any person whose license has been revoked, suspended, or denied by the department shall have the right to have the proceedings of the department reviewed by a court of competent jurisdiction, provided that such appeal is made within thirty days after the notice of the decision of the department. If an appeal is granted, the decision of the department shall not be implemented until a decision affirming the department decision is rendered on judicial review. The department's decision shall remain in force until an appeal is granted unless the court orders a stay. Judicial review shall be by trial de novo.

H. Any entity currently certified to provide ambulance service in Louisiana shall not be required to be licensed by the state in order to maintain certification for a period of one year after July 15, 1999, in order to continue providing such services.

Acts 1988, No. 982, § 1; Acts 1999, No. 1114, § 1; Acts 2001, No. 517, § 1.

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§1236.3. Emergency transportation in ambulances; payment

A. Payment under Title XIX of the Social Security Act medical assistance program for emergency transportation services of a person by ambulance shall be the same rate, but not to exceed the rate established under Medicare.

B. Emergency medical transportation services shall include but not be limited to the following:

- (1) Basic life support.
- (2) Advanced life support.
- (3) Mileage.
- (4) Oxygen.
- (5) Intravenous fluids.
- (6) Disposable supplies.

Acts 1990, No. 448, § 1.

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§1236.4. Required insurance coverage

A. Notwithstanding the provisions of R.S. 33:4791 and 4791.1, each ambulance provider, as defined in this Section, shall continuously have in effect the following minimum amounts of insurance:

- (1) Medical malpractice liability insurance in the amount of five hundred thousand dollars.
- (2) Automobile liability insurance in the amount of five hundred thousand dollars in combined single limits and five hundred thousand dollars in the aggregate.
- (3) General liability insurance in the amount of five hundred thousand dollars per occurrence and five hundred thousand dollars in the aggregate.
- (4) Repealed by Acts 1999, No. 1113, § 2.

B. Each ambulance provider shall submit a certificate of insurance issued by its insurance carrier to the Department of Health and Hospitals as proof of the minimum insurance coverage required by this Section. Each ambulance provider shall also be required to notify the department in writing at least thirty days prior to any material change in or cancellation of such coverage.

C. For purposes of this Section, "ambulance provider" shall mean any entity owning, controlling, or operating any business or service which, as a substantial portion of its business, furnishes, operates, conducts, maintains, advertises, engages in, proposes to engage in, or professes to engage in the business or service of transporting persons who may need medical attention during transport. However, "ambulance provider" shall not include:

- (1) Agencies of the federal government;
- (2) Volunteer nonprofit organizations or municipal nonprofit organizations operating invalid coaches, as defined in R.S. 40:1231(7);
- (3) Entities rendering assistance to licensed ambulances in the case of a major disaster;

(4) Licensed hospitals providing nonemergency, noncritical interhospital transfer and patient transportation for diagnostic and therapeutic purposes when such transportation originates at a licensed hospital;

(5) Entities operating ambulances from a location outside of the state to transport patients from a location outside of the state to a location inside the state or to transport patients from a medical facility inside to a point outside of the state; or

(6) Entities providing transportation to employees who become sick or injured during the course of their employment from a job site to the nearest appropriate medical facility.

Acts 1990, No. 442, § 1; Acts 1992, No. 678, § 1; Acts 1999, No. 1113, § 2.

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§1236.6. Air ambulance services; fees

Any person, partnership, corporation, unincorporated association, or other legal entity, currently operating or planning to operate an air ambulance service shall pay the following fees to the department, as applicable:

(1) An initial licensing fee of one hundred fifty dollars, which shall be submitted with the initial application for a license.

(2) An annual license renewal fee of one hundred dollars, which shall be submitted with each annual application for renewal of a license.

(3) A delinquent fee of one hundred dollars for failure to timely pay an annual license renewal fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the annual license renewal fee.

(4) An aircraft inspection fee of seventy-five dollars for each aircraft, which shall be submitted with the initial application for a license, with each annual application for renewal of a license, and with each application for a permit for an aircraft added to the service by the applicant.

(5) A delinquent fee of twenty-five dollars for each aircraft for failure to timely pay an aircraft inspection fee. Such delinquent fee shall be assessed and shall become due and payable at 12:01 a.m. on the thirty-sixth day following the date of the invoice by which the department bills the applicant or licensee for the aircraft inspection fee.

(6) A change of address fee of ten dollars for each change of address.

(7) A duplicate license fee of ten dollars for each duplicate license.

Acts 1999, No. 1114, § 1.

