

Notice of Proposed Rule

DEPARTMENT OF HEALTH Division of Emergency Medical Operations

RULE NO: RULE TITLE

[64J-1.002](#): Basic Life Support Service License - Ground

[64J-1.003](#): Advanced Life Support Service License - Ground

[64J-1.005](#): Air Ambulances

[64J-1.007](#): Vehicle Permits

PURPOSE AND EFFECT: The purpose is to update DH Forms 631, Ground Ambulance Service Provider License Application, 1575, Air Ambulance Service License Application, and 1576, Application for Air Ambulance Permit to require the provider's identification number and air worthiness certificate of each air transport vehicle to be licensed. The amendments to the rules are to reflect the new effective dates in the form titles. The effect will be ensuring air transport vehicles are air worthy and to help aid in the efficiency of administration of applications.

SUMMARY: The purpose of the rule amendments is to update the forms to require an air worthiness certificate for each air transport vehicle the emergency medical services provider wants to license and to ask for the provider's identification number. Rule numbers 64J-1.002, 64J-1.003, 64J-1.005 and 64J-1.007 are being amended to reflect the new effective dates within the DH Form titles. The changes to the forms will help increase the quality of care by further ensuring the air transport vehicles are certified as air worthy and help the efficiency of the administration process by requiring the provider's identification number on the application.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

SPECIFIC AUTHORITY: [401.251](#), [401.26](#), [401.35](#), F.S.

LAW IMPLEMENTED: [401.251](#), F.S.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: July 7, 2009, 2:00 p.m. -3:00 p.m. Eastern Standard Time

PLACE: Florida Department of Health
4025 Esplanade Way, 3rd Floor, Room 301
Tallahassee, FL 32311

A copy of the forms with the noted changes can be found on the Bureau of EMS website, Legislation and Rules page at: <http://www.fl-ems.com>

A conference line will be available for those unable to attend in person. We request that parties from the same agency utilize one line if possible to allow other participants to dial in.

Toll free conference number: 1-(888)-808-6959

Conference code: 1454440

REQUEST FOR HEARING MUST BE RECEIVED IN WRITING TO: Lisa Walker, Government Analyst II at the address below.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special

accommodations to participate in this workshop/meeting is asked to advise the agency at least 24 hours before the workshop/meeting by contacting: Alexander Macy, Administrative Assistant I, Bureau of EMS, (850) 245-4440, extension *2735, or by email at Alexander_Macy@doh.state.fl.us If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Lisa Walker, Government Analyst II, Bureau of EMS, 4052 Bald Cypress Way, Bin C-18, Tallahassee, FL 32399 Phone: (850) 245-4440 ext. 2733; or email Lisa_Walker2@doh.state.fl.us. NOTE: If you have written comments that you wish to be added to the record please send them to Lisa Walker before the hearing so your comments may be read into the record.

THE FULL TEXT OF THE PROPOSED RULE IS:

64J-1.002 Basic Life Support Service License - Ground.

(1) To obtain a license or renewal each applicant shall submit an application to the department on DH Form 631, ~~04/09 December 2008~~, Ground Ambulance Service Provider License Application. This form is incorporated by reference and is available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at <http://www.fl-ems.com>.

(2) The department shall issue a license to any applicant who:

(a) Furnished evidence of insurance coverage for claims arising out of injury or death of persons and damage to the property of others resulting from any cause for which the owner of said business or service would be liable. Each motor vehicle shall be insured for the sum of at least \$100,000 for injuries to or death of any one person arising out of any one accident; the sum of at least \$300,000 for injuries to or death of more than one person in any one accident; and, for the sum of at least \$50,000 for damage to property arising from any one accident. Government operated service vehicles shall be insured for the sum of at least \$100,000 for any claim or judgment and the sum of \$200,000 total for all claims or judgments arising out of the same occurrence. Every insurance policy or contract for such insurance shall provide for the payment and satisfaction of any financial judgment entered against the operator and present insured, or any person driving the insured vehicle. All such insurance policies shall provide for 30-day cancellation notice to the department.

