

2005

STATE OF NEBRASKA

Rules and Regulations Relating to:

**CERTIFICATION OF OUT-OF-HOSPITAL EMERGENCY CARE
PROVIDERS**

TITLE 172 NAC 11

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM



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Title 172 PROFESSIONAL AND OCCUPATIONAL LICENSURE

Chapter 11 CERTIFICATION OF OUT-OF-HOSPITAL EMERGENCY
CARE PROVIDERS

INDEX TO REGULATIONS

Section	Page
001 Scope and Authority	1
002 Definitions	1
003 Out-of-Hospital Emergency Care Provider Certification	5
004 Renewal Requirements for Out-of-Hospital Emergency Care Provider Certification	14
005 Recertification of Expired Out-Of-Hospital Emergency Care Provider Certifications	20
006 Practices and Procedures For Certified Out-Of-Hospital Emergency Care Providers	22
007 Grounds on which the Department May Deny, Refuse Renewal of, Refuse Recertification of, or Discipline a Certificate	29
008 Re-Credentialing	33
009 Examination Eligibility and Procedures	38
010 Schedule of Fees	39
010 Administrative Penalty	40

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NEBRASKA HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE

172 NAC 11

Title 172 PROFESSIONAL AND OCCUPATIONAL LICENSURE

Chapter 11 CERTIFICATION OF OUT-OF-HOSPITAL EMERGENCY CARE PROVIDERS

11-001 SCOPE AND AUTHORITY: These regulations apply to the certification of out-of-hospital emergency care providers as defined in Neb. Rev. Stat. §§ 71-5172 to 71-51,103 and the Uniform Licensing Law.

11-002 DEFINITIONS:

Act means Neb. Rev. Stat. §§ 71-5172 to 71-51,103 known as the Emergency Medical Services Act.

Advanced Airway Management means the use of visualized or non-visualized devices that are inserted through the mouth or nose of patients, who are in respiratory distress, to allow passage of air and oxygen to the lungs.

Assessment examination means examinations, developed by the National Registry of Emergency Medical Technicians, to determine the competency of out-of-hospital emergency care personnel.

Assessment means the act of determining the type and degree of injury, illness or other medical disability.

Attest/Attestation means that the individual declares that all statements on the application/petition are true and complete.

Board means the Board of Emergency Medical Services.

Care and Treatment Standards means the more current standards established by a nationally recognized organization that, through research, accepted practice, and/or patient experience, issues guidelines for the care and treatment of patients in the emergency and/or out of hospital environment.

Certification means approval by the Department of individuals who have successfully met the minimum competency requirements by successfully completing EMS courses and successfully passing certifying examinations.

Certifying Examinations mean the minimum competency examinations developed by the National Registry of Emergency Medical Technicians to certify emergency medical technicians, first responders, emergency medical technician-intermediates, and emergency medical technician-paramedics.

Continuing Education means the attendance and participation in training, including distributive learning programs, which covers learning objectives of the subject matter of EMS Courses.

Critical Criteria means actions of commission or omission specified for each skill of the National Registry EMT-Intermediate and EMT-Paramedic practical examinations, which if performed in an actual emergency situation, would endanger or compromise the life or physical status of a patient. Performance of any critical criteria during an examination is grounds for failure of that skill.

Department means the Department of Health and Human Services Regulation and Licensure.

Distributive Learning means an instructional model that allows instructor, students, and content to be located in different non-centralized locations so that instruction and content occur independent of time and place and may be offered in one or more of the following strategies: print, internet, videotape, CD-ROM/DVD, satellite and television.

Distributive Learning Program means a course, class, and or printed material, offered for credit toward out-of-hospital emergency care provider certificate renewal, presented in the strategies consistent with the Distant Learning definition, covers the subject matter of the EMS courses and follows the current care and treatment standard.

Emergency Medical Service (EMS) means the organization responding to a perceived individual need for immediate medical care in order to prevent loss of life or aggravation of physiological or psychological illness or injury and is licensed as either a basic life support service or an advanced life support service.

Emergency Medical Technician means an individual who has a current certificate to practice as an emergency medical technician.

Emergency Medical Technician-Intermediate means an individual who has a current certificate to practice as an emergency medical technician-intermediate.

Emergency Medical Technician-Paramedic means an individual who has a current certificate to practice as an emergency medical technician-paramedic.

EMS Courses means any one or more of the following as defined in Neb. Rev. Stat. § 71-5179.

1. First Responder Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, First Responder: National Standard Curriculum. Included in the course are the learning and skill objectives of the subject matter, automatic/semi-automatic external defibrillator module, trauma module-lessons on "Musculoskeletal Care" and "Injuries to the Head and Spine," and airway module from the Emergency Medical Technician course and administration of epinephrine via auto injectors and aspirin. The appendices for administration of epinephrine via auto injectors and aspirin and the airway, trauma, and automatic/semi-automatic external defibrillator modules are optional training that may be included with the core curriculum or may be taught as separate modules.

2. Emergency Medical Technician Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician: National Standard Curriculum, including the appendices of advanced airway management, administration of intravenous fluids, monitoring of intravenous fluids, administration of epinephrine via auto injectors, albuterol, and aspirin, and the use of Federal Drug Administration approved home monitoring glucometers and oximeters. The appendices to the Emergency Medical Technician course are optional training that may be included with the core curriculum or may be taught as separate modules.
3. Emergency Medical Technician-Intermediate Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Intermediate: National Standard Curriculum.
4. Emergency Medical Technician-Paramedic Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Paramedic: National Standard Curriculum.
5. Pre-Hospital Emergency Care Course for Nurses means a course of instruction that has been developed by the Department to train Licensed Registered Nurses and Licensed Practical Nurses in the subject matter of the Emergency Medical Technician course that was not taught in the nurses training.
6. Emergency Medical Technician-Refresher Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Refresher: National Standard Curriculum with an end of the course examination that includes: 1. One hundred written questions with ten questions covering each module; and 2. A skills examination covering the emergency medical technician certifying examination skills.
7. First Responder-Refresher Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, First Responder Refresher: National Standard Curriculum with an end of the course examination that includes: 1. One hundred written questions with ten questions covering each module; and 2. A skills examination covering the first responder certifying examination skills.
8. First Responder to Emergency Medical Technician-Bridge Course means a course of instruction developed by the Department to train Certified First Responders in the subject matter of the Emergency Medical Technician course that was not taught in the First Responder course.
9. Emergency Medical Technician-Intermediate Refresher Course means a course of instruction that meets the United States Department of Transportation, National Highway

Traffic Safety Administration, Emergency Medical Technician-Intermediate Refresher: National Standard Curriculum.

10. Emergency Medical Technician-Paramedic Refresher Course means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Paramedic Refresher: National Standard Curriculum.
11. Emergency Medical Services Instructor Training Program means a course of instruction that meets the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Services Instructor Training Program: A National Standard Curriculum.

First Responder means an individual who has a current certificate to practice as a first responder.

Mandatory Reporting Law means Neb. Rev. Stat. § 71-168.

National Registry of Emergency Medical Technicians (NREMT) means an organization that develops minimum competency certifying examinations for EMS courses.

Out-of-Hospital means locations where emergency medical services are requested to respond to actual or perceived individual needs for immediate medical care.

Out-of-Hospital Emergency Care Provider means all certification classifications of emergency care providers established pursuant to the act.

Patient means an individual who either identifies himself/herself as being in need of medical attention or upon assessment by an out-of-hospital emergency care provider has an injury or illness requiring treatment.

Physician Medical Director means a qualified physician who is responsible for the medical supervision of out-of-hospital emergency care providers and verification of skill proficiency of out-of-hospital emergency care providers pursuant to Neb. Rev. Stat. § 71-5178.

Prescription means an order for a drug or device issued by a practitioner for a specific patient, for emergency use, or for use in immunizations. Prescription does not include a chart order.

Protocol means a set of written policies, procedures, and directions from a physician medical director to an out-of-hospital emergency care provider concerning the medical procedures to be performed in specific situations.

Qualified Physician Surrogate means a qualified, trained medical person designated by a qualified physician in writing to act as an agent for the physician in directing the actions or recertification of out-of-hospital emergency care providers.

11-003 OUT-OF-HOSPITAL EMERGENCY CARE PROVIDER CERTIFICATION: Any person who wishes to represent himself/herself as an out-of-hospital emergency care provider must be certified as such. The criteria for issuance of certification and the documentation required by the Department and the Board are set forth below.

11-003.01 Certification Based on Examination: An applicant who wishes to be certified as an out-of-hospital emergency care provider based on examination must meet the requirements described below.

