

Policy Title: **MedENGINES (Alternate response vehicles)**

No. M - 9

Board approval: 3/14/19

Effective: 3/14/19

Supersedes: 12/1/16

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Reference: IDPH EMS Act, Section 3.10(a)(b)(c); EMS Rules Section 515.825 Alternate Response Vehicle (effective September 20, 2018); EMS Education Standards; National EMS Scope of Practice Model; Illinois Expanded Scope of Practice Model

I. Definitions and IDPH policy

A. Ambulance Assistance Vehicles

1. “Ambulance assistance vehicles are dispatched simultaneously with an ambulance and assist with patient care prior to the arrival of the ambulance. Ambulance assistance vehicles include fire engines, trucks, squad cars or chief’s cars that contain the staff and equipment required by this Section. Ambulance assistance vehicles shall not function as assist vehicles if staff and equipment required by this Section are not available. The agency shall identify ambulance assistance vehicles as a program plan amendment outlining the type and level of response that is planned. The ambulance assistance vehicle shall not transport or be a primary response vehicle but a supplementary vehicle to support EMS services. The ambulance assistance vehicle shall be dispatched only if needed. Ambulance assistance vehicles shall be classified as either:
 - a. Advanced ambulance assistance vehicles shall be staffed with a minimum of one Paramedic, PHRN or physician and shall have all of the required equipment;
 - b. Intermediate ambulance assistance vehicles shall be staffed with a minimum of one EMT-I, A-EMT, Paramedic, PHRN or physician and shall have all of the required equipment;
 - c. Basic ambulance assistance vehicles shall be staffed with a minimum of one EMT, EMT-I, A-EMT, Paramedic, PHRN or physician and shall have all of the required equipment;
 - d. First Responder assistance vehicles shall be staffed with a minimum of one EMR, EMT, EMT-I, A-EMT, Paramedic, PHRN or physician and shall have all of the required equipment.”

B. Non-Transport Vehicles

1. “Non-Transport Vehicles are dispatched prior to dispatch of a transporting ambulance and include ambulances and fire engines that contain the staff and equipment required by this Section. The vehicle service provider shall identify non-transport vehicles as a program plan amendment outlining the type and level of response that is planned. Non-transport vehicles shall be staffed 24 hours per day, every day of the year.”
 - a. “**ALS Non-Transport Vehicles** shall have a minimum of either one System authorized Paramedic or one PHRN and one additional System authorized A-EMT, EMT-I, EMT or physician, and shall have all of the required equipment.” Two Paramedics or PHRNs are preferred, but not required by the System.” If an alternate response vehicle (MedEngine or Squad) is identified in an agency’s EMS plan as reserve, it may respond with one paramedic and 1 EMT, EMR, or firefighter if it is responding due to multiple simultaneous calls.
 - b. “**ILS Non-Transport Vehicles** shall have a minimum of either one System authorized A-EMT, EMT-I, Paramedic or PHRN and one additional System authorized EMT, A-EMT, EMT-I, Paramedic, PHRN or physician and shall have the required equipment.”

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- c. “BLS Non-Transport vehicles shall be staffed by one System authorized EMT, A-EMT, EMT-I, Paramedic or physician and one additional System authorized A-EMT, EMT-I, EMT or physician, and shall have all of the required equipment.”
- C. **Advanced Life Support Services or ALS Services** – an advanced level of pre-hospital and inter-hospital emergency care and non-emergency medical services that includes basic life support care, cardiac monitoring, cardiac defibrillation, electrocardiography, intravenous therapy, administration of medications, drugs and solutions, use of adjunctive medical devices, trauma care, and other authorized techniques and procedures as outlined in the National EMS Education Standards relating to Advanced Life Support and any modifications to that curriculum or those standards specified in this Part. (Section 3.10(a) of the Act)
- D. **Intermediate Life Support Services or ILS Services** – an intermediate level of pre-hospital and inter-hospital emergency care and non-emergency medical services that includes basic life support care plus intravenous cannulation and fluid therapy, invasive airway management, trauma care, and other authorized techniques and procedures as outlined in the Intermediate Life Support national curriculum of the United States Department of Transportation and any modifications to that curriculum specified in this Part. (Section 3.10(b) of the Act)
- E. **Basic Life Support or BLS Services** – a basic level of pre-hospital and inter-hospital emergency care and non-emergency medical services that includes medical monitoring, clinical observation, airway management, cardiopulmonary resuscitation (CPR), control of shock and bleeding and splinting of fractures, as outlined in the National EMS Education Standards relating to Basic Life Support and any modifications to that curriculum or standards specified in this Part. (Section 3.10(c) of the Act)

II. POLICY

- A. It is prudent and in the best interest of patient safety to have EMS equipment and licensed EMS personnel specified by IDPH Rules and System standards immediately available if an alternate response Fire Department apparatus responds to a scene call for EMS response prior to a state-authorized ambulance. The System supports Providers' efforts to enhance their preparedness, response capabilities, and customer service.
- B. Staffing and stocking a Fire Department vehicle as an EMS alternate response vehicle is purely optional. The System does not require EMS personnel or supplies on all non-ambulance fire apparatus. These vehicles shall be identified in the Provider's EMS program plan outlining the level of response that is planned in compliance with IDPH EMS Act, Rules, National Standards and Guidelines, and System policy.
- C. This policy is not intended to specify the drugs and equipment required on ALS squads specifically licensed for an EMS response. Squads shall meet the requirements specified on the System Drug and Supply List for ambulances.