(b) Obtained a Certificate of Public Convenience and Necessity (COPCN).

(3) Each BLS provider shall ensure and document in its employee records that each of its EMTs and paramedics hold a current certification from the department.

(4) Every provider, except those exempted in paragraph 64J-1.006(1)(a), F.A.C., shall ensure that each EMS vehicle permitted by the department, when available for call, shall be equipped and maintained as approved by the medical director of the service in the vehicle minimum equipment list. The vehicle minimum equipment list shall include, at a minimum, one each of the items listed in Table I and shall be provided to the department upon request.

**TABLE I
GROUND VEHICLE
BLS MEDICAL EQUIPMENT AND SUPPLIES**

ITEM	QTY.
1. Bandaging, dressing, and taping supplies:	
a. Adhesive, silk, or plastic tape – assorted sizes.	
b. Sterile 4 × 4 inch gauze pads.	
c. Triangular bandages.	
d. Roller gauze.	
e. ABD (minimum 5 × 9 inch) pads.	

2. Bandage shears.
3. Patient restraints, wrist and ankle.
4. Blood pressure cuffs: infant, pediatric, and adult.
5. Stethoscopes: pediatric and adult.
6. Blankets.
7. Sheets (not required for non-transport vehicle.)
8. Pillows with waterproof covers and pillow cases or disposable single use pillows (not required for non-transport vehicle).
9. Disposable blanket or patient rain cover.
10. Long spine board and three straps or equivalent.
11. Short spine board and two straps or equivalent.
12. Adult and Pediatric cervical immobilization devices (CID), approved by the medical director of the service.
13. Padding for lateral lower spine immobilization of pediatric patients or equivalent.
14. Portable oxygen tanks, "D" or "E" cylinders, with one regulator and gauge. Each tank must have a minimum pressure of 1000 psi, and liter flow at 15 liters per minute.
15. Transparent oxygen masks; adult, child and infant sizes, with tubing.
16. Sets of pediatric and adult nasal cannulae with tubing.
17. Hand operated bag-valve mask resuscitators, adult and pediatric accumulator, including adult, child and infant transparent masks capable of use with supplemental oxygen.
18. Portable suction, electric or gas powered, with wide bore tubing and tips which meet the minimum standards as published by the GSA in KKK-A 1822E specifications.
19. Extremity immobilization devices. Pediatric and Adult.
20. Lower extremity traction splint. Pediatric and Adult.
21. Sterile obstetrical kit to include, at minimum, bulb syringe, sterile scissors or scalpel, and cord clamps or cord-ties.
22. Burn sheets.

23. Flashlight with batteries.
24. Occlusive dressings.
25. Oropharyngeal airways. Pediatric and Adult.
26. Installed oxygen with regulator gauge and wrench, minimum “M” size cylinder (minimum 500 PSI) with oxygen flowmeter to include a 15lpm setting, (not required for non-transport vehicles.) (Other installed oxygen delivery systems, such as liquid oxygen, as allowed by medical director.)
27. Gloves – suitable to provide barrier protection for biohazards.
28. Face Masks – both surgical and respiratory protective.
29. Rigid cervical collars as approved in writing by the medical director and available for review by the department.
30. Nasopharyngeal airways, pediatric and adult.
31. Approved biohazardous waste plastic bag or impervious container per Chapter 64E-16, F.A.C.
32. Safety goggles or equivalent meeting A.N.S.I. Z87.1 standard.
33. Bulb syringe separate from obstetrical kit.
34. Thermal absorbent reflective blanket.
35. Multitrauma dressings.
36. Pediatric length based measurement device for equipment selection and drug dosage.

Sufficient quantity, sizes, and material for all crew members.

Sufficient quantity, sizes and material for all crew members.

One per crew member.

Rulemaking Authority 381.0011, 395.405, 401.121, 401.25, 401.35 FS. Law Implemented 381.0011, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 401.23, 401.24, 401.25, 401.252, 401.26, 401.27, 401.281, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History—New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.49, Amended 4-12-88, 8-3-88, 12-10-92, 10-2-94, 1-26-97, Formerly 10D-66.049, Amended 8-4-98, 1-3-99, 11-19-01, 12-18-06, Formerly 64E-2.002.