1. First Responder Certification: An applicant for initial certification as a first responder must:
 - a. Be at least 18 years of age;
 - b. Have a current Cardiopulmonary Resuscitation (CPR) certification from an organization that has been approved by the Board;
 - c. Have successfully completed, within the two years preceding the application, the first responder course, emergency medical technician course, emergency medical technician-intermediate course, or emergency medical technician-paramedic course as defined in 172 NAC 11-002; AND
 - d. Successfully pass the first responder certifying examination with a passing score of 70% or above; OR
 - e. Have a current first responder certificate from the National Registry of Emergency Medical Technicians (NREMT); AND
 - f. Submit to the Department:
 - (1) An application for a first responder certification. The application may be submitted on a form provided by the Department or on an alternate format which includes the following information:
 - (a) Name;
 - (b) Mailing address;
 - (c) Date of birth;
 - (d) Home and work telephone numbers (optional); and
 - (e) Social security number;
 - (f) If convicted of a felony or misdemeanor applicant must submit the following:
 - (i.) Official court records relating to the conviction and disposition; and
 - (ii.) Letter of explanation of conviction;
 - (g) List state, certificate number, date certificate issued, and expiration date of certificate for each state where you have been or are currently certified;
 - (h) If any disciplinary action was taken against applicant's certificate by another state applicant must submit a letter of explanation of the disciplinary action; and
 - (i) Attestation by the applicant:

- (i.) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (ii.) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - (j) Sign and date the following statement: I hereby certify that the preceding information is correct to the best of my knowledge and I further certify that I have attained the age of 18 years, am not addicted to narcotics or dangerous drugs, do not habitually and excessively use alcohol, narcotics, or dangerous drugs to a degree that my ability to provide emergency medical care is impaired, and I am of good moral character;
 - (2) Included with the application, the applicant must submit the following:
 - (a) Documentation of CPR certification;
 - (b) Documentation of completion of a first responder course within two years preceding the date that the application was received by the Department; AND
 - (c) Documentation of having passed the first responder certifying examination with a score of 70% or better; OR
 - (d) Documentation of a current first responder certificate from the NREMT.
 - g. The Department will act within 150 days after receipt of a completed application.
 - h. Administrative Penalty/Other Action: An individual who practices prior to issuance of a certificate, is subject to assessment of an administrative penalty pursuant to 172 NAC 11-011, or such other action as provided in the statutes and regulations governing the certificate.
2. Emergency Medical Technician Certification: An applicant for initial certification as an emergency medical technician must:
- a. Be at least 18 years of age;
 - b. Have a current CPR certification from an organization that has been approved by the Board;
 - c. Have successfully completed, within the two years preceding the application, the emergency medical technician course, emergency medical technician-intermediate course, pre-hospital emergency care course for nurses, first responder to emergency medical technician-bridge course or emergency medical technician-paramedic course as defined in 172 NAC 11-002; AND
 - d. Successfully pass the emergency medical technician certifying examination with a passing score of 70% or above; OR
 - e. Have a current emergency medical technician certificate from the NREMT; and
 - f. Submit to the Department:

- (1) An application for an emergency medical technician certification. The application may be submitted on a form provided by the Department or on an alternate format, which includes the following information:
 - (a) Name;
 - (b) Mailing address;
 - (c) Date of birth;
 - (d) Home and work telephone numbers (optional); and
 - (e) Social security number;
 - (f) If convicted of a felony or misdemeanor applicant must submit the following:
 - (i.) Official courts records relating to the conviction and disposition; and
 - (ii.) Letter of explanation of conviction;
 - (g) List state, certificate number, date certificate issued, and expiration date of certificate for each state where you have been or are currently certified;
 - (h) If any disciplinary action was taken against applicant's certificate by another state applicant must submit a letter of explanation of the disciplinary action; and
 - (i) Attestation by the applicant:
 - (i.) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (ii.) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - (j) Sign and date the following statement: I hereby certify that the preceding information is correct to the best of my knowledge and I further certify that I have attained the age of 18 years, am not addicted to narcotics or dangerous drugs, do not habitually and excessively use alcohol, narcotics, or dangerous drugs to a degree that my ability to provide emergency medical care is impaired, and I am of good moral character;
 - (2) Included with the application, the applicant must submit the following:
 - (a) Documentation of CPR certification;
 - (b) Documentation of completion of an emergency medical technician course within two years preceding the date that the application was received by the Department; AND
 - (c) Documentation of having passed the emergency medical technician certifying examination with a score of 70% or above; OR
 - (d) Documentation of a current emergency medical technician certificate from the NREMT.
- g. The Department will act within 150 days after receipt of a completed application.

- (5) Ventilatory Management: The candidate's ability to properly ventilate apneic adult and pediatric patients, including proper placement of the following:
 - (a) Endotracheal Tube: Candidate must earn at least 21 points out of a possible total of 27 points; and
 - (b) Dual Lumen Airway: Candidate must earn at least 15 points out of a possible total of 20 points.
 - (6) Random Basic Skills: Candidate will be required to pass one of the three random basic skills, as follows.
 - (a) Bleeding - Control/Shock Management: Candidate must earn at least 8 points out of a possible total of 10 points.
 - (b) Spinal Immobilization (Seated Patient): Candidate must earn at least 9 points out of a possible total of 12 points.
 - (c) Spinal Immobilization (Supine Patient): Candidate must earn at least 11 points out of a possible total of 14 points.
 - (7) Pediatric Skills: The candidate's ability to manage an airway and perform intraosseous infusion techniques in the pediatric will be verified in the following areas:
 - (a) Ventilatory Management: Candidate must earn at least 13 points out of a possible total of 17 points.
 - (b) Intraosseous Infusion: Candidate must earn at least 18 points out of a possible total of 23 points
 - (8) In addition to the minimum passing scores in any of the skills stations, candidates must not have any of the critical criteria items checked on the test sheets.
 - (9) EMT-intermediate candidates who have failed two or fewer practical skills are required to retest only those skills failed. Candidates who have failed three or more skills are required to retest the entire practical examination;
OR
- f. Have a current emergency medical technician-intermediate certificate from the NREMT; and
 - g. Submit to the Department:
 - (1) An application for an emergency medical technician-intermediate certification. The application may be submitted on a form provided by the Department or on an alternate format which includes the following information:

- (a) Name;
 - (b) Mailing address;
 - (c) Date of birth;
 - (d) Home and work telephone numbers (optional); and
 - (e) Social security number.
 - (f) If convicted of a felony or misdemeanor applicant must submit the following:
 - (i.) Official courts records relating to the conviction and disposition;and
 - (ii.) Letter of explanation of conviction;
 - (g) List state, certificate number, date certificate issued, and expiration date of certificate for each state where you have been or are currently certified;
 - (h) If any disciplinary action was taken against applicant's certificate by another state applicant must submit a letter of explanation of the disciplinary action; and
 - (i) Attestation by the applicant:
 - (i.) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (ii.) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - (j) Sign and date the following statement: I hereby certify that the preceding information is correct to the best of my knowledge and I further certify that I have attained the age of 18 years, am not addicted to narcotics or dangerous drugs, do not habitually and excessively use alcohol, narcotics, or dangerous drugs to a degree that my ability to provide emergency medical care is impaired, and I am of good moral character;
- (2) Included with the application, the applicant must submit the following:
- (a) Documentation of CPR certification;
 - (b) Documentation of completion of an emergency medical technician-intermediate course within two years preceding the date that the application was received by the Department; AND
 - (c) Documentation of having passed the emergency medical technician-intermediate certifying examination with a score of 70% or above;
OR
 - (d) Documentation of a current emergency medical technician-intermediate certificate from the NREMT.
- h. The Department will act within 150 days after receipt of a completed application.
- i. Administrative Penalty/Other Action: An individual who practices prior to Issuance of a certificate, is subject to assessment of an administrative penalty pursuant to 172 NAC 11-011, or such other action as provided in the statutes and regulations governing the certificate.

4. Emergency Medical Technician-Paramedic Certification: An applicant for initial certification as an emergency medical technician-paramedic must:
- a. Be at least 18 years of age;
 - b. Have a current CPR certification from an organization that has been approved by the Board;
 - c. Have successfully completed, within the two years preceding the application, the emergency medical technician-paramedic course as defined in 172 NAC 11-002;
 - d. Successfully pass a written emergency medical technician-paramedic certifying examination with a minimum passing score of 70% that is computed by subtracting one standard error of measurement (SEM) from the average minimum pass index (MPI) for the overall examination and for each of the six sub parts of the examination: Patient Assessment; Airway and Breathing, Circulation; Musculoskeletal, Behavioral, Neurological and Environmental; children and OB/GYN; and EMS Systems, Ethical, Legal, Communications, Documentation, Safety, Triage and Transportation Emergencies;
 - e. Successfully pass, within one year preceding the application, the practical emergency medical technician-paramedic certifying examination, which includes skill demonstration in Patient Assessment/Trauma, Ventilatory Management, Cardiac Management Skills, Intravenous Therapy and Medication Skills, Pediatric Skills, Oral Assessment, and Random Basic Skills. In addition to the minimum passing scores in any of the skills stations, candidates must not have any of the "critical criteria" items checked on the test sheets. Minimum passing scores and performance standards for each of the skills for the practical examination are as follows:
 - (1) Patient Assessment/Trauma: Candidate must earn at least 34 points out of a possible total of 43 points;
 - (2) Ventilatory Management: The candidate's ability to properly ventilate apneic adult and pediatric patients, including proper placement of the following:
 - (a) Endotracheal Tube: Candidate must earn at least 21 points out of a possible total of 27 points; and
 - (b) Dual Lumen Airway: Candidate must earn at least 15 points out of a possible total of 20 points.
 - (3) Cardiac Management Skills: The candidate's ability to manage cardiac arrests and interpret electrocardiograms will be verified in the following areas:
 - (a) Dynamic Cardiology: Candidate must earn at least 18 points out of a possible total of 24 points.
 - (b) Static Cardiology: Candidate must earn at least 9 points out of a possible total of 12 points.

