

## Chapter HSS 111

EMERGENCY MEDICAL  
TECHNICIAN-INTERMEDIATE

HSS 111.01	Purpose	HSS 111.07	Training permits, certification, renewal of certification
HSS 111.02	Applicability	HSS 111.08	Ambulance service provider requirements
HSS 111.03	Authority	HSS 111.09	General requirements
HSS 111.04	Definitions	HSS 111.10	Standards incorporated by reference
HSS 111.05	Emergency medical technician-intermediate plan		
HSS 111.06	Emergency medical technician-intermediate training		

**HSS 111.01 Purpose.** This chapter is adopted to provide a mechanism whereby ambulance attendants licensed in Wisconsin may be trained to perform selected skills beyond the basic life support level and be examined and certified by the department to perform those skills. This certification is designed to be utilized in areas in which emergency medical technician-advanced (paramedic) status is impractical or unnecessary. This chapter mandates control of the training and operation of such programs by a hospital and licensed physician to provide for standardization and maintenance of quality in training and service provision statewide.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.02 Applicability.** This chapter applies to any person involved in emergency medical services supervision, training or service provision who seeks to provide training, be trained or engage in the provision of life support skills enumerated in this chapter.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.03 Authority.** This chapter is promulgated under s. 146.50 (3), Stats.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.04 Definitions.** (1) "Certified training center" means a medical or educational institution approved by the department to conduct emergency medical technician-intermediate training.

(2) "Department" means the department of health and social services.

(3) "Emergency medical technician (EMT) - intermediate" means a person holding a valid ambulance attendant license issued by the department who is additionally trained and certified by the department to provide all of the following life support skills under medical control:

- (a) Utilization of an esophageal obturator airway or esophageal gastric tube airway, or both.
- (b) Administration of intravenous infusions.
- (c) Administration of subcutaneous injections.
- (d) Application of medical anti-shock trousers.

(e) Drawing of blood samples.

(f) Administration of selected medications.

(4) "Emergency medical technician-intermediate plan" means a plan submitted jointly by the medical director, medical control hospital, training center and licensed ambulance service provider (s) intending to participate in EMT-intermediate training and services which details the training and utilization of EMT-intermediate personnel.

(5) "Emergency medical technician-intermediate training course" means a course of instruction consisting of classroom, clinical and supervised field training, approved by the department, which will qualify the student for examination and certification as an EMT-intermediate.

(6) "Medical control" means the direction and supervision of the activities of an EMT-intermediate by the medical director or a physician designee through verbal orders.

(7) "Medical control hospital" means the acute care hospital named in the EMT-intermediate plan which accepts the responsibility to manage and serve as the base for the system of communications and medical control and direction for EMT-intermediate personnel and to designate the medical director for the program.

(8) "Medical director" means the licensed physician who, under s. 448.03 (2) (e), Stats., accepts responsibility for the training, medical coordination, direction, and supervision of EMT-intermediate personnel, the establishment of standard operating procedures for such personnel, and the designation of specific physicians for day-to-day medical control.

(9) "Training program coordinator" means the person designated by the medical director and certified training center who has the responsibility for coordination and administration of an EMT-intermediate training course.

History: Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.05 Emergency medical technician-intermediate plan.**

(1) Prior to initiation of training or utilization of EMT-intermediate personnel, a plan for such training and utilization shall be submitted to the department for review. Departmental approval of the EMT-intermediate plan shall be a prerequisite to initiation of EMT-intermediate training and service provision. At a minimum, this plan shall include:

(a) Identification and description of the medical control hospital, medical director and designated physicians providing day-to-day medical control.

(b) Identification and description of the certified training center and its relationship to the medical control hospital.

(c) Identification and qualifications of the training program coordinator and designated clinical and supervised field experience instructors.

(d) Identification and description of the licensed ambulance service provider (s) planning to utilize EMT-intermediate personnel.

(e) Description of the classroom, clinical and supervised field training elements of the training program to be utilized, including content, behavioral objectives and hours involved.

(f) Description of the operating policies and procedures which will be utilized in the medical control and provision of EMT-intermediate services.

(g) Description of the communications system to be utilized in providing medical control to EMT-intermediate personnel.

(h) Description of the methods by which continuing education and continuing competency of the EMT-intermediate personnel will be assured.

(i) Description of the relationship of the proposed EMT-intermediate services to other emergency medical and public services in the plan area. This shall include a description of coordination between the EMT-intermediate plan and any EMT-advanced (paramedic) plan extant in any part of the area.