NOTICE OF INTENT

Department of Health and Hospitals Emergency Medical Services Certification Commission

EMS Certification Commission Rules of Procedure

Under the authority of the Department of Health and Hospitals R.S. 40:1710 et seq., and in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq., the Emergency Medical Services Certification Commission, hereby gives notice of intent regarding the proposed rules to establish procedures to provide direction in the transaction of the business of administering and implementing the spirit and intent of the law governing the practice of emergency medical services professionals.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XXXVIII. Emergency Medical Services Certification Commission

Subpart 1. Rules of Procedure

Chapter 1. General

§101. Statement of Purpose

A. The Louisiana Emergency Medical Services Certification Commission is a legally created administrative commission acting within the governmental structure of the state and possessing legal power. To safeguard life and health of the citizens of Louisiana, the law governing the practice of Nationally Registered and State Certified Emergency Medical Services professionals, Louisiana Revised Statutes of 1950, R.S. 40:1232 et seq., as re-enacted and amended, delegates to this commission the responsibility to establish and publish standards of out-of-hospital practice; to regulate the scope of practice of Emergency Medical Services professionals, to discipline and regulate the practice of Emergency Medical Services professionals and to establish standards for educational programs preparing individuals for out of hospital practice.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

Chapter 3. Registration and Certification

§301. State and National Certification

A. State certification by the Bureau of Emergency Medical Services is mandatory for practicing as a certified first responder.

B. National registration and state certification is mandatory for practicing as a certified emergency medical technician.

C. State certification as a certified Emergency Medical Services professional shall be issued only to an applicant who qualifies by examination or endorsement in accordance with R.S. 40:1231, et seq. All applicants shall meet the same standards.

D. The commission shall render an opinion to the Bureau of Emergency Medical Services on whether the applicant meets the requirements of certification in all questionable cases brought before the commission.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§303. Denial of Certification, Reinstatement, or the Right to Practice EMS as a Student

A. Applicants for certification, reinstatement, or the right to practice as an EMS student may be denied approval for certification, reinstatement, receipt of a temporary permit, eligibility for the National Registry exam, or entry or progress into any clinical or field internship aspects of an EMS course, if the applicant:

1. knowingly falsifies any documents submitted to the bureau, commission or the EMS educational facility; or

2. has pled guilty, nolo contendere, been convicted of, or committed a: "crime of violence" as defined in R.S. 14:2(13), or any of the following crimes:

a. first degree feticide;

b. second degree feticide;

c. aggravated assault with a firearm;

d. stalking,

e. false imprisonment (offender armed with a dangerous weapon);

f. incest;

g. aggravated incest;

h. molestation of a juvenile;

i. sexual battery of the infirm; or

j. crime which involves felony drug charges.

B. For purposes of this Section, a pardon, suspension of imposition of sentence, expungement, or pretrial diversion or similar programs shall not negate or diminish the requirements of this Section.

C. Applicants who are denied certification, reinstatement, or the right to practice EMS as a student shall not be eligible to submit a new application, unless the ground for denial is falsification of records and until the following conditions are met.

1. A minimum of two years has passed since the denial was issued.

2. The applicant presents evidence that the cause for the denial no longer exists.

3. A hearing or conference is held before the commission to review the evidence, to afford the applicant the opportunity to prove that the cause for the denial no longer exists, and to provide an opportunity for the commission to evaluate changes in the person or conditions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§305. Delay of Certification, Reinstatement, or the Right to Practice EMS as a Student

A. Applicants for certification, reinstatement, and for practice as a EMS student shall have approval delayed for certification, for reinstatement, to receive a temporary working permit, to be eligible for National Registry Exam, or to enter or progress into any clinical EMS course, if the applicant:

1. has any pending disciplinary action or any restrictions of any form by any licensing/certifying entity in any state; or

2. has a pending criminal charge that involves any violence or danger to another person, or involves a crime which constitutes a threat to patient care; or

3. has pled guilty, nolo contendere, been convicted of or committed a crime that reflects on the ability of the person to practice EMS safely, and the conditions of the court have not been met, or is currently serving a court ordered probation or parole. If the crime is a "crime of violence" as defined in R.S. 14:2(13) or any of the following crimes: first degree feticide, second degree feticide, aggravated assault with a firearm, stalking, false imprisonment-offender armed with a dangerous weapon, incest, aggravated incest, molestation of a juvenile, sexual battery of the infirm, or a crime which involves felony drug charges, the applicant shall be denied.

B. For purposes of this Section, a pardon, suspension of imposition of sentence, expungement, or pretrial diversion or similar programs shall not negate or diminish the requirements of this Section.

C. Applicants who are delayed certification, reinstatement, or the right to practice EMS, as a student shall not be eligible to submit a new application until the following conditions are met.