- (4) Intravenous Therapy: Candidate evaluations will consist of two interrelated parts as follows:
 - (a) Intravenous Therapy: Candidate must earn at least 16 points out of a possible total of 21 points.
 - (b) Intravenous Bolus Medications: Candidate must earn at least 10 out of a possible total of 13 points.
 - (5) Random Basic Skills: Candidate will be required to pass 1 of the 3 random basic skills, as follows:
 - (a) Bleeding Control/Shock Management: Candidate must earn at least 8 points out of a possible total of 10 points.
 - (b) Spinal Immobilization (Seated Patient): Candidate must earn at least 9 points out of a possible total of 12 points.
 - (c) Spinal Immobilization (Supine Patient): candidate must earn at least 11 points out of a possible total of 14 points.
 - (6) Oral Assessment: Candidate must earn at least 9 points overall with at least 2 points in both patient assessment and patient management with no score of "0" in any category.
 - (7) Pediatric Skills: The candidate's ability to manage an airway and perform intraosseous infusion techniques in the pediatric will be verified in the following areas:
 - (a) Ventilatory Management: Candidate must earn at least 13 points out if a possible total of 17 points.
 - (b) Intraosseous Infusion: Candidate must earn at least 18 points out of a possible total of 23 points.
 - (8) EMT-paramedic candidates who have failed 5 or fewer practical skills stations are required to retest only those skills failed. Candidates who have failed 6 or more skills must retest the entire practical portion of the examination; OR
- f. Have a current emergency medical technician paramedic certificate from the NREMT; AND
 - g. Submit to the Department:
 - (1) An application for an emergency medical technician-paramedic certification. The application may be submitted on a form provided by the Department or on an alternate format that includes the following information:

- (a) Name;
 - (b) Mailing address;
 - (c) Date of birth;
 - (d) Home and work telephone numbers (optional); and
 - (e) Social security number.
 - (f) If convicted of a felony or misdemeanor applicant must submit the following:
 - (i.) Official courts records relating to the conviction and disposition; and
 - (ii.) Letter of explanation of conviction;
 - (g) List state, certificate number, date certificate issued, and expiration date of certificate for each state where you have been or are currently certified;
 - (h) If any disciplinary action was taken against applicant's certificate by another state applicant must submit a letter of explanation of the disciplinary action; and
 - (i) Attestation by the applicant:
 - (i.) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (ii) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - (j) Sign and date the following statement: I hereby certify that the preceding information is correct to the best of my knowledge and I further certify that I have attained the age of 18 years, am not addicted to narcotics or dangerous drugs, do not habitually and excessively use alcohol, narcotics, or dangerous drugs to a degree that my ability to provide emergency medical care is impaired, and I am of good moral character;
- (2) Included with the application, the applicant must submit the following:
- (a) Documentation of CPR certification;
 - (b) Documentation of completion of an emergency medical technician-paramedic course within two years preceding the date that the application was received by the Department; AND
 - (c) Documentation of having passed the emergency medical technician paramedic certifying examination with a score of 70% or above; OR
 - (d) Documentation of a current emergency medical technician-paramedic certificate from the NREMT.
- h. The Department will act within 150 days after receipt of a completed application.
- i. Administrative Penalty/Other Action: An individual who practices prior to Issuance of a certificate, is subject to assessment of an administrative penalty pursuant to 172 NAC 11-011, or such other action as provided in the statutes and regulations governing the certificate.

11-003.02 Certification Based on Certification/Licensure Issued in Another Jurisdiction: An applicant for an out-of-hospital emergency care provider certification based on certification/licensure in another jurisdiction must:

1. Be at least 18 years of age;
2. Be currently certified in another jurisdiction; AND
3. Provide documentation that his/her license/certification was based on standards that are substantially equivalent of those prevailing in this state; OR
4. Provide a copy of the applicant's current certificate from the NREMT.
5. Submit an application as outlined in 11-003.01, items (1) and (2).

11-003.03 Certifications That Will Become Null and Void: Effective March 9, 1999, the following certification levels will become null and void:

11-003.03A EMT-A/D, EMT-A/M, EMT-IV, and EMT-D: Individuals who had been certified at any one or more of these certification levels, prior to the effective date of these regulations, may continue to perform these skills with approval of their emergency medical service's physician medical director and by maintaining a current certificate as an emergency medical technician;

11-003.03B Field Supervisor. Individuals who had been certified as field supervisors, prior to March 9, 1999, may continue to perform as field supervisors with the approval of the medical director, as defined in 172 NAC 13-002.

11-004 RENEWAL REQUIREMENTS FOR OUT OF HOSPITAL EMERGENCY CARE PROVIDER CERTIFICATION: The procedures for renewing out-of-hospital emergency care provider certifications are as follows:

11-004.01 Expiration of Certification: All certifications issued by the Department under this Act and these regulations expire on December 31 of the third year after issuance.

11-004.02 Notice of Renewal of Certification By October 1 of each year: The Department will send a renewal notice, to the address of record, of those certificate holders whose certificates expire on December 31 of that year. The renewal notice contains the following:

1. Name;
2. Address;
3. Certification number;
4. Date of expiration; and
5. A request for disclosure of whether:
 - a. You are practicing as an EMT-Intermediate or EMT-Paramedic in a hospital or health clinic, and if so the name of the hospital(s) or health clinic(s); and
 - b. You have been convicted of a felony or misdemeanor since your last renewal and if so, the type and date of conviction, and if the applicant was convicted s/he must submit the following:

- (1) Official courts records relating to the conviction and disposition; and
- (2) Letter of explanation of conviction;

11-004.03 First Responder Certification Renewal: An individual holding a current certification as a first responder and requesting renewal must submit the completed renewal notice that the applicant has the following:

1. A current CPR certification from an organization that has been approved by the Board; AND
2. Attestation of completing 20 hours of continuing education with no more than six hours of distributive learning programs, obtained within the certification period, in the subject matter of the first responder course or requested waiver of continuing competency requirements. No more than four hours of CPR recertification hours may be used to meet the continuing education requirements; OR
3. Verification by a physician medical director or qualified physician surrogate that the applicant is qualified for renewal as defined in 172 NAC 12-003.04H item 9a; OR
4. A current first responder certificate from the NREMT; OR
5. Passed a written assessment examination.
 - a. Certificate holders may only take the written assessment examination once in order to utilize the examination for meeting the renewal requirements.
 - b. Certificate holders must achieve a minimum score of 70% on the written assessment examination.
 - c. Certificate holders that fail the assessment examination will be required to renew by one of the methods specified in 172 NAC 11-004.03 items 2 - 4.

11-004.04 Emergency Medical Technician Certification Renewal: An individual holding a current certification as an emergency medical technician and requesting renewal must submit the completed renewal notice that the applicant has the following:

1. A current CPR certification from an organization that has been approved by the Board; AND
2. Attestation of 30 hours of continuing education with no more than ten hours of distributive learning programs, within the certification period, in the subject matter of the emergency medical technician course or requested waiver of continuing competency requirements. No more than four hours of CPR recertification hours may be used to meet the continuing education requirement; OR
3. Verification from his/her basic life support services physician medical director or qualified physician surrogate that the applicant is qualified for renewal as defined in 172 NAC 12-003.04H item 9b; OR

4. A current emergency medical technician certificate from the NREMT; OR
5. Passed a written assessment examination.
 - a. Certificate holders may only take the written assessment examination one time in order to utilize the examination for meeting the renewal requirements.
 - b. Certificate holders must achieve a minimum score of 70% on the written assessment examination.
 - c. Certificate holders that fail the written assessment examination will be required to renew by one of the methods specified in 172 NAC 11-004.04 items 2, 3, or 4.

11-004.05 Emergency Medical Technician-Intermediate Certification Renewal: An individual holding a current certification as an emergency medical technician-intermediate and requesting renewal must submit the completed renewal notice that the applicant has the following:

1. A current CPR certification from an organization that has been approved by the Board; AND
2. Attestation of completing 45 hours of continuing education with no more than ten hours of distributive learning programs, obtained within the certification period, 30 hours in the subject matter of the emergency medical technician course and 15 hours in the subject matter of the emergency medical technician-intermediate course or requested waiver of continuing competency requirements. No more than four hours of CPR recertification hours may be used to meet the continuing education requirement; AND
3. Documentation from a physician or qualified physician surrogate of demonstrated proficiency in peripheral IV administration and endotracheal intubation in a clinical, out-of-hospital, or educational setting; OR
4. Verification from the applicants advanced life support service's physician medical director or qualified physician surrogate that the applicant is qualified for renewal as defined in 172 NAC 12-004.04G item 9a; OR
5. A current emergency medical technician-intermediate certificate from the NREMT; OR
6. Pass a written and practical skills assessment examination.
 - a. Certificate holders may only take the assessment written and practical examination one time in order to utilize the examination for meeting the renewal requirements.
 - b. Certificate holders must achieve a minimum score of 70% on the written examination.