64J-1.003 Advanced Life Support Service License – Ground.

(1) To obtain a license or renewal each applicant for an ALS license shall submit to the department DH Form 631, ~~04/09 December 2008~~, Ground Ambulance Service Provider License Application, which is incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at <http://www.fl-ems.com>.

(2) Each ALS provider shall ensure and document in its employee records that each of its EMTs or paramedics hold a current certification from the department.

(3) Each ALS provider shall ensure that a current copy of all standing orders authorized by the medical director shall be available in each of the provider's vehicles; for review by the department; to each of the provider's paramedics; and supplied to each physician designated by the medical director to receive a copy.

(4) Each ALS permitted vehicle when available for call, shall be equipped and maintained as approved by the medical director of the service in the vehicle minimum equipment list. The vehicle minimum equipment list shall include, at a minimum, one each of the items listed in Tables I and II, and shall be provided to the department upon request, except those exempted in paragraph 64J-1.006(1)(a), F.A.C. Substitutions are allowed with signed approval from the medical director and written notification to the department.

(5) The medical director may authorize an EMT instead of the paramedic or licensed physician to attend a BLS patient on an ALS permitted ambulance under the following conditions:

(a) The medical director determines what type of BLS patient may be attended by an EMT and develops standing orders for use by the EMT when attending the type of BLS patients identified. The onscene paramedic shall conduct the primary patient assessment to determine if the patient's condition meets the criteria in the standing orders for BLS care. This survey shall be documented on the patient care record and shall identify the paramedic who conducted the survey.

(b) The patient care record for any patient care or transport shall clearly state whenever an EMT attends the patient.

(c) The provider shall maintain and have accessible for review by the department documentation of compliance with the above requirements.

(6) ALS Nontransport:

(a) Unless otherwise specifically exempted, each advanced life support nontransport vehicle, when personnel are providing advanced life support treatment or care, must be staffed with a certified paramedic or licensed physician.

(b) A permitted advanced life support nontransport vehicle may operate as a basic life support emergency vehicle when the vehicle is not staffed by a certified paramedic or licensed physician and only in lieu of placing the unit completely out of service. When such advanced life support nontransport vehicle is operating under this section, the vehicle must be staffed with at least one person who must be an emergency medical technician, and shall carry portable oxygen, airway adjuncts, supplies and equipment as determined by the medical director of the licensed service.

1. Each service provider having permitted vehicles operating pursuant to this section shall log changes in vehicle status.

2. Vehicles operating pursuant to this section shall not display markings indicating advanced life support (other than permit sticker) when responding as basic life support emergency vehicle.

(c) Unless otherwise specifically exempted, the following advanced life support non-transport vehicles when personnel are providing emergency treatment or care, must be staffed, at a minimum, with a certified paramedic or licensed physician:

1. Advanced life support vehicles that respond to requests to provide emergency treatment or care during special events or activities or in locations where access by permitted transport vehicles is restricted or limited.

2. Advanced life support vehicles that respond to requests to provide emergency treatment or care in vehicles that cannot accommodate two persons, due to design and construction of the vehicle.

3. Advanced life support vehicles under 13,000 pounds gross vehicle weight that respond to requests to provide emergency treatment or care and are met at the scene by other concurrently responding permitted vehicles. Examples include vehicles that respond to requests to provide emergency treatment or care within a gated or restricted community that is established pursuant to Chapter 190, F.S.; vehicles that respond to requests to provide emergency treatment or care which are owned or operated by counties or municipalities established pursuant to Chapter 125 or 166, F.S.; or vehicles that respond to requests to provide emergency treatment and care which are owned or operated by advanced life support services licensees. Vehicles staffed pursuant to this section shall operate in accordance with a certificate of public convenience and necessity.