1. The applicant presents sufficient evidence that the cause for the delay no longer exists; and

2. A hearing or conference is held before the commission to review the evidence, to afford the applicant the opportunity to prove that the cause for the delay no longer exists, and to provide an opportunity for the commission to evaluate changes in the person or conditions.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

Chapter 5. Disciplinary Proceedings; Alternative to Disciplinary Proceedings

§501. Disciplinary Proceedings Before the Commission

A. The Emergency Medical Services Certification Commission has the responsibility to consider and determine the action necessary upon all charges of conduct which fail to conform to R.S. 40:1231 et seq., as re-enacted and amended, or to the rules and regulations promulgated to carry out the provisions of this Subpart.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§503. Proceedings against Certified EMS Professional or Certified EMS Professional Applicants

A. The commission may direct the Bureau of Emergency Medical Services to deny, revoke, suspend, probate, limit, reprimand, or restrict any certification to practice as a certified EMS professional or otherwise discipline an individual in accordance with R.S. 40:1232.6.

B. Every individual subjected to disciplinary proceedings shall be afforded an opportunity for a hearing before the commission or its duly appointed hearing officer or committee.

C. A complaint that an individual has engaged in, or is engaging in, any conduct proscribed by R.S. 40:1232.6 may be made by any person, staff, agency or the commission. Such complaints shall be in writing, and on a form prescribed by the commission or affixed to the form prescribed by the commission.

D. Grounds for disciplinary proceedings against a certified EMS professional are specified in R.S. 40:1232.6.

1. Is guilty of selling or attempting to sell, falsely obtaining, or furnishing to a person a certified emergency medical technician or certified first responder certification document.

2. Is guilty of a felony or is convicted of a crime or offense which reflects the inability to practice EMS with due regard for the health and safety of clients or patients or enters a plea of guilty or nolo contendere to a criminal charge regardless of final disposition of the criminal proceeding, including, but not limited to, expungement, non-adjudication or pardon.

3. Is unfit or incompetent by reason of negligence, habit, or other cause.

4. Is habitually intemperate in the use of or abuses alcohol or habit-forming drugs.

5. Has demonstrated actual or potential inability to practice EMS with reasonable skill and safety to individuals because of use of alcohol or drugs; or has demonstrated inability to practice EMS with reasonable skill and safety to individuals because of illness or as a result of any mental or physical condition.

6. Is mentally incompetent.

7. Has had a certification to practice EMS or to practice as another health care provider denied, revoked, suspended, or otherwise restricted.

8. Is guilty of moral turpitude.

9. Has violated any provision of this Subpart.

10. Is guilty of aiding or abetting another person in the violation of this Subpart.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§505. Proceedings Involving Students Enrolled in EMS Courses

A. The commission may direct the Bureau of Emergency Medical Services to deny, revoke, suspend, probate, limit, reprimand or restrict any student enrollment in EMS courses, or otherwise discipline a student enrolled in EMS courses or attempting to enroll in EMS courses as part of its duties and responsibilities in regulating the practice of EMS in Louisiana and in overseeing the administration of the curriculum and operation of EMS education programs in the state of Louisiana.

B. Every student enrolled or attempting to enroll in EMS courses subjected to the proceedings set forth above, shall be afforded an opportunity for a hearing before the commission or its duly appointed hearing officer.

C. Information obtained by the commission that a EMS student enrolled or attempting to enroll in EMS courses is or has engaged in any conduct prescribed by R.S. 40:1232.6, shall be received in a form prescribed by the commission. This information may be furnished by any person, staff, agency or by the commission.

D. Grounds for proceedings against a student enrolled or attempting to enroll in EMS courses are:

1. all of the grounds for disciplinary proceedings against certified EMS professional listed in section D. of Proceedings Against Certified EMS Professional or Certified EMS Professional Applicants;

2. has been denied a request to enroll in EMS courses or has been denied a Certification to practice in any health

care field or had such privileges revoked, suspended or otherwise restricted.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§507. Definition of Terms

A. The commission in the exercise of its disciplinary authority has adopted the following meaning for the following terms.

Aiding and Abetting: to intentionally assist anyone by condoning, or to apply positive or negative force to assist anyone in violating the Emergency Medical Services Practice Act or the rules and regulations of the commission or bureau.

Deny: to refuse for cause.

Habit: a mode of behavior, which an individual acquires over a period of time.

Limit: to confine within certain bounds.

Mentally Incompetent: a court judgment of legal insanity or incompetence or a medical diagnosis indicating insanity or incompetence.

Moral Turpitude: an act, which is dishonest, or contrary to good morals.

Negligence: a breach of duty of care owed to an individual.