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NEBRASKA HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE

172 NAC 11

- c. Practical skills and passing standards are identified in 172 NAC 11-003.01 item 3 e.
- d. Certificate holders that fail any part of the examination will be required to renew by one of the methods specified in 172 NAC 11-004.05 items 2 and 3, or 4, or 5.

11-004.06 Emergency Medical Technician-Paramedic Certification Renewal: An individual holding a current certification as an emergency medical technician-paramedic who wishes to renew his/her certificate must submit the completed renewal notice that the applicant has the following:

1. A current CPR certification from an organization that has been approved by the Board; AND
2. Attestation of completing 60 hours of continuing education with no more than ten hours of distributive learning programs, obtained within the certification period, of which 30 hours must be in the subject matter of the emergency medical technician Course and 30 hours must be in the subject matter of the emergency medical technician-paramedic course or requested waiver of continuing competency requirements. No more than four hours of CPR recertification hours may be used to meet the continuing education requirement; AND
3. Documentation by a physician or qualified physician surrogate of demonstrated proficiency in peripheral IV administration, drug administration, cardiac skills and endotracheal intubation in a clinical, out-of-hospital, or educational setting. OR
4. Verification by the applicants advanced emergency medical service's physician medical director or qualified physician surrogate that the applicant is qualified for renewal as defined in 172 NAC 12-004.04G item 9b; OR
5. A current emergency medical technician-paramedic certificate from the NREMT; OR
6. Passed a written and practical skills assessment examination.
 - a. Certificate holders may only take the examination one time in order to utilize the examination for meeting the renewal requirements.
 - b. Certificate holders must achieve a minimum score of 70% on the written examination.
 - c. Practical skills and passing standards must be those as identified in 172 NAC 11-003.01 item 4.e.
 - d. Certificate holders that fail any part of the examination will be required to renew by one of the methods specified in 172 NAC 11-004.06 items 2 and 3, or 4, or 5.

11-004.07 Out-of-Hospital Emergency Care Providers Who Do Not Meet Renewal Requirements

11-004.07A Emergency medical technician-paramedics who do not meet the renewal requirements as outlined in 172 NAC 11-004.06 for their level of certification may be certified as an emergency medical technician-intermediate if they meet the renewal criteria of 172 NAC 11-004.05, or they may be certified as an emergency medical technician if they meet the renewal requirements of NAC 11-004.04, or they may be certified as a first responder if they meet the renewal requirements of 172 NAC 11-004.03.

11-004.07B Emergency medical technician-intermediates who do not meet the renewal requirements as outlined in 172 NAC 11-004.05 for their level of certification may be certified as an emergency medical technician if they meet the renewal requirements of 172 NAC 11-004.04, or they may be certified as a first responder if they meet the renewal requirements of 172 NAC 11-004.03.

11-004.07C Emergency medical technicians who do not meet the renewal requirements as outlined in 172 NAC 11-004.04 for their level of certification may be certified as a first responder if they meet the renewal requirements of 172 NAC 11-004.03.

11-004.08 Out-of-Hospital Emergency Care Providers Who Want to Upgrade Their Certification to a Certification Level That They Previously Held Must:

1. Hold a current certification; and
2. Meet the requirements for recertification for the level of certification previously held as stated in 172 NAC 11-005.

11-004.09 Clinical Training and Skills Proficiency: Certified out-of-hospital emergency care providers, may, under direct supervision as determined by the physician medical director, perform skills as identified in 172 NAC 11-006, in a hospital for the purpose of maintaining skill proficiency. The skills performed must be specifically identified by the physician medical director and be commensurate with the individuals certification level.

11-004.10 Waiver of Continuing Competency Requirements: The Department, on the recommendation of the Board, may waive the continuing competency requirements, in part or in total, for any three-year licensing period when a certificate holder submits documentation that circumstances beyond his/her control prevented completion of the requirements.

11-004.10A The circumstances must include situations in which:

1. The certificate holder has served in the regular armed forces of the United States during part of the 36 months immediately preceding the certification renewal date;
or
2. The certificate holder has submitted proof that s/he was suffering from a serious or disabling illness or physical disability which prevented completion of the continuing competency requirements during the 36 months immediately preceding the certification renewal date.

11-004.10B Application for Waiver of Continuing Competency Requirements: Any certificate holder who seeks a waiver of continuing competency requirements, in part or in total, for any three-year licensing period must apply to the Department. The Department, on the recommendation of the Board, may waive continuing competency requirements in part or in total for any three-year period. The certificate holder must submit:

1. A complete application for waiver of continuing competency requirements on a form provided by the Department or on an alternate format which contains the following information:
 - a. Certificate holder's complete name;
 - b. Certificate holder's current address including street, P.O. Box, route, city, state, and zip code;
 - c. Certificate holder's profession;
 - d. Certificate number; and
 - e. Social Security Number.

Only applications which are complete will be considered, and the application must be received by the Department on or before December 31 of the year the certification is subject to renewal; and

2. Documentation of the circumstances beyond the certificate holder's control which prevented completion of continuing competency requirements pursuant to 172 NAC 11-004.10A includes the following:
 - a. If the certificate holder has served in the regular armed forces of the United States during part of the 36 months immediately preceding the certification renewal date, s/he must make an appropriate statement in the application and submit official documentation stating the dates of the service.
 - b. If the certificate holder suffered from a serious or disabling illness or physical disability which prevented completion of the continuing competency requirements during the 36 months immediately preceding the certification renewal date, s/he must make an appropriate statement in the application and submit a statement from a treating physician(s) stating that the certificate holder was injured or ill, the duration of the illness or injury and of the recovery period, and that the certificate holder was unable to obtain continuing competency requirements during that period.

11-004.10C The Department, on recommendation of the Board, may grant or deny, in part or in total, an application for waiver of continuing competency requirements, upon proof that circumstances beyond the applicant's control prevented completion of the requirements.

11-004.10C1 When the Department determines to deny an application for waiver of continuing competency requirements, it must send to the applicant by certified mail to the last name and address of record in the Department, a notice setting forth the reason for the denial determination

11-004.10C2 The applicant has 30 days from the date of receipt of the denial notice to make a written request to the Department for an appeal. The appeal must be conducted pursuant to The Administrative Procedure Act and 184 NAC 1 of the Rules of Practice and Procedure for the Department.

11-004.10C3 The Department will issue at the conclusion of the appeal under 184 NAC 1, a final order setting forth the results of the appeal.

11-004.10C4 When the Department determines to grant a waiver of continuing competency requirements, the applicant will be notified within 30 days of receipt of the application.

11-005 RECERTIFICATION OF EXPIRED OUT-OF-HOSPITAL EMERGENCY CARE PROVIDER CERTIFICATIONS: An individual, whose out-of-hospital emergency care provider certification has expired and who is seeking recertification must submit a completed application and documentation of the following:

1. Out-of-hospital emergency care providers whose certifications have expired for less than one year and the renewal criteria has been met. Applicants for recertification who can document that they had met the renewal requirements of 172 NAC 11-004.03 or 11-004.04 or 11-004.05 or 11-004.06 prior to the expiration of their certificate are eligible for recertification. The application may be submitted on a form provided by the Department or on an alternate format, which includes the following information:
 - a. Name;
 - b. Mailing address;
 - c. Date of birth;
 - d. Social security number;
 - e. Name and address of current ambulance service affiliation, if applicable; and
 - f. Documentation of the completion of renewal requirements as defined in 172 NAC 11-004.03, 11-004.04, 11-004.05, or 11-004.06.
 - g. If convicted of a felony or misdemeanor applicant must submit the following:
 - (1) Official courts records relating to the conviction and disposition; and
 - (2) Letter of explanation of conviction;
 - h. List state, certificate number, date certificate issued, and expiration date of certificate for each state where you have been or are currently certified;
 - i. If any disciplinary action was taken against applicant's certificate by another state applicant must submit a letter of explanation of the disciplinary action; and
 - j. Attestation by the applicant:
 - (1) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (2) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - k. Sign and date the following statement: I hereby certify that the preceding information is correct to the best of my knowledge and I further certify that I have attained the age of 18 years, am not addicted to narcotics or dangerous drugs, do not habitually and excessively use alcohol, narcotics, or dangerous

drugs to a degree that my ability to provide emergency medical care is impaired and I am of good moral character;