4. Advanced life support non-transport vehicle over 13,000 pounds gross vehicle weight that respond to requests to provide emergency treatment or care. Vehicles staffed pursuant to this section shall operate in accordance with a certificate of public convenience and necessity.

(d) Vehicles staffed pursuant to paragraph 64J-1.003(6)(c), F.A.C., may respond to requests for medical assistance in accordance with Section 252.40, F.S.

(e) Nothing herein shall prohibit an on duty certified EMT or paramedic who arrives on scene from initiating emergency care and treatment at the level of their certification prior to the arrival of other responding vehicles.

(7) Advanced life support non-transport vehicles, staffed pursuant to paragraph 64J-1.003(6)(c), F.A.C., are not required to carry the equipment and supplies identified in Table I or II. Such vehicles when personnel are providing advanced life support treatment or care, or when responding to calls in an ALS capacity shall at a minimum carry portable oxygen, defibrillation equipment, airway management supplies and equipment, and medications and fluids authorized by the medical director of the licensed service.

TABLE II
GROUND VEHICLE
ALS EQUIPMENT AND MEDICATIONS

MEDICATION	WT/VOL
1. Atropine Sulfate.	
2. Dextrose, 50 percent.	
3. Epinephrine HCL.	1:1,000
4. Epinephrine HCL.	1:10,000
5. Ventricular dysrhythmic.	
6. Benzodiazepine sedative/anticonvulsant.	
7. Naloxone (Narcan).	
8. Nitroglycerin.	0.4 mg.
9. Inhalant beta adrenergic agent with nebulizer apparatus, as approved by the medical director.	
I.V. SOLUTIONS	
1. Lactated Ringers or Normal Saline.	
EQUIPMENT	
(a) Laryngoscope handle with batteries.	
(b) Laryngoscope blades; adult, child and infant sizes.	
(c) Pediatric I.V. arm board or splint appropriate for I.V. stabilization.	
(d) Disposable endotracheal tubes; adult, child and infant sizes. Those below 5.5 shall be uncuffed. 2.5 mm - 5.0 mm uncuffed; 5.5 mm - 7.0	

mm; 7.5 mm - 9.0 mm).

(e) Endotracheal tube stylets pediatric and adult.

(f) Magill forceps, pediatric and adult sizes.

(g) Device for intratracheal meconium suctioning in newborns.

(h) Tourniquets.

(i) I.V. cannulae 14 thru 24 gauge.

(j) Micro drip sets.

(k) Macro drip sets.

(l) I.V. pressure infuser.

(m) Needles 18 thru 25 gauge.

(n) Intraosseous needles and three way stop cocks.

(o) Syringes, from 1 ml. to 20 ml.

(p) D.C. battery powered portable monitor with defibrillation and pacing capabilities, ECG printout and spare battery.

The unit shall be capable of delivering pediatric defibrillation

(energy below 25 watts/sec and appropriate equipment).

(q) Monitoring electrodes for adults and pediatrics.

(r) Pacing electrodes. Pediatric and Adult.

(s) Glucometer.

(t) Approved sharps container per Chapter 64E-16, F.A.C.

(u) Flexible suction catheters.

(v) Electronic waveform capnography capable of real-time monitoring and printing record of the intubated patient (effective 01/01/2008).

Rulemaking Authority 381.0011, 395.405, 401.121, 401.265, 401.35 FS. Law Implemented 381.0011, 381.025, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 395.405, 401.23, 401.24, 401.25, 401.26, 401.265, 401.27, 401.281, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History—New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.50, Amended 4-12-88, 8-3-88, 8-7-89, 12-10-92, 11-30-93, 1-26-97, Formerly 10D-66.050, Amended 8-4-98, 1-3-99, 7-14-99, 2-20-00, 9-3-00, 4-15-01, 11-19-01, 6-3-02, 12-18-06, Formerly 64E-2.003.

64J-1.005 Air Ambulances.