III. Registration of Non-transport Provider Agencies

“Each non-transport provider shall complete and submit to the Department either the EMS non-transport provider application or EMS non-transport application for an existing transport provider, available on the IDPH website: <http://dph.illinois.gov/topics-services/emergency-preparedness-response/ems/prov-vehLic>.” The EMS Administrative Director shall process the completed application with IDPH.

- IV. **Issuance and renewal of license:** Upon payment of the appropriate fee, qualifying Non-Transport providers shall be issued a provider license that lists a number for each level of care approved. Licenses will not be issued for individual non-transport vehicles. Providers shall inform the Resource Hospital and the Department of any modification to the non-transport plan using the IDPH

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System Modification form (sys-mod) on the state website. The EMS Administrative Director shall forward the signed Sys-mod forms to IDPH.

- A. Licenses will be issued for four one years and must be maintained via annual inspections and payment of fees.
 - B. Agencies that have both Transport and Non-Transport licenses will have one EMS agency number. Add-on letters to the Transport License Number will signify the type of additional provider services licensed by IDPH for that provider. Example: A.B.C. EMS service Transport provider number 8300
 1. A.B.C. EMS service Non-Transport provider number 8300NT
 2. A.B.C. EMS service Stretcher Van transport service number 8300SV
- V. **Non-Transport vehicle Inspections:** Initial inspections shall be scheduled and completed by the IDPH state ambulance inspector. If an ALS or ILS NT vehicle, the assigned Hospital EMSC/Educator must complete the initial ALS or ILS portion of the inspection. Thereafter, the provider agency shall perform the annual BLS self-inspections, using forms supplied by IDPH on their website. ALS and ILS inspections using this policy shall be completed every other year by the assigned Hospital EMSC/Educator. They shall be completed on the alternate years by the EMS agency.
- A. **All alternate response vehicle inspections for the NWC EMSS are due in September of each year.**
 - B. All completed inspection forms shall be forwarded to the Resource Hospital EMS Administrative Director for processing with IDPH. The agency shall pay all applicable fees directly to IDPH in compliance with instructions issued by IDPH.
 - C. The Department will also perform inspections randomly or as the result of a complaint.
- VI. EMS personnel responding on an alternate response vehicle are held to the same **scope of practice and standards of care** as comparably licensed EMS personnel on ambulances within the limits of the supplies and equipment available to them. They have the same liability protection under the EMS Act. EMS personnel shall initiate care under the System's SOPs, Policies, and Procedures within their scope of practice and based on available equipment. They shall assist in an orderly transition of care to the responding ambulance crew as specified in System policy.
- VII. **Alternate response vehicle (BLS, ILS, & ALS) Drugs & Supplies:** (Organized to comply with IDPH rules and inspection form)

# needed	Products must meet the specifications listed on the EMS Drug and Supply list
2 rolls	Adhesive tape
1 each	Airways, oropharyngeal – adult, child and infant (sizes 00-5)
1 each	Airways: Nasopharyngeal with lubricant sizes: 12-34 Fr 12Fr/3mm, 16Fr/4mm, 20Fr/5mm, 24Fr/6mm, 28Fr/7mm, 30Fr/7.5 mm ; 34Fr/8.5mm
2	Bandages/arm slings/triangular
4	Bandages: Roller, self-adhering (4" or 6" by 5 yds)
<u>2</u>	Bandages: Vaseline gauze 3" X 8"; <i>plastic wrap; or vented/channeled chest seal (preferred)</i>
<u>1-2</u>	Bandages: Sterile ABD's or trauma/universal dressings (<i>CeloxRapid Z-fold preferred</i>)
10	Bandages/dressings: Sterile gauze pads 4X4s
4	Band-Aids
1	Bandage scissors
1	Blanket (Mylar accepted)
1 ea size	Blood pressure cuffs (Adult, Child, Infant) with aneroid-type gauges

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# needed	Products must meet the specifications listed on the EMS Drug and Supply list
1	Broselow pediatric length-based tape (latest edition)
1	Burn sheet, individually wrapped (does not need to be sterile)
1 ea	Cervical collar (adjustable adult) or 1 ea adult lg, med, small; plus peds, infant
2 ea	Cold packs; warm packs
	Communication equipment to contact hospital
1	Defibrillator: Automated /semi-automated External Defibrillator (AED) with adult and pediatric capability. Manufacturer specific adult and pediatric pads (<u>BLS /ILS only – ALS, see below</u>)
1	Flashlight and penlight
1 device	Glucose meter (<i>Microdot</i>) and test strips (<i>bottle of 50 strips and high/low testing solution</i>), and <i>at least 2 lancets. Must be tested daily and maintained per System policy.</i>
1 ea	Obstetrical kit , sterile that includes bulb syringe and cord clamps; thermal absorbent blanket and head cover for newborn or appropriate heat reflective material
1	Oxygen equipment <u>Functional portable oxygen cylinder, with a capacity of 1200 (not less than 350 liters) equipped with non-gravity dependent Dial flowmeter/regulator for 15 liters per minute with delivery tubes and tank key attached</u>
1	Adult nasal cannula
1 ea	Adult, child and <u>infant oxygen</u> masks (nonrebreather preferred)
1	CPAP mask
1	Adult disposable BVM meeting System specs with adult mask
1	Peds disposable BVM meeting System specs with child, infant & <u>newborn</u> masks
<u>1</u>	<u>ResQPod impedance threshold device</u>
2 full sets	Personal protective equipment including non-porous disposable gloves, face/