2. Applicants for recertification who have not met the renewal requirements as defined in 172 NAC 11-005 item 1. must meet the following requirements in order to be recertified:
 - a. First Responder Recertification: For individuals who wish to recertify and whose certification has expired the following must be submitted:
 - (1) A copy of the applicants current CPR certification from an organization that has been approved by the Board; AND
 - (2) A copy of the applicant's current NREMT first responder certificate; OR
 - (3) Documentation of successful completion of a first responder refresher course, as defined in 172 NAC 11-002 item 7, in the two years prior to application.
 - (4) Attestation by the applicant:
 - (a) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (b) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - b. Emergency Medical Technician Recertification: For individuals who wish to recertify and whose certification has expired the following must be submitted:
 - (1) A copy of the applicant's current CPR certification from an organization that has been approved by the Board; AND
 - (2) A copy of the applicants current NREMT emergency medical technician certificate; OR
 - (3) Documentation of successful completion of an emergency medical technician refresher course, as defined in 172 NAC 11-002 item 6, within two years prior to application.
 - (4) Attestation by the applicant:
 - (a) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (b) To the actual number of days practiced in Nebraska prior to the application for a certificate.
 - c. Emergency Medical Technician-Intermediate Recertification: For individuals whose certification has been expired for less than three years, the following must be submitted:
 - (1) Documentation that the individual has maintained certification as an emergency medical technician or has met the requirements for recertification as an emergency medical technician as defined in 172 NAC 11-005 item 2b (1) and (2) or (3); AND

- (2) Documentation that the individual has a current certificate as an emergency medical technician-intermediate from the NREMT; OR
- (3) Documentation of successful completion of an emergency medical technician-intermediate refresher course, as defined in 172 NAC 11-002 item 9, within two years prior to application.
- (4) Attestation by the applicant:
 - (a) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (b) To the actual number of days practiced in Nebraska prior to the application for a certificate.

If the individual's certification has expired for more than three years, the applicant must reapply in accordance with 172 NAC 11-003.01 item 3.

- d. Emergency Medical Technician-Paramedic Recertification: For individuals whose certification has been expired for less than three years, the following must be submitted:

- (1) Documentation that the individual has maintained certification as an emergency medical technician or has met the requirements for recertification as an emergency medical technician as defined in 172 NAC 11-005.02 item b (1), and (2); AND
- (2) Documentation that the individual has a current certificate as a paramedic from the NREMT; OR
- (3) Documentation of successful completion of a paramedic refresher course as defined in 172 NAC 11-002 item 10, within two years prior to application.
- (4) Attestation by the applicant:
 - (a) That s/he has not practiced in Nebraska prior to the application for a certificate; or
 - (b) To the actual number of days practiced in Nebraska prior to the application for a certificate.

If the individual's certification has expired for more than three years, the applicant must reapply in accordance with 172 NAC 11-003.01 item 4.

11-006 PRACTICES AND PROCEDURES FOR CERTIFIED OUT-OF-HOSPITAL EMERGENCY CARE PROVIDERS: The following practices and procedures for out-of-hospital emergency care providers have been taken from the United States Department of Transportation, National Highway Traffic Safety Administration EMS courses.

11-006.01 First Responder Practices and Procedure:

11-006.01A A certified first responder while functioning in response to a medical emergency:

1. Responds safely to the location as directed by the dispatcher;

2. Determines scene safety;
3. Determines the mechanism of illness or injury, the total number of patients, the condition of each patient, and communicates the information to the responding emergency medical service, dispatcher/communications center, or medical direction as appropriate;
4. Assesses patient constantly while awaiting additional EMS resources and administers care as indicated. The care may include:
 - a. Opening and maintaining patient airways;
 - b. Ventilating patient;
 - c. Performing cardiopulmonary resuscitation;
 - d. Controlling hemorrhaging;
 - e. Bandaging wounds;
 - f. Manually stabilizing painful, swollen and deformed extremities;
 - g. Assisting in childbirth;
 - h. Management of respiratory problems, altered mental status, and environmental emergencies;
 - i. Use of automatic/semi-automatic external defibrillators;
 - j. Manual stabilization of musculoskeletal injuries;
 - k. Implements shock management techniques; and
 - l. Assess and monitor vital signs.
5. Extracts patients from entrapment;
6. Assists other EMS providers in rendering emergency medical care;
7. Assists other EMS providers in extraction, lifting patients on to cots, and loading patients into the ambulances if requested;
8. Reports verbally or in writing, all observations and medical care provided to the patient(s) to the transporting emergency medical services; and
9. Must not transport a patient unless an emergency medical technician is also present and providing patient care in the ambulance.

11-006.01B A first responder, while functioning with a licensed emergency medical service, may perform all of the practices and procedures defined in 172 NAC 11-006.01A. In addition, with the approval of the Physician Medical Director and with the appropriate training may administer the following prescription medications and performs the following functions under written protocols:

1. Aspirin;
2. Epinephrine auto-injectors;
3. Supplemental oxygen using:
 - a. Non-rebreather mask; or
 - b. Nasal cannula.
4. Ventilate a patient using:
 - a. Bag Valve Mask; and
 - b. Flow Restricted Oxygen Powered Device; and

5. Use of:
 - a. Spinal immobilization devices; and
 - b. Extremity immobilization devices.

11-006.02 Emergency Medical Technician Practices and Procedures: An emergency medical technician, while functioning with a licensed emergency medical service:

1. Responds, in a safe manner, to calls for assistance and provides efficient and immediate care to patients;
2. Determines the nature and extent of illness or injury and establishes priority for required emergency care;
3. Renders medical care to patients. The care may include:
 - a. Perform a basic patient assessment including:
 - (1) Determine presence, absence and quality of
 - (a) Level of consciousness;
 - (b) The airway;
 - (c) Breathing;
 - (d) Breath Sounds; and
 - (e) Circulation including pulse oximetry.
 - (2) Evaluate perfusion by assessing the skin;
 - (3) Inspect and palpate for injuries;
 - (4) History of present illness or injury; and
 - (5) Basic past medical history.
 - b. Establish and maintain an airway including:
 - (1) Manually opening airway;
 - (2) Place oropharyngeal and nasopharyngeal airways; and
 - (3) Oropharyngeal suctioning
 - c. Ventilate patients using:
 - (1) Bag valve mask
 - (2) Flow restricted oxygen powered device
 - d. Treat cardiac arrest using:
 - (1) Cardiopulmonary resuscitation
 - (2) Automatic external defibrillators
 - (3) Semi-automatic defibrillators
 - e. Controlling hemorrhaging;

- f. Treatment of shock;
 - g. Bandaging of wounds;
 - h. Immobilization of painful, swollen, deformed extremities;
 - i. Assisting in childbirth, management of respiratory, cardiac, diabetic, allergic, behavioral, and environmental emergencies, and suspected poisonings; and
 - j. Transporting patients.
4. Additional care is provided based upon assessment of the patient and obtaining historical information. These interventions include:
- a. Assisting a patient, under the patient's direction with medications prescribed for that unique patient including:
 - (1) Sublingual nitroglycerin;
 - (2) Epinephrine auto-injectors; and
 - (3) Hand-held aerosol inhalers.
 - b. Administration of oral glucose; and
 - c. Administration of activated charcoal.
5. With approval of the emergency medical services physician medical director and appropriate training, the emergency medical technician may under written protocols:
- a. Cannulate peripheral veins;
 - b. Administer and monitor isotonic intravenous solutions;
 - c. Utilize advanced airway management devices;
 - d. Utilize Federal Drug Administration approved home glucose monitoring devices; and oximeters; and
 - e. Administer prescription medications, including
 - (1) Epinephrine auto-injectors;
 - (2) Supplemental oxygen using:
 - (a) Non-rebreather mask;
 - (b) Nasal cannula
 - (3) Aspirin; and
 - (4) Albuterol.

11-006.03 Emergency Medical Technician-Intermediate Practice and Procedures: An Emergency Medical Technician-Intermediate (EMT-I), while functioning with an advanced life support emergency medical service, may perform all of the practices and procedures defined in 172 NAC 11-006.02. In addition, with the approval of the service's physician medical director or as determined by the medical staff of the hospital or by the governing authority of the health clinic, the care may include the following as set forth in written protocols:

1. Establish and utilize advanced airway management devices including:

- a. Intubation;
 - b. Oropharyngeal and tracheal suctioning; and
 - c. Extubation
2. Perform advanced physical assessment including:
 - a. Percussion of the chest;
 - b. Auscultate breath sounds; and
 - c. Auscultate heart tones.
 3. Needle decompression;
 4. End tidal CO₂ and Pulse Oximetry monitoring; and
 5. Administration of supplemental oxygen by:
 - a. Nasal cannula;
 - b. Simple mask;
 - c. Partial rebreather mask;
 - d. Non-rebreather mask; and
 - e. Venturi mask.
 6. Ventilate a patient with devices including:
 - a. Bag valve mask;
 - b. Flow restricted oxygen powered device; and
 - c. Automatic transport ventilator.
 7. Place orogastric and nasogastric tubes;
 8. Cannulation of peripheral veins;
 9. Administer intravenous solutions;
 10. Intraosseous needle placement and infusion;
 11. Bolus intravenous, and intraosseous administration of approved medications;
 12. Intramuscular injections of approved medications;
 13. Subcutaneous injections of approved medications;
 14. Oral and sublingual medication administration of approved medications;
 15. Aerosolized medication administration of approved medications;
 16. Venipuncture to obtain blood sample;
 17. Administer by approved protocols these medications:
 - a. Adenosine;
 - b. Atropine;
 - c. Epinephrine;
 - d. Lidocaine 2%;
 - e. Nitroglycerin;
 - f. Morphine;
 - g. Naloxone;
 - h. Furosemide;
 - i. Diazepam;