(1) Each applicant for an air ambulance license shall pay the required fee as specified in Section 401.34(1)(j), F.S., and submit an application to the department on DH Form 1575, ~~04/09 December 2008~~, Air Ambulance Service License Application which is incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at <http://www.fl-ems.com>. The air ambulance license shall automatically expire 2 years from the date of issuance.

(2) Each air ambulance applicant or provider, pursuant to subsection 64J-1.014(1), F.A.C., shall maintain on site and make available to the department at license application, license application renewal, change of insurance carrier or policy renewal, and documentation of the following minimum insurance coverage:

(a) Each aircraft shall be insured for the sum of at least \$100,000 for injuries to or death of any one person arising out of any one accident and the sum of at least \$300,000 for injuries to or death of more than one person in any one accident. Any such policy on a leased aircraft must identify both the owner and the lessee of the aircraft.

(b) In lieu of the insurance required in paragraph (2)(a), the provider or applicant may furnish a certificate of self-insurance establishing that the provider or applicant has a self-insurance plan to provide coverage identical to what is required in paragraph (2)(a) and that the plan has been approved by the Department of Insurance.

(3) Each licensed air ambulance shall have emergency protocols which address at least, emergency procedures when the aircraft is overdue, when radio communications cannot be established, or when aircraft location cannot be verified. Each licensed rotary wing air ambulance shall document at least every 15 minutes of flight while en route to and from the patient's location.

(4) Each provider shall maintain in each paramedic's employment file documentation of successful completion of an initial air crew member (ACM) education program that was conducted in accordance with the 1988 United States (U.S.) Department of Transportation (DOT) Air Medical Crew-Advanced National Standard Curriculum (NSC), which is incorporated by reference and is available for purchase from AAMS; 526 King Street, Suite 415, Alexandria, VA 22314; (703)836-8732. Each provider shall ensure and shall document in its employee records that each EMT and paramedic which it employs holds a current certification from the department.

(5) Each air ambulance provider shall establish a safety committee. The committee shall:

(a) Consist of a membership to include: one pilot, one flight medical crew member, the provider's medical director, one hospital administrator if the provider is a hospital based program, and a representative of a quality assurance division if one exists;

(b) Develop safety procedures for the provider;

(c) Meet at least quarterly to review safety policies, procedures, unusual occurrences, safety issues, and audit compliance with safety policies and procedures:

(d) Communicate the results of the safety audit to all program personnel; and

(e) Record minutes of the meeting and retain them on file for 2 years.

(6) Each prehospital air ambulance provider shall staff the aircraft with a minimum of one person who shall be a paramedic who meets the criteria in subsection 64J-1.005(4), F.A.C.

(7) Every air ambulance maintained by an air ambulance provider shall meet the structural, equipment and supply requirements listed in Table III.

(8) Each prehospital rotary wing air ambulance when available for call shall meet the structural requirements listed in Table III, and shall be equipped as approved by the medical director of the service in the aircraft minimum equipment list. The aircraft minimum equipment list shall include, at a minimum, one each of the items listed in Table IV and shall be provided to the department upon request.

TABLE III

AIR AMBULANCE

Structural, Equipment and Supply Requirements

ITEM

Aircraft Requirements

1. Entrance large enough to allow loading of a patient.
2. Interior large enough for two medical crew members.
3. Cabin illumination of 40 foot-candles at patient level.
4. FAA approved stretcher system with 2 straps.
5. Isolated aircraft cockpit to protect pilot from in-flight interference.
6. Each aircraft shall be equipped with FAA approved communication equipment that operates on frequencies which allow the flight and medical crew to communicate with ground and landing zone medical support exclusive of the air traffic control system.
7. No smoking sign.
8. External search light with a minimum of 400,000 candle power illumination at 200 feet separate from the aircraft landing lights, movable 90 degrees longitudinally, 180 degrees laterally and capable of being controlled from inside the aircraft (Helicopter only).