(j) Evidence of commitment to the proposed program and endorsement by local and regional medical, governmental and emergency medical services agencies and authorities.

(2) Approval decision on a plan shall be based on the requirements of this chapter coupled with a site visit to the area involved in the plan.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.06 Emergency medical technician-intermediate training.** (1) An EMT-intermediate training course shall include classroom, clinical and supervised field training in the following skills:

(a) Patient examination and physical assessment including evaluation of shock and principles of triage.

(b) Airway management, including the use of the esophageal obturator airway or esophageal gastric tube airway, or both.

(c) Intravenous infusion therapy.

(d) Drawing of blood samples.

(e) Administration of subcutaneous injections.

(f) Application of medical anti-shock trousers.

(g) Administration of selected drugs and solutions.

(2) The training course shall include instruction in the use of specific prepackaged drugs and solutions, chosen by the medical director from the following:

(a) Five percent dextrose in water (I.V.)

(b) Lactated Ringers solution (I.V.)

(c) Normal saline solution (I.V.)

(d) Fifty percent dextrose solution (I.V.)

(e) Naloxone (I.V.)

## HSS 111

(f) Epinephrine 1:1,000 (subcutaneous).

(g) Syrup of ipecac (oral).

(3) Additions or substitutions of skills or drugs and solutions or both may be made with written approval of the department.

(4) The training course shall include content and behavioral objectives at least equivalent to the following modules of the Department of Transportation/National Highway Traffic Safety Administration, National Training Course, Emergency Medical Technician-Paramedic:

(a) Module 1 - The emergency medical technician: role, responsibility and training.

(b) Module 2 - Human systems and patient assessment.

(c) Module 3 - Shock and fluid therapy.

(d) Module 4 - General pharmacology (as appropriate to the drugs to be utilized and I.V. and subcutaneous drug administration).

(e) Module 5 - Respiratory system (as appropriate to utilization of the esophageal airway).

(f) Module 10 - Medical emergencies - units 1, 2, and 5 (narcotic overdose).

(5) The course shall include a minimum of 100 hours of instruction, divided among classroom, clinical and supervised field training. Classroom instruction shall be a minimum of 40 hours of this total. Clinical training shall take place in the medical control hospital.

(6) Departmental approval of the proposed training course shall be a prerequisite to the initiation of EMT-intermediate training. Approval of a training course shall include approval of curriculum, procedures, administrative details and guidelines necessary to ensure a standardized program.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.07 Training permits, certification, renewal of certification.** (1) **TRAINING PERMITS.** A training permit shall be issued by the department to a licensed ambulance attendant who files an application accompanied by written verification from the medical director that the applicant is enrolled in an approved EMT-intermediate training course.

(a) A training permit shall be valid for one year provided that the applicant is satisfactorily participating in an approved training course and shall be nonrenewable.

(b) A training permit holder may perform the EMT-intermediate skills only under direct visual supervision of the medical director or a training instructor designated by the medical director. The training instructor shall be licensed or certified to at least the EMT-intermediate level.

(2) **CERTIFICATION.** (a) A person requesting certification as an emergency medical technician-intermediate shall:

1. Apply on forms provided by the department.

2. Be at least 18 years of age.
3. Hold a currently valid ambulance attendant license issued by the department.
4. Be employed by a licensed ambulance service provider identified in an approved EMT-intermediate plan.
5. Present evidence of at least one year of experience in emergency care and transportation as a licensed ambulance attendant, or its equivalent approved by the department, prior to entry into the EMT-intermediate training program.
6. Present evidence of satisfactory completion of an approved EMT-intermediate training course or equivalent education and training in the field of emergency medical care approved by the department.
7. Present evidence, signed by the medical director and acceptable to the department, of competence in the performance of the skills required for certification. Records shall be submitted by the medical director which indicate the number of times the candidate has, in the clinical or field setting and on training manikins:
  - a. Satisfactorily inserted an esophageal obturator airway or esophageal gastric tube airway, or both.
  - b. Satisfactorily inserted I.V. lines.
  - c. Properly prepared and administered doses of medication.
  - d. Satisfactorily applied medical anti-shock trousers.
8. Successfully pass a department approved cognitive and practical examination.
  - a. A person failing to achieve a passing grade in the required examination may request reexamination, and may be reexamined not more than twice at not less than 30 day intervals.
  - b. An applicant who fails to achieve a passing grade on the second reexamination shall not be admitted for further examination until reapplication and presentation of evidence of further training or education acceptable to the department.
    - (b) Certification shall be evidenced as an endorsement to the ambulance attendant license of the qualified applicant.
- (3) RENEWAL OF CERTIFICATION. Application for renewal of EMT-Intermediate certification shall be made annually concurrent with application for renewal of the ambulance attendant license. Application for renewal shall be made by the person certified on forms provided by the department and shall be signed by the medical director of the EMT-Intermediate program in which the applicant functions. Each EMT-intermediate certificate shall expire on June 30.