- j. 50% Dextrose;
 - k. Albuterol;
 - l. Isoetharine;
 - m. Ipratropium;
 - n. Metaproterenol;
 - o. Terbutaline;
 - p. Methylprednisolone;
 - q. Dexamethasone;
 - r. Triamcinolone;
 - s. Acetylsalicylic acid;
 - t. Vasopressin;
 - u. Amiodarone;
 - v. Glucagon; and
 - w. Benadryl.
18. Electrocardiogram interpretation; and
19. Therapeutic electrical therapy:
- a. Defibrillation; and
 - b. Transcutaneous Pacing.
20. With the approval of the emergency medical service's physician medical director and the completion of a nationally recognized course in Advanced Cardiac Life Support (ACLS), the Emergency Medical Technician-Intermediate may:
- a. Perform synchronized cardioversion; and
 - b. Establish and maintain infusion of Lidocaine

11-006.04 Emergency Medical Technician-Paramedic Practices and Procedures: An Emergency Medical Technician-Paramedic (EMT-P), while functioning with an advanced life support emergency medical service, may perform all of the practices and procedures of 172 NAC 11-006.02. In addition, with the approval of the service's physician medical director or as determined by the medical staff of the hospital or by the governing authority of the health clinic, the care may include the following as set forth in written protocols.

1. Establish and maintain an airway including:
- a. Endotracheal intubation;
 - b. Rapid sequence intubation;
 - c. Emergency cricothyrotomy;
 - d. Non-visualized advanced airway devices;
 - e. Extubation; and
 - f. Oropharyngeal and tracheal suctioning
2. Perform a comprehensive physical exam including:
- a. Percussion of chest;

- b. Auscultate breath sounds;
 - c. Auscultate heart tones;
 - d. Auscultate bowel sounds;
 - e. Use of ophthalmoscope; and
 - f. Use of otoscope
3. Needle decompression;
4. End tidal CO₂ monitoring and Pulse Oximetry monitoring;
5. Administration of supplemental oxygen by:
 - a. Nasal cannula;
 - b. Simple mask;
 - c. Partial rebreather mask;
 - d. Non-rebreather mask; and
 - e. Venturi mask.
6. Ventilate or assist ventilation of a patient with devices including:
 - a. Bag-valve-mask;
 - b. Automatic transport ventilator;
 - c. Flow restricted oxygen powered device;
 - d. CPAP; and
 - e. BiPAP.
7. Place orogastric and nasogastric tubes;
8. Cannulation of peripheral veins and external jugular vein;
9. Administer intravenous solutions;
10. Intraosseous needle placement and infusion;
11. Venipuncture;
12. Electrocardiogram interpretation;
13. Therapeutic electrical therapy using:
 - a. Defibrillation;
 - b. Cardioversion; and
 - c. Transcutaneous Pacing.
14. Medication administration by injection, bolus, or infusion by:
 - a. Parenteral routes including:
 - (1) Intradermal;
 - (2) Subcutaneous;
 - (3) Intramuscular;
 - (4) Intravenous; and
 - (5) Intraosseous.
15. Medication administration absorbed through:

a. Percutaneous routes:

- (1) Sublingual, buccal;
- (2) Topical;
- (3) Eyes;
- (4) Ears;
- (5) Nose; and
- (6) Lungs.

b. Enteral routes:

- (1) Oral;
- (2) Gastric; and
- (3) Rectal.

16. Use of blood and blood products

11-006.05 An emergency medical technician-paramedic and an emergency medical technician-intermediate, while functioning as an employee or volunteer with a basic life support service, must perform only those practices and procedures as identified in 172 NAC 11-006.02.

11-006.06 An out-of-hospital emergency care provider, other than a first responder, may not assume the duties incident to the title or practice the skills of an out-of-hospital emergency care provider unless:

1. S/he is employed by or serving as a volunteer member of an emergency medical service licensed by the Department;
2. S/he may only practice the skills s/he is authorized to employ and which are covered by the certificate.

11-006.07 An emergency medical technician-intermediate or an emergency medical technician-paramedic may volunteer or be employed at a hospital or a health clinic to perform activities within his/her scope of practice within such hospital or health clinic under the supervision of a registered nurse, a physician assistant or a physician.

11-006.08 An out-of-hospital emergency care provider may perform any practice or procedure which they are authorized to perform with an emergency medical service other than the service with which they are affiliated when requested by the other service when the patient for whom they are to render services is in danger of loss of life.

11-007 GROUND ON WHICH THE DEPARTMENT MAY DENY, REFUSE RENEWAL OF, REFUSE RECERTIFICATION OF, OR DISCIPLINE A CERTIFICATE

11-007.01 The Department will deny an application for a certificate when the applicant fails to meet the requirements for certification as specified in 172 NAC 11-003.

11-007.02 The Department will refuse recertification of a certificate if the certificate holder fails to meet the requirements specified in 172 NAC 11-005.

11-007.03 The Department may deny, refuse renewal of, refuse recertification of, limit, suspend, or revoke certificates for any of the following grounds:

1. Fraud, forgery, or misrepresentation of material facts, in procuring or attempting to procure a certificate.
2. Grossly immoral or dishonorable conduct evidencing unfitness or lack of proficiency sufficient to meet the standards required for practice of the profession in this state.
3. Habitual intoxication or dependence or failure to comply with a treatment program or an aftercare program entered into under the Licensee Assistance Program established pursuant to Neb. Rev. Stat. § 71-172.01.
4. Conviction of a misdemeanor or felony under state law, federal law, or the law of another jurisdiction and which, if committed within this state, would have constituted a misdemeanor or felony under state law and which has a rational connection with the applicant's, or certificate holder's fitness or capacity to practice the profession.
5. Practice of the profession (a) fraudulently, (b) beyond its authorized scope, (c) with manifest incapacity, (d) with gross incompetence or gross negligence, or (e) in a pattern of negligent conduct. Pattern of negligent conduct means a continued course of negligent conduct in performing the duties of the profession.
6. Practice of the profession while the ability to practice is impaired by alcohol, controlled substances, narcotic drugs, physical disability, mental disability, or emotional disability.
7. Physical or mental incapacity to practice the profession as evidenced by a legal adjudication or a determination thereof by other lawful means.
8. Permitting, aiding, or abetting the practice of a profession or the performance of activities requiring a license or certificate by a person not licensed or certified to do so.
9. Having had his/her certificate denied, refused recertification, limited, suspended, or revoked or having had such certificate disciplined in any other manner pursuant to Neb. Rev. Stat. § 71-155 by another state or jurisdiction to practice as an out-of-hospital emergency medical care provider based upon acts by the applicant or certificate holder similar to acts described in 172 NAC 11-007. A certified copy of the record of denial, refusal of recertification, limitation, suspension, or revocation of a certificate or the taking of other disciplinary measures against it by another state or jurisdiction will be conclusive evidence.

10. Unprofessional conduct which terms include all acts specified in Neb. Rev. Stat. § 71-148 and such other acts which include but are not limited to:
- a. Competence: An out-of-hospital emergency medical care provider must not provide services for which s/he is not trained or authorized by the physician medical director. Unprofessional conduct while practicing as an out-of-hospital emergency medical care provider includes but is not limited to:
 - (1) Committing any act which endangers patient safety or welfare;
 - (2) Encouraging or promoting emergency medical care by untrained or unqualified persons;
 - (3) Failure or departure from the standards of acceptable and prevailing practice as an out-of-hospital emergency medical care provider;
 - (4) Failure to comply with emergency vehicle operating requirements pursuant to Neb. Rev. Stat. § 60-6,114; and
 - (5) Failure to comply with the physician medical directors directives.
 - b. Confidentiality: An out-of-hospital emergency medical care provider must hold in confidence information obtained from a patient, except in those unusual circumstances in which to do so would result in clear danger to the person or to others, or where otherwise required by law. Failure to do so constitutes unprofessional conduct.
 - c. Professional Relationships: An out-of-hospital emergency medical care provider must safeguard the welfare of patients and maintain appropriate professional relationships with patients. Commission of any of the following acts or behavior constitutes unprofessional conduct:
 - (1) Improper use of another person for one's own advantage;
 - (2) Failure to decline to carry out emergency medical care services that have been requested when the services are known to be contraindicated or unjustified;
 - (3) Failure to decline to carry out procedures that have been requested when the services are known to be outside of the out-of-hospital emergency medical care provider's scope of practice;
 - (4) Verbally or physically abusing patients;
 - (5) Falsification, unauthorized destruction, or failure to document patient care records;
 - (6) Attempting to provide diagnostic or treatment information to patient(s) that is beyond the out-of-hospital emergency medical care provider's level of training and expertise;
 - (7) Delegating to other personnel those patient related services when the clinical skills and expertise of an out-of-hospital emergency medical care provider is required; and
 - (8) Failure to follow the directives of the physician medical director.