Medical Equipment Requirements

1. Oxygen sufficient for duration of flight.
2. Oxygen administration equipment.
3. Oropharyngeal airways. Pediatric and adult.
4. Hand operated bag-valve mask resuscitators, adult and pediatric accumulator, including adult, child and infant transparent masks capable of use with supplemental oxygen.
5. Equipment suitable to determine blood pressure of the adult and pediatric patient during flight.
6. Approved sharps container per Chapter 64E-16, F.A.C.
7. Approved biohazardous waste plastic bag or impervious container per Chapter 64E-16, F.A.C.
8. Portable suction unit with wide bore tubing and tips, electric or gas powered, which meets the minimum standards as published by the General Services Administration (GSA) in KKK-A-1822C specifications.
9. Equipment suitable to determine blood pressure of the adult and pediatric patient during the flight.

TABLE IV

Prehospital Rotary Wing Air Ambulances

ITEM

Equipment

1. Laryngoscope handle with batteries.
2. Laryngoscope blades; adult, child and infant size.
3. Pediatric I.V. arm board or splint appropriate for I.V. stabilization.

4. Disposable endotracheal tubes; adult, child and infant sizes. Those below 5.5 mm shall be uncuffed.
2.5 mm-5.0 mm uncuffed;
5.5 mm-7.0 mm;
7.5 mm-9.0 mm
5. Endotracheal tube stylets pediatric and adult.
6. Magill forceps, pediatric and adult sizes.
7. Device for intratracheal meconium suctioning in newborns.
8. Tourniquets.
9. I.V. cannulae between 14 and 24 gauge.
10. Macro drip sets.
11. Micro drip sets.
12. I.V. pressure infuser.
13. Needles between 18 and 25 gauge.
14. Intraosseous needles and three way stop cocks.
15. Assorted syringes.
16. D.C. battery powered portable monitor with defibrillation and pacing capabilities, ECG printout and spare battery. The unit shall be capable of delivering pediatric defibrillation (energy below 25 watts/sec and appropriate equipment).
17. Monitoring electrodes for adults and pediatrics.
18. Glucometer.
19. Pediatric length based measurement device for equipment selection and drug dosage.
20. Flexible suction catheters assorted sizes.
21. Multitrauma dressings.
22. ABD pads.
23. Sterile gauze pads.
24. Adhesive tape assorted sizes.
25. Patient restraints, wrist and ankle.
26. Soft roller bandages.
27. Bandage shears.
28. Sterile obstetrical kit to include, at minimum, bulb syringe, sterile scissors or scalpel, and cord clamps or cord ties.
29. Burn sheets.
30. Flashlight with batteries.
31. Vaseline gauze.
32. Gloves – latex or other suitable material. For all crew members.
33. Face masks for all crew members.
34. Naso and oropharyngeal airways assorted sizes.
35. Safety goggles or equivalent meeting A.N.S.I. Z87.1 standard.
36. Bulb syringe separate from obstetrical kit.

37. Thermal, absorbent, reflective blanket.
38. Standing orders.
39. Electronic waveform capnography capable of real-time monitoring and printing record of the intubated patient (effective 01/01/2008).

MEDICATION	WT./VOL.
1. Atropine sulfate.	
2. Dextrose 50 percent.	
3. Epinephrine HCL.	1:1,000
4. Epinephrine HCL.	1:10,000
5. Ventricular dysrhythmic.	
6. Sodium Bicarbonate.	50 mEq. or 44.6. mEq.
7. Naloxone (Narcan).	1 mg./ml. 2 mg. a
8. Nitroglycerin.	0.4 mg.
9. Benzodiazepine sedative/anticonvulsant.	
10. Inhalant beta adrenergic agent of choice with nebulizer apparatus, as approved by the medical director.	
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I.V. Solutions	
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1. Lactated Ringers or Normal Saline.	
<i>Rulemaking Authority 381.0011, 401.25, 401.251, 401.265, 401.35 FS. Law Implemented 381.0011, 395.405, 401.23, 401.24, 401.25, 401.251, 401.252, 401.26, 401.27, 401.30, 401.31, 401.321, 401.34, 401.35, 401.41, 401.411, 401.414, 401.421 FS. History—New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.51, Amended 4-12-88, 8-3-88, 8-7-89, 12-10-92, 11-30-93, 10-2-94, 1-26-97, Formerly 10D-66.051, Amended 1-3-99, 9-3-00, 5-15-01, 12-18-06, Formerly 64E-2.005.</i>	

64J-1.007 Vehicle Permits.