Other Causes: includes, but is not limited to:

a. failure to practice EMS in accordance with the standards of EMS practice;

b. possessing a physical impairment or mental impairment, which interferes with the judgment, skills or abilities required for the practice of EMS;

c. failure to utilize appropriate judgment;

d. failure to exercise technical competence in carrying out EMS care;

e. violating the confidentiality of information or knowledge concerning the patient;

f. performing procedures beyond the authorized scope of EMS or any specialty thereof;

g. performing duties and assuming responsibilities within the scope of the definition of EMS practice when competency has not been achieved or maintained, or where competency has not been achieved or maintained in a particular specialty;

h. improper use of drugs, medical supplies or equipment, patient's records, or other items;

i. misappropriating items of an individual, agency, or entity;

j. falsifying records;

k. failure to act, or negligently or willfully committing any act that adversely affects the physical or psychosocial welfare of the patient;

l. delegating or assigning EMS care, functions, tasks, or responsibilities to others contrary to regulations or failing to adequately supervise EMS tasks assigned to others during the course of providing EMS care.

m. leaving a EMS assignment without properly notifying appropriate personnel;

n. failing to report to the Bureau of Emergency Medical Services, through the proper channels, facts known regarding the incompetent, unethical, or illegal practice of any EMS professional;

o. has violated a rule or an order adopted by the commission or the bureau, or a state or federal law relating to the practice of professional EMS, or a state or federal narcotics or controlled substance law;

p. inappropriate, incomplete or improper documentation;

q. use of or being under the influence of alcoholic beverages, illegal drugs or drugs which impair judgment while on duty;

r. failure to cooperate with the commission or bureau by:

i. not furnishing in writing a full and complete explanation covering a matter requested in writing by the commission or bureau; or

ii. not responding to subpoenas issued by the commission in connection with any investigation or hearing;

s. exceeds professional boundaries, including but not limited to sexual misconduct; and

t. use of any advertisement or solicitation which is false, misleading, or deceptive to the general public or persons to whom the advertisement or solicitation is primarily directed.

Probate: to stay a sentence of certification suspension during good behavior and placing under supervision of Bureau for a period of time. Certification is marked "probated" and specific requirements are identified.

Professional Boundaries: the limits of the professional relationship that allow for a safe therapeutic connection between the professional and the patient.

Reprimand: written communication to the individual stating the commission's concerns, and public notification of the individual's name and reason for the reprimand.

Restrict: to limit or restrain EMS practice by settings, types of patients, or other means.

Reasonable skill and safety: practicing EMS in accordance with the standards of EMS practice.

Revoke: to annul or make void by calling back. Revocation of certification shall be indefinite as to the practice of EMS in Louisiana.

Sexual misconduct: an extreme boundary violation which involves the use of power, influence and/or knowledge inherent in one's profession in order to obtain sexual gratification, romantic partners and/or sexual deviant outlets. Any behavior that is seductive, sexually demeaning, harassing or reasonably interpreted by a patient as sexually inappropriate, is a violation of the EMS professional's fiduciary responsibility to the patient.

Suspend: to hold certification to practice as a certified EMS professional in abeyance for a definite or an indefinite period of time.

Unfit or Incompetent: unsuitable.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§509. Disciplinary Process and Procedures

A. The provisions of the Administrative Procedure Act shall govern proceedings on questions of violation of R.S. 40:1231 et seq., as re-enacted and amended.

1. A disciplinary proceeding, including the formal hearing, is less formal than a judicial proceeding. It is not subject to strict rules and technicalities, but must be

conducted in accordance with considerations of fair play and constitutional requirements of due process.

2. The purpose of a disciplinary proceeding is to determine contested issues of law and fact; whether the individual did certain acts and, if he did, whether those acts violated the Emergency Medical Services Practice Act or rules and regulations of the commission or bureau; and to determine the appropriate disciplinary action.

3. Any disciplinary action shall also be forwarded to the National Registry of Emergency Medical Technicians (NREMT), as applicable, and any other certification agency and/or required reporting entity.

B. Investigation

1. The process of a disciplinary proceeding shall include certain steps and may include other steps as follows.

a. The bureau or commission receives information alleging that an individual has acted in violation of the Emergency Medical Services Practice Act. Communications from the informant shall be privileged and shall not be revealed to any person unless such documents will be offered for evidence in a formal hearing, or unless those documents are subpoenaed by a court, or requested by other regulatory or law enforcement agencies.

b. The information is investigated by the bureau's staff to determine if there is sufficient evidence to warrant disciplinary proceedings. Information received by the bureau or commission shall not be considered a complaint until the individual furnishing that information provides the information in writing. The commission chair or designee may issue a subpoena prior to the filing of charges if, in the opinion of the chair, such a subpoena is necessary to investigate any potential violation or lack of compliance with R.S.40:1231 et seq., or the rules, regulations, or orders of the bureau or commission. The subpoena may be to compel the attendance of any person to appear for the purposes of giving sworn testimony and/or to compel the production of books, records, papers, or other objects.

2. An agreement worked out between the complainant and the individual does not preclude disciplinary action by the commission. The nature of the offense alleged and the evidence before the commission must be considered.