- d. Sexual Harassment: An out-of-hospital emergency medical care provider must not under any circumstances engage in sexual harassment of patients or coworkers. Sexual harassment includes making unwelcome sexual advances, requesting sexual favors, and engaging in other verbal or physical conduct of a sexual nature as a condition of:
 - (1) The provision or denial of emergency medical care to a patient;
 - (2) The provision or denial of employment;
 - (3) The provision or denial of promotions to a co-worker;
 - (4) For the purpose or effect of creating an intimidating, hostile, or offensive environment for the patient or unreasonably interfering with a patient's ability to recover; or
 - (5) For the purpose or effect of creating an intimidating, hostile, or offensive working environment or unreasonably interfering with the co-worker's ability to perform his/her work.
 - e. Obtaining any fee for professional services by fraud, deceit, or misrepresentation.
 - f. Violating an assurance of compliance entered into under Neb. Rev. Stat. § 71-171.02.
 - g. Failure to follow policies or procedures implemented in the practice to safeguard patient care.
 - h. Failure to safeguard the patient's dignity and right to privacy.
 - i. Practicing as an out-of-hospital emergency medical care provider in this state without a current Nebraska certificate.
 - j. Providing services except otherwise provided by law while not a member of a service.
- 11. Distribution of intoxicating liquors, controlled substances or drugs for any other than lawful purposes.
 - 12. Willful or repeated violations of the Uniform Licensing Law or of these rules and regulations.
 - 13. Unlawful invasion of the field of practice of any profession mentioned in the Uniform Licensing Law which the certificate holder is not certified to practice.
 - 14. Practicing as an out-of-hospital emergency medical care provider while his/her certificate is suspended or in contravention of any limitation placed upon his/her certificate.
 - 15. Physical or mental illness or physical or mental deterioration or disability which would render the applicant or certificate holder unqualified to practice his/her profession or occupation.
 - 16. Refusal to submit to a physical or mental examination request by the Board, pursuant to Neb. Rev. Stat. §§ 71-161.12 to 71-161.16 to determine his/her qualifications to

practice or to continue in the practice of the profession or occupation for which application was made or for which s/he is certified.

17. Failure to file a report required by the Mandatory Reporting Law.

11-007.04 If the Department proposes to deny, refuse renewal of, refuse recertification of, limit, revoke, or suspend a certificate, the applicant or certificate holder must be given an opportunity for a hearing before the Department and must have the right to present evidence on his/her own behalf. Hearings before the Department must be conducted in accordance with the Administrative Procedure Act and 184 NAC 1, the Rules of Practice and Procedure for the Department.

11-007.05 Appeal Process: If the individual does not accept the Director's decision, s/he may appeal the decision to the District Court pursuant to Neb. Rev. Stat. §§ 84-901 to 84-920, Administrative Procedure Act.

11-008 RE-CREDENTIALING: This section applies to individuals previously issued a Nebraska credential who have lost the legal authority to practice in total or in part and who seek the authority to return to practice in Nebraska with a valid Nebraska credential.

11-008.01 Requirements to Reinstate a Credential Following Suspension, Limitation, or Revocation for Disciplinary Reasons: An applicant for reinstatement following suspension, limitation, or revocation for disciplinary reasons must meet the following requirements:

1. Petition the Board for reinstatement;
 - a. The petition for reinstatement must be accompanied by verified recommendations from at least two credentialed practitioners of the same profession as the petitioner each having personal knowledge of the activities the petitioner since the credential was suspended, limited, or revoked; and
 - b. Verified recommendations from at least two citizens each having personal knowledge of the activities of the petitioner since the credential was suspended limited, or revoked.
2. If the credential was revoked or suspended, attest:
 - a. That s/he has not practiced in Nebraska since s/he last held an active credential; or
 - b. To the actual number of days practiced if the petitioner has practiced in Nebraska since s/he last held an active credential.

11-008.02 Procedures for Reinstatement Following Suspension, Limitation, or Revocation for Disciplinary Reasons: An applicant for reinstatement following suspension, limitation, or revocation for disciplinary reasons must submit to the Board:

1. A petition for reinstatement:
 - a. Stating the reason the petitioner believes his/her credential should be reinstated;
 - b. Accompanied by verified recommendations from at least two credentialed

practitioners of the same profession as the petitioner each having personal knowledge of the activities of the petitioner since the credential was suspended limited, or revoked; and verified recommendations from at least two citizens each having personal knowledge of the activities of the petitioner since the credential was suspended, limited, or revoked.

- c. Containing the following information about the petitioner:
 - (1) Name;
 - (2) Address;
 - (3) Social Security Number; and
 - (4) If the petitioner holds a professional credential in another state, a list of the state(s) and type of credential;
 - (5) A statement describing all:
 - (a) Felony or misdemeanor convictions during the time period since the credential was suspended, limited, or revoked;
 - [1] If the petitioner has been convicted of a felony or misdemeanor, provide copies of:
 - [a] Official Court Record, which includes charges and disposition;
 - [b] Arrest records;
 - [c] A letter from the petitioner explaining the nature of the conviction;
 - [d] All addiction/mental health evaluations and proof of treatment, if the conviction involved a drug and/or alcohol related offense and if treatment was obtained and/or required; and
 - [e] A letter from the probation officer addressing probationary conditions and current status, if the petitioner is currently on probation.
 - (b) Revocations, suspensions, or other disciplinary actions against any professional credential held by the petitioner during the time period since the credential was suspended, limited, or revoked;
 - [1] If any disciplinary action was taken against the petitioner's credential by another state, submit an official copy of the disciplinary action, including charges and disposition; and
 - (c) Disciplinary charges pending against any professional credential held by the petitioner;
 - (6) Any continuing competency activities.
2. Attestation by the petitioner, if the credential was revoked or suspended:
 - a. That s/he has not practiced in Nebraska since s/he last held an active credential; or
 - b. To the actual number of days practiced if the petitioner has practiced in Nebraska since s/he last held an active credential.
 - (1) If a petitioner has practiced after his/her credential was revoked the Department may assess an Administrative Penalty pursuant to 172 NAC 11-011 in which case a separate notice and opportunity for hearing will be sent to the petitioner.

- (2) If a petitioner has practiced after his/her credential was revoked, or has committed any other violation of the statutes and regulations governing the credential, other action may be taken pursuant to 172 NAC 11-008.02G.

11-008.02A The Board will make a recommendation to the Director regarding reinstatement following disciplinary action. In determining whether reinstatement should be recommended, the Board may:

1. Request the Department investigate all activities of the petitioner since the disciplinary action was taken against him/her, including activities prohibited by Neb. Rev. Stat. §§71-147 and 71-148.
2. Require the petitioner to submit to a complete diagnostic examination by one or more physicians appointed by the Board, the petitioner being free also to consult a physician or physicians of his/her own choice for a complete diagnostic examination and make available a report or reports thereof to the Board;
3. Require the petitioner to pass a written, oral, or practical examination or any combination of such examinations; or
4. Require the petitioner to complete additional education.

11-008.02B The petition to recommend reinstatement will be considered at the next meeting of the Board that is held, but not earlier than 30 days after the petition is filed.

11-008.02C Any petition to recommend reinstatement of a credential will be conclusively acted upon by the Board within 180 days after the filing of a properly prepared petition and the necessary accompanying documents with the Board.

11-008.02D If the Board recommends reinstatement of the credential, no public hearing need be held on the petition.

11-008.02E Prior to any recommendation by the Board against reinstatement of the credential, an opportunity for a formal public hearing on the petition must be granted by the Board, if formally requested by the petitioner.

11-008.02E1 The petitioner's request for a formal hearing must be submitted within 30 days of the Board's notification of an opportunity for a formal public hearing.

11-008.02E2 If the petitioner had a hearing or an opportunity for a hearing on a prior petition to recommend reinstatement filed pursuant to Neb. Rev. Stat. § 71-161.04 within a period of two years immediately preceding the filing of the current petition, the Board may grant or deny, without a hearing, the current

petition to recommend reinstatement filed pursuant to Neb. Rev. Stat. § 71-161.04.

11-008.02F If the petitioner formally requests a formal public hearing or if the Board otherwise holds such a hearing, the petitioner will be given at least 30 days prior notice by sending to the petitioner a copy of the notice of hearing by certified or registered mail

at his/her last known residence or business post office address as shown by the files or records of the Department or as otherwise known. Notice may be given to the petitioner by personal service. The hearing will be conducted pursuant to 172 NAC 1.

11-008.02G The Board reviews the petition to recommend reinstatement, any examination or investigatory information and the record of hearing, if one was held. The Board will submit its recommendation to the Director within 180 days of receipt of the petition to recommend reinstatement.