(1) Each application for a ground vehicle permit shall be on DH Form 1510, December 2008, Application for Vehicle Permit(s). Each application for an aircraft permit shall be on DH Form 1576, ~~04/09 December 2008~~, Application for Air Ambulance Permit. These forms are incorporated by reference and available from the department, as defined by subsection 64J-1.001(9), F.A.C., or at <http://www.fl-ems.com>. All applications shall be accompanied by the required fee as specified in Section 401.34(1)(c), (k), F.S.

(2) When it is necessary for a permitted vehicle to be out of service for routine maintenance or repairs, a substitute vehicle meeting the same transport capabilities and equipment specifications as the out-of-service vehicle may be used for a period of time not to exceed 30 days. If the substitute vehicle needs to be in service for longer than 30 days, the agency must seek written approval from the department. An unpermitted vehicle cannot be placed into service, nor can a BLS vehicle be used at the ALS level, unless it is replacing a vehicle that has been temporarily taken out of service for maintenance. When such a substitution is made, the following information shall be maintained by the provider and shall be accessible to the department:

(a) Identification of permitted vehicle taken out of service.

(b) Identification of substitute vehicle.

(c) The date on which the substitute vehicle was placed into service and the date on which it was removed from service and the date on which the permitted vehicle was returned to service.

(3) All transport vehicles permitted to licensed services must meet the vehicle design specifications, except for color schemes and insignias, as listed in United States General Services Administration (GSA)-KKK-1822, Federal Specifications for Ambulances as mandated by Section 401.35(1)(d), F.S., applicable to the year of the manufacture of the vehicle.

(4) All licensed providers applying for an initial air ambulance aircraft permit after January 1, 2005, shall submit to the department a valid airworthiness certificate (unrestricted), issued by the Federal Aviation Administration, for each permitted aircraft, prior to issuance of the initial permit. Aircraft replacements are subject to the initial application process.

(5) For purposes of Section 401.26(1):

(a) Water vehicles with a total capacity of two persons or less are neither transport vehicles nor advanced life support transport vehicles.

(b) Water vehicles with a total capacity of three or more persons are neither transport vehicles nor advanced life support transport vehicles, if:

1. Staffed and equipped per the Licensee Medical Director's protocols consistent with the certification requirements of Chapter 401, F.S.; and

2. Reported to the department with sufficient information to identify the water vehicle and to document compliance with subparagraph 1., above. Such report shall be updated with each license renewal.

(c) A transport vehicle or advanced life support transport vehicle that has explicit staffing, equipment and permitting requirements under Chapter 401, F.S., and other rules of the department cannot fall under paragraph (a) or (b), above.

Rulemaking Authority 381.0011, 401.23, 401.26, 401.35 FS. Law Implemented 381.001, 381.0205, 401.23, 401.24, 401.25, 401.251, 401.26, 401.27, 401.30, 401.31, 401.34, 401.35, 401.41, 401.411, 401.414 FS. History—New 11-29-82, Amended 4-26-84, 3-11-85, Formerly 10D-66.53, Amended 4-12-88, 12-10-92, 11-30-93, 1-26-97, Formerly 10D-66.053, Amended 1-3-99, 12-18-06, 10-16-07, Formerly 64E-2.007.

NAME OF PERSON ORIGINATING PROPOSED RULE: John C. Bixler, Paramedic, RN, BSN, Chief,
Bureau of EMS, Florida Department of Health, 4052 Bald Cypress Way, Tallahassee, FL 32399

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: State Surgeon General Ana
Viamonte Ros, Florida Department of Health, 4052 Bald Cypress Way, Tallahassee, FL 32399

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 27, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 17, 2009 Vol/No
35/15

PUBLISHED IN FAW ON 06/12/09