C. Informal Disposition of with No Disciplinary Action

1. Some allegations may be settled informally by the commission and the individual, without formal disciplinary action. The following types of informal dispositions may be utilized.

a. Disposition by Correspondence

i. For less serious allegations, the chair, or a designee of the commission, may write to the individual explaining the nature of the information received. The individual's subsequent response may satisfactorily explain that no violation of the Emergency Medical Services Practice Act, or rules, or order of the commission or bureau occurred, or that the matter does not rise to the level requiring formal disposition at this time, and the matter may be dropped. If the situation is not satisfactorily explained, it shall be investigated and disposed of through another informal means or brought before the commission for a formal hearing.

b. Informal Conference

i. The chair, or a designee of the chair, and another member of the commission or a bureau staff member may hold a conference with the individual, in lieu of, or in addition to correspondence, in cases of less serious

allegations. If the respondent can satisfactorily explain that no violation of the Emergency Medical Services Practice Act, or rules, or order of the commission or bureau occurred, or that the matter does not rise to the level requiring formal disposition at this time, then the matter may be dismissed.

ii. The individual shall be given adequate notice of the fact that information brought out at the conference may later be used in a formal hearing.

iii. Referral to an alternative to the disciplinary process.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§511. Formal Disciplinary Action

A. A decision to initiate formal disciplinary proceedings is made if one or more of the following conditions exist:

1. the complaint is sufficiently serious;
2. the individual fails to respond to the commission's correspondence concerning the complaint;
3. the individual's response to the commission's letter or investigative demand is not convincing that no action is necessary;
4. an informal approach is used, but fails to resolve all of the issues.

B. Informal Procedures

1. The matter may be resolved without a formal administrative hearing by either a voluntary surrender of certification, Consent Order, or Settlement Order. These actions shall constitute disciplinary action and shall be a public record of the commission. The commission shall publish the individual's name, a brief description of the violation, and the disciplinary action.

C. Voluntary Surrender of Certification. An individual who is under investigation for violation of the practice act or rules of the commission or bureau may voluntarily surrender his certification to the bureau. The voluntary surrender invalidates the certification at the time of its relinquishment. An individual practicing as a certified EMS professional during the period of voluntary certification surrender is considered an illegal practitioner and is subject to the penalties provided by this chapter and RS 40.1231 et seq.

1. Any certification surrender shall not be deemed to be an admission of the alleged facts of any pending investigation or complaint. The fact of certification surrender shall be deemed a disciplinary action and shall be reported and distributed in the same manner as final decisions of the commission.

2. Surrender or non-renewal of certification shall not preclude the commission from investigating or completing a disciplinary proceeding based upon the individual's conduct prior to or subsequent to the surrender of certification.

3. Individuals who surrender their certification are not eligible for reinstatement of certification for a minimum of two years and until meeting the requirements for reinstatement of certification as described in this chapter.

D. Consent Order

1. An order involving some type of disciplinary action may be made by the commission with the consent of the individual.

2. The chair or the Bureau of EMS Director is authorized to offer the individual the choice of a Consent Order in lieu of an Administrative Hearing.

3. A Consent Order signed by an individual is an irrevocable offer by the individual until approved, or rejected, by the commission chair or designee.

4. A Consent Order requires formal approval of a quorum of the commission. All actions of the bureau shall be reported to the commission at its next regularly scheduled meeting.

5. A Consent Order is not the result of the commission's deliberation; it is the commission's formal approval of an agreement reached between the commission and the individual. The order is issued by the commission to carry out the parties' agreement.

a. Should the commission require evidence before arriving at a decision, the individual shall be notified and given an opportunity for a hearing.

b. Should the commission revise the terms of the agreement, said revised agreement shall be presented for the individual's acceptance. The commission may formulate its order contingent upon the individual's acceptance.

c. The commission shall have the right to refer any case directly to an Administrative Hearing without first offering a Consent Agreement.

E. Settlement Order

1. Disciplinary Settlement Committee, consisting of the chair, or a designee of the chair, and another member of the commission or a bureau staff member, is delegated the authority to render a final decision regarding settlement of a contested administrative matter by offering a Settlement Order in lieu of an administrative hearing. The Settlement Order shall be deemed an Order of the commission, effective immediately upon signature of all parties to the agreement.

a.. The Disciplinary Settlement shall be submitted to the commission for review at the next regularly scheduled disciplinary hearing.

b. Should the Disciplinary Settlement Committee be unable to successfully resolve a case, or should the Committee believe that the public would be better protected by a decision rendered by the entire commission, the matter will be forwarded to the commission for a formal hearing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§513. Formal Hearing

A. The commission has the authority, granted by R.S. 40:1232.3, to bring administrative proceedings to certified EMS professionals, applicants for certification, individuals seeking enrollment or progression in an approved EMS program, and individuals practicing EMS without certification. The commission and the individual are the parties to the proceeding. The individual has the right to appear and be heard, either in person or by counsel; the right of notice, a statement of what accusations have been made; the right to present evidence and to cross-examine; and the right to have witnesses subpoenaed.

B. Notice and Service

1. The chair or a designee fixes a time and place for a hearing.

2. At least 15 days prior to the date set for the hearing, a copy of the charges and a notice of the time and place of the hearing are sent by certified mail, return receipt requested, to the individual's address of record. Notice to an

individual is effective and service is complete when sent by certified mail to the individual's address of record.

3. At least five working days prior to the scheduled hearing date, the individual shall respond in writing as to his intention to appear or not appear at the scheduled hearing. At least five working days prior to the scheduled hearing date, the individual shall also file with the commission a written response to the specific allegations contained in the notice of charges. Allegations not specifically answered shall be deemed admitted.

4. If the individual does not appear, in person or through counsel, after proper notice has been given, the individual has waived these rights and the commission may proceed with the hearing without the presence of the individual.

C. Motions for Continuance

1. The commission shall not postpone cases that have been scheduled for hearing absent good cause. A written motion by a certified EMS professional, applicant, or student for a continuance shall be filed with the commission five working days prior to the time set for the hearing, except for extreme emergencies. The motion shall contain the reason for the request, which reason must be based upon good cause and have relevance for due process. Requests for continuances may be approved or denied by the chair or designee. No more than three requests for continuance shall be granted.

D. Subpoenas

1. The chair, or a designee of the commission, issues subpoenas for the commission for disciplinary proceedings, and when requested to do so, may issue subpoenas for the other party. Subpoenas include:

a. a subpoena requiring a person to appear and give testimony;

b. a subpoena duces tecum, which requires that a person produce books, records, correspondence, or other materials over which he has control.

E. Hearing

1. The hearing is held, at which time the commission's primary role is to hear evidence and argument, and to reach a decision. Any commission member, who because of bias or interest is unable to assure a fair hearing, shall be recused from that particular proceeding. The reasons for the recusal are made part of the record. Should the majority of the commission members be recused for a particular proceeding, the governor shall be requested to appoint a sufficient number of pro tem members to obtain a quorum for the proceeding.

2. The commission shall be represented by a Department of Health and Hospitals' attorney. Evidence is presented that disciplinary action should be taken against the individual. The individual may present evidence personally or through an attorney, and witnesses may testify on behalf of the individual.

3. Evidence includes the following:

a. oral testimony given by witnesses at the hearing, except that, for good cause, testimony may be taken by deposition (cost of the deposition is borne by requesting party) and/or by sworn affidavits;

b. documentary evidence, i.e., written or printed materials including public, business or institutional records, books and reports; such documentary evidence may be received in the form of copies or excerpts, or by incorporation by reference, if the incorporated materials are

available for examination by the parties before being received into evidence;

- c. visual, physical and illustrative evidence;
- d. admissions, which are written or oral statements of a party made either before or during the hearing;
- e. facts officially noted into the record, usually readily determined facts making proof of such unnecessary.;
- f. All testimony is given under oath. If the witness objects to swearing, the word "affirm" may be substituted.

4. The chair of the commission presides and the customary order of proceedings at a hearing is as follows.

a. The chair of the commission presents the case against the individual.

b. The individual, or his attorney, makes an opening statement, explaining why he believes that the charges against him are not legally founded.

c. The individual commission members ask relevant questions.

d. The individual, or his attorney, may make any statements or questions to the commission.

e. The chair of the commission makes the final statement.

f. The commission may impose reasonable time limits on all sides in a hearing, provided that limits will not unduly prejudice the rights of the parties.

g. The commission may exclude incompetent, irrelevant, immaterial, or unduly repetitious evidence. Objections to evidentiary offers may be made and shall be noted in the record.

h. When a hearing will be expedited and the interests of the parties will not be prejudiced substantially, any part of the evidence may be received in written form.

i. Motions may be made before, during, or after a hearing. All motions shall be made at an appropriate time, according to the nature of the request. Motions made before or after the hearing shall be in writing. Those made during the course of the hearing may be made orally since they become part of the transcript of the proceeding.

5. The records of the hearing shall include:

- a. all papers filed and served in the proceeding;
- b. all documents and other materials accepted as evidence at the hearing;
- c. statements of matters officially noticed;
- d. notices required by the statutes or rules, including notice of the hearing;
- e. affidavits of service or receipts for mailing or process or other evidence of service;
- f. stipulations, settlement agreements or consent orders, if any;
- g. records of matters agreed upon at a pre-hearing conference;
- h. orders of the commission and its final decision;
- i. actions taken subsequent to the decision, including requests for reconsideration and rehearing;
- j. a transcript of the proceedings, if one has been made, or a tape recording or stenographic record.

k. The record of the proceeding shall be retained until the time for any appeal has expired, or until the appeal has been concluded. The record is not transcribed unless a party to the proceeding so requests, and the requesting party pays for the cost of the transcript. A party who appeals a decision of the commission shall pay all of the costs incurred by the Department of Health and Hospitals for preparation of the original and any certified copy of the record of the

proceeding that is required to be transmitted to the reviewing court.

6. The decision of the commission shall be reached according to the following process.

a. Determine the facts in the issue on the basis of the evidence submitted at the hearing.

b. Determine whether the facts in the case support the charges brought against the individual.

c. Determine whether charges brought are a violation of the Emergency Medical Services Practice Act or rules and regulations of the commission or the bureau.

7. The vote of the commission shall be recorded. Minority views may be made part of the record.

8. Sanctions against the individual who is party to the proceeding are based upon the findings of fact and conclusions of law determined by the hearing. The party is notified by certified mail of the decision of the commission.

F. Disciplinary Sanctions

1. The type of disciplinary sanctions and length of time specified for the sanctions shall be determined on an individual basis, considering all facts pertinent to the case.

2. The commission sets forth guidelines with ranges of disciplinary sanctions from which disciplinary penalties may be imposed. These guidelines are intended to serve only as a guide for staff and commission members when considering penalties, which could be imposed for specific violations of the Emergency Medical Services Practice Act. Guidelines are in no way binding on the commission when dealing with disciplinary matters. The commission may order certification sanctions.

3. The disciplinary guidelines are based upon a single count violation. Multiple counts of violations of the same action, or other unrelated violations contained in the same complaint will be grounds for enhancement of penalties. Each day of a continuum of violations may be treated as a separate violation.

4. In determining sanctions, the staff shall consider aggravating or mitigating circumstances identified by the commission in addition to any other factors. The list of aggravating and mitigating circumstances in the guidelines is not to be considered an exclusive list of circumstances.

a. Aggravating circumstances may result in the commission issuing maximum sanctions, or they may justify enhancement of a penalty beyond the maximum guidelines.

b. Mitigating or extenuating circumstances may justify lessening of the sanctions below the minimum guidelines. Certification suspensions may be stayed with stipulated probations in some extenuating circumstances.

5. The Order may stipulate remedial education, specific evaluation and therapy, and other sanctions as deemed necessary and appropriate to the case.

G. Reconsideration or Rehearing

1. The commission shall reconsider a matter when ordered to do so by a higher administrative authority or when the case is remanded for reconsideration or rehearing by a court to which the commission's decision has been appealed.

2. The commission may reconsider a matter which it has decided. This may involve rehearing the case, or it may involve reconsidering the case on the basis of the record. Such reconsideration may occur when a party files a petition requesting that the decision be reconsidered by the commission and specifies the particular grounds therefore.

3. A petition by a party for reconsideration or rehearing must be in proper form and filed within 10 days from the date of entry of the decision. A decision is deemed to be entered when it is signed by the chair or designee and sent by certified mail to the individual's address of record. The petition shall set forth the grounds for the rehearing, which include one or more of the following:

a. the commission's decision is clearly contrary to the law and the evidence;

b. there is newly discovered evidence, which was not available to the individual at the time of the hearing and which may be sufficient to reverse the commission's action.;

c. there is a showing that issues not previously considered ought to be examined in order to dispose of the case properly;

d. it would be in the public interest to further consider the issues and the evidence;

e. upon the commission's receipt of a petition for rehearing or reconsideration, the commission may affirm or modify the decision or grant a rehearing to all or any of the parties and on all or part of the issues for any of the above stated reasons. An order granting a rehearing shall specify with particularity the ground or grounds on which the rehearing is granted, and the rehearing shall cover only those matters so specified.

H. Emergency Action

1. If the commission finds that public health, safety, and welfare requires emergency action and a finding to that effect is incorporated in its order, summary suspension of a certification may be ordered by the chair or designee pending proceedings for revocation or other action. Such proceedings shall be promptly instituted and determined at the next regularly scheduled commission meeting.

I. Disciplinary Proceedings in another Licensing Jurisdiction

1. When a certified EMS professional has his certification revoked, suspended, denied or sanctioned in other ways for disciplinary reasons by the original certification/licensing jurisdiction or by a subsequent certification/licensing authority that certified EMS professional shall be notified that his Louisiana Certification is automatically suspended, except for the following:

a. nonpayment of fees;

b. a person in a recovery program for chemical dependency receives permission of the state of origin to transfer to another state;

c. the certified EMS professional is issued a reprimand and the certified EMS professional agrees to having his Louisiana Certification reprimanded identically to, or in excess of, the said jurisdiction's reprimand; and

d. the certification is encumbered with a reprimand with stipulations and the certified EMS professional agrees to having his Louisiana Certification probated with stipulations that are identical to, or exceed, the stipulations in said jurisdiction.

2. The certified EMS professional may have his certification reinstated provided that the certified EMS professional:

a. provides evidence of an unencumbered certification by the involved certification/licensing authority and all subsequent certification/licensing authorities; and

b. meets requirements for reinstatement of certification as described in this Chapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§515. Appeal from Commission Decision

A. Any person whose certification has been revoked, suspended, denied, or otherwise disciplined by the bureau shall have the right to have the proceedings of the commission reviewed by the court having jurisdiction over the commission, provided that such appeal is made within 30 days after the date indicated on the registered mail receipt of the written notice of the commission's decision. The commission's decision is enforceable in the interim unless the court orders a stay.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§517. Reinstatement of Certification

A. Application for reinstatement of a suspended or surrendered certification shall be in writing.

B. The application for reinstatement of a suspended certification does not require satisfaction of the requirements for initial certification. However, the requirements of LAC 46:XXXVIII shall be met.

C. Prior to reinstatement of a certification previously suspended (except for nonpayment of fees), a hearing or conference is held before the commission to afford the applicant with the opportunity to present evidence that the cause for the revocation or suspension no longer exists and to provide an opportunity for the commission to evaluate changes in the person or conditions. In certain situations, the certification may be reinstated by consent order or settlement order. The burden of proof is on the applicant to prove that conditions that led to the suspension no longer exist and/or no longer affect applicant's ability to practice safely. If reinstatement is granted, a period of probation with stipulations may be imposed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:2017.10.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Emergency Medical Services Certification Commission, LR 28:

§519. Definition of Terms Applying to EMS Practice as used in This Chapter.

Accountability: being answerable for one's actions or inactions. The certified EMS professional answers to self, patient, agency, profession and society for the effectiveness and quality of EMS care rendered. It is the personal responsibility of each individual to maintain competency in practice. If the assigned EMS professional does not possess the specialized EMS knowledge, skills and abilities required to provide the required care, said professional shall notify the appropriate supervisory EMS personnel.

Additional Acts: activities beyond those taught in basic EMS education programs. Additional acts are authorized by the commission through rules and regulations or declaratory statements interpreting the legal definition of EMS. Certified EMS professional are accountable for attaining and maintaining competency when performing approved additional acts.

Assessment: identifying human responses, which indicate existing, or potential abnormal condition through

means of the patient history, physical examination, and observation, in accordance with the Standards of EMS Practice.

Assignment: designating EMS activities to be performed by an individual consistent with his scope of practice. Carrying out the medical orders of a physician licensed in Louisiana.

Collaborating: a process involving two or more health care professionals working together, though not necessarily in each other's presence, each contributing one's respective area of expertise to provide more comprehensive care than one alone can offer.

Delegating EMS Interventions: committing or entrusting the performance of selected EMS tasks by the certified EMS professional to other competent EMS personnel in selected situations. The certified EMS professional retains the accountability for the total EMS care of the individual.

EMS Services: activities designed to resolve, diminish, or prevent the needs that are inferred from the individual's problem; includes the planning, implementation and evaluation of said activities in accordance with the Standards of EMS Practice.

Expanded scope of practice: those functions, procedures and activities which are currently not part of the approved National EMS curriculum, but have been approved by the EMS Certification Commission as appropriate for the various levels of EMS professionals.

Field diagnosis: prehospital evaluation of the patient's condition and its causes.

Maintaining EMS Care Rendered Directly or Indirectly: preserving the continuity of safe and effective EMS care, including the delegated EMS activities.

Managing and Supervising the Practice of EMS: those activities which serve to fulfill the accountability of the certified EMS professional for the total EMS care of the individual when tasks in the EMS care are delegated to other EMS personnel. These activities include:

1. judging the priority of EMS needs of the individual(s);
2. determining actions required to meet the needs;
3. assigning personnel, including self, qualified to implement the prescribed EMS care components of that care;
4. providing information needed by personnel for the implementation of the assigned EMS care and ascertaining the assimilation of same information;
5. directing the EMS care and evaluating the outcomes of that care;
6. determining and initiating changes in EMS care or in assignment of EMS personnel.

Medical Diagnosis: the conclusion reached in identification of the patient's disease, especially the art of distinguishing among several possibilities with the intent of prescribing relevant treatment.

Medical interventions: all functions, activities, medications and medical treatments of therapeutic or corrective nature approved by the Bureau of EMS and the EMS Certification Commission.

Preventive instruction: those EMS measures that provide health information and explanation to the public to reduce the incidence of death and injury.

Specialty Care Transport Paramedic: those individuals who have met the requirements as approved by the EMS Certification Commission.

Specialized Knowledge and Skills: required for the practice of EMS means the current theory and practice taught in basic EMS education programs preparing persons for EMS professional certification as well as information in the biological, physical and behavioral sciences.

Student EMS Professional: a person who is engaged in learning experiences in a program of study leading to candidacy for certification to practice as a certified EMS professional. The term applies only when the person is participating in an integral part of the program of study.

Teaching of EMS: instructing EMS professional students and providing continuing EMS education to certified EMS professionals.

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Chapter 7. Administrative Provisions

Subchapter A. Fees and Costs

Reserved.