11-008.02G1 If the Board recommends reinstatement of the credential:

1. The Board will send its recommendation to the petitioner by certified mail along with notification that the petitioner must file an application for reinstatement with the Director.
2. The petitioner must submit, to the Department, an application for reinstatement by the Director within 30 days of receipt of the Board's recommendation.
 - a. The application must include:
 - (1) Name of the petitioner; and
 - (2) Signed statement that the petitioner requests the Director to issue the credential in pursuant to the Board's recommendation for reinstatement.
3. Upon receipt of the application for reinstatement from the petitioner, the Department will submit the following to the Director:
 - a. The application;
 - b. The written recommendation of the Board, including any finding of fact or order of the Board;
 - c. The petition submitted to the Board;
 - d. The record of hearing, if any; and
 - e. Any pleadings, motions, requests, preliminary or intermediate rulings and orders, and similar correspondence to or from the Board and the petitioner.
4. The Director will issue a decision regarding reinstatement within 150 days of receipt of the petitioner's application for reinstatement. The Director's decision will be based upon a review of the record of the proceedings before the Board. The Director will not hold a second hearing. The Director may affirm, reverse or modify the Board's

recommendation. A decision by the Director to reverse or modify the Board's recommendation will be based on finding that the Board's recommendation is: in excess of statutory authority, made upon unlawful procedure, unsupported by competent, material, and substantial evidence in view of the entire record, or arbitrary or capricious.

- a. When the Director affirms, modifies or reverses the Board's recommendation for reinstatement, the Director will enter an Order setting forth the decision regarding reinstatement of the petitioner's credential. The order will be sent by certified mail to the petitioner;
- b. If the petitioner does not accept the Director's decision, s/he may appeal such decision to the District Court of Lancaster County pursuant to Neb. Rev. Stat. §§ 84-901 to 84-920.

11-008.02G2 If the Board recommends reinstatement of the credential with terms, conditions, or restrictions:

1. The Board will send its recommendation to the petitioner by certified mail along with notification that the petitioner must file an application for reinstatement with the Director.
2. The petitioner must submit, to the Department, an application for reinstatement by the Director within 30 days of receipt of the Board's recommendation.
 - a. The application must include:
 - (1) Name of the petitioner; and
 - (2) Signed statement that the petitioner requests the Director to issue the credential pursuant to the Board's recommendation for reinstatement.
3. Upon receipt of the application for reinstatement from the petitioner, the Department will submit the following to the Director:
 - a. The application;
 - b. The written recommendation of the Board, including any finding of fact or order of the Board;
 - c. The petition submitted to the Board;
 - d. The record of hearing, if any; and
 - e. Any pleadings, motions, requests, preliminary or intermediate rulings and orders, and similar correspondence to or from the Board and the petitioner.
4. The Director will issue a decision regarding reinstatement within 150 days of receipt of the petitioner's application for reinstatement. The Director's

decision will be based upon a review of the record of the proceedings before the Board. The Director will not hold a second hearing. The Director may affirm, reverse or modify the Board's recommendation. A decision by the Director to reverse or modify the Board's recommendation will be based on finding that the Board's recommendation is: in excess of statutory authority, made upon unlawful procedure, unsupported by competent, material, and substantial evidence in view of the entire record, or arbitrary or capricious.

- a. When the Director affirms, modifies or reverses the Board's recommendation for reinstatement, the Director will enter an Order setting forth the decision regarding reinstatement of the petitioner's credential. The order will be sent by certified mail to the petitioner;
- b. If the petitioner does not accept the Director's decision, s/he may appeal such decision to the District Court of Lancaster County pursuant to Neb. Rev. Stat. §§ 84-901 to 84-920.

11-009 EXAMINATION ELIGIBILITY AND PROCEDURES

11-009.01 First Responder: A first responder certifying examination consists of a written examination and a practical examination. Individuals requesting to take a first responder certifying examination must:

1. Successfully complete, within two years prior to requesting to take the certifying examination, a first responder course from an emergency medical services training agency.
2. Schedule the examination through an emergency medical services training agency.

11-009.02 Emergency Medical Technician: An emergency medical technician certifying examination consists of a written examination and a practical examination. Individuals requesting to take an emergency medical technician certifying examination must:

1. Successfully complete, within two years prior to requesting to take the certifying written examination, an emergency medical technician course from an emergency medical services training agency.
2. Successfully complete, within one year prior to requesting to take the certifying written examination, a certifying emergency medical technician practical examination.
3. Schedule the examination through an emergency medical services training agency.

11-009.03 Emergency Medical Technician-Intermediate: An emergency medical technician certifying examination consists of a written examination and a practical examination.

Individuals requesting to take an emergency medical technician-intermediate certifying examination must:

1. Be currently certified as an emergency medical technician; OR
2. Have a current certification from the National Registry of Emergency Medical Technicians; AND
3. Successfully complete, within two years prior to requesting to take the certifying written examination, an emergency medical technician-intermediate course from an emergency services training agency; OR
4. Provide verification from an emergency medical services training agency's physician medical director, that the individual has completed Division 1 and 2 of the emergency medical technician-paramedic course.
5. Successfully complete, within one year of requesting to take the written certifying examination, the emergency medical technician-intermediate practical examination.
6. Applicants requesting to take the emergency medical technician-intermediate examination must apply to the Department. The Department will maintain a schedule of the dates and locations of certifying examinations in the state.

11-009.04 Emergency Medical Technician-Paramedic: An emergency medical technician-paramedic examination consists of a written examination and a practical examination. Individuals requesting to take the emergency medical technician-paramedic certifying examination must:

1. Be currently certified as an emergency medical technician; OR
2. Have a current certification from the National Registry of Emergency Medical Technicians; AND
3. Successfully complete, within two years prior to requesting to take the certifying written examination, an emergency medical technician-paramedic course from an emergency services training agency;
4. Successfully complete, within one year of requesting to take the written certifying examination, the emergency medical technician-paramedic practical examination.
5. Applicants requesting to take the emergency medical technician-paramedic examination must apply to the Department. The Department will maintain a schedule of the dates and locations of certifying examinations in the state.

11-010 SCHEDULE OF FEES: The following fees have been set by the Department:

1. Certification of Credential Fee: For issuance of a certification of a credential the fee of

\$25. The certification includes information regarding:

- a. The basis on which a certificate was issued;
 - b. The date of issuance;
 - c. Whether disciplinary action has been taken against the certificate; and
 - d. The current status of the certificate.
2. Verification Credential Fee: For issuance of a verification of a certificate the fee of \$5. The verification includes written confirmation as to whether a certificate was valid at the time the request was made.
3. Duplicate Credential Fee: By an applicant for a duplicate original certificate or a reissued certificate, the fee of \$10;

11-011 ADMINISTRATIVE PENALTY: The Department may assess an administrative penalty when evidence exists that a person or entity practices without a certificate. Practice without a certificate for the purpose of this regulation means practice:

1. Prior to the issuance of a certificate;
2. Following the expiration of a certificate; or
3. Prior to the reinstatement of a certificate.

11-011.01 Evidence of Practice: The Department will consider any of the following conditions as prima facie evidence of practice without a certificate:

1. The person admits to engaging in practice;
2. Staffing records or other reports from the licensed emergency medical service of the person indicate that the person was engaged in practice;
3. Billing or payment records document the provision of service, care, or treatment by the person;
4. Service, care, or treatment records document the provision of service, care, or treatment by the person;
5. Appointment records indicate that the person was engaged in practice;
6. The person or entity opens a business or practice site and announces or advertises that the business or site is open to provide service, care, or treatment.

For purposes of this regulation prima facie evidence means a fact presumed to be true unless disproved by some evidence to the contrary.

11-011.02 Penalty: The Department may assess an administrative penalty in the amount of \$10 per day, not to exceed a total of \$1,000 for practice without a certificate. To assess such penalty, the Department will:

1. Provide written notice of the assessment to the person. The notice will specify:

Effective Date
December 27, 2005

NEBRASKA HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE

172 NAC 11

- a. The total amount of the administrative penalty;
 - b. The evidence on which the administrative penalty is based;
 - c. That the person may request, in writing, a hearing to contest the assessment of an administrative penalty;
 - d. That the Department will within 30 days following receipt of payment of the administrative penalty, transmit the penalty to the State Treasurer for credit to the Permanent School Fund; and
 - e. That an unpaid administrative penalty constitutes a debt to the State of Nebraska which may be collected in the manner of a lien, foreclosure, or sued for and recovered in a proper form of action in the name of the state in the District Court of the county in which the violator resides or owns property.
2. Send by certified mail, a written notice of the administrative penalty to the last the last known address of the person to whom the penalty is assessed.

11-011.03 Administrative Hearing: When a person contests the administrative penalty and requests a hearing, the Department will hold a hearing pursuant to Neb. Rev. Stat. §§ 84-901 to 84-920 and the Department's rules and regulations adopted pursuant to these statutes.

Effective Date
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NEBRASKA HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE

172 NAC 11

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Forms may be obtained by contacting the Credentialing Division.
Nebraska Department of Health and Human Services
Regulation and Licensure
Credentialing Division
PO Box 94986
Lincoln NE 68509-4986

Advanced Certification: (402)471-2159 or 800/422-3460 Press 1 then 2
Basic Certification: (402)471-0153 or 800/422-3460 Press 1 then 1

<http://www.hhs.state.ne.us/crl/profindex1.htm>