**Note:** Copies of application forms for training permits, certification and renewal of certification are available without charge from the EMS Section, Wisconsin Division of Health, P.O. Box 309, Madison, WI 53701.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

## HSS 111

**HSS 111.08 Ambulance service provider requirements.** In addition to satisfying the requirements set by s. 146.50, Stats., and ch. H 20, Wis. Adm. Code, the licensed ambulance service provider utilizing EMT-intermediate personnel shall ensure that:

(1) All ambulance vehicles carrying EMT-intermediate personnel include, at a minimum:

(a) Sphygmomanometer (adult and infant sizes).

(b) Stethoscope.

(c) Intravenous administration sets.

(d) Subcutaneous injection equipment.

(e) Esophageal obturator airway or esophageal gastric tube airway, or both.

(f) Medical anti-shock trousers.

(g) Pre-packaged medications, drugs and solutions specified in standard operating procedures and approved by the medical director.

(2) All ambulance vehicles carrying EMT-intermediate personnel include, at a minimum, 2-way VHF radio voice communication between ambulance, hospital and medical director or designated medical control physician.

(3) When a patient is being cared for and transported with utilization of EMT-intermediate equipment and treatment skills, the ambulance is staffed by at least one certified EMT-intermediate and one licensed ambulance attendant. A certified EMT-intermediate shall be with the patient during the period of emergency care and transportation.

(4) The ambulance service maintains sufficient vehicles, equipment and trained personnel to provide EMT-intermediate services on a 24-hour-a-day, 7-day-a-week basis.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.09 General Requirements. (1) CERTIFICATION, REVOCATION OR SUSPENSION.** The department may deny, refuse renewal of, suspend or revoke an EMT-intermediate certification for any of the following reasons:

(a) Certification was obtained through error or fraud.

(b) Any provision of this chapter is violated.

(c) The person certified has engaged in conduct detrimental to the health or safety of patients or to members of the general public during a period of emergency care or transportation.

**(2) ACTION ON EMT-INTERMEDIATE CERTIFICATE NOT TO AFFECT AMBULANCE ATTENDANT LICENSE.** Denial, refusal of renewal, suspension or revocation of an EMT-intermediate certificate shall not affect licensure as an ambulance attendant unless action is also taken under s. H 20.03 (4), Wis. Adm. Code, regarding such licensure.

**(3) ACTION ON AMBULANCE ATTENDANT LICENSE AFFECTS EMT-INTERMEDIATE CERTIFICATION.** Denial, refusal of renewal, expiration, suspen-

**Register,** November, 1981, No. 311

sion or revocation of an ambulance attendant license under s. H 20.03 (4), Wis. Adm. Code, shall have an identical effect on any EMT-intermediate certification attached to the license.

(4) **APPEAL.** Any denial of issuance or renewal, suspension or revocation of EMT-intermediate certification shall be subject to review upon timely request of the applicant directed to the department in accordance with ch. 227, Stats.

(5) **WAIVER.** The department may waive any rule or standard relating to the training, certification or utilization of emergency medical technicians-intermediate when that rule or standard is demonstrated to create an undue hardship in meeting the emergency medical services needs of an area and the waiver is demonstrated not to expose patients of those services to an unreasonable risk of harm.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.

**HSS 111.10 Standards incorporated by reference.** (1) The following standard is adopted by reference as provided in s. 227.025, Stats.: U.S. Department of Transportation/National Highway Traffic Safety Administration, National Training Course, Emergency Medical Technician-Paramedic, Modules 1, 2, 3, 4, 5 and 10.

(2) These documents are on file at the department of health and social services, the revisor of statutes office, and the secretary of state office, and are available for purchase from the U.S. Government Printing Office, Washington, D.C. 20402.

**History:** Cr. Register, November, 1981, No. 311, eff. 12-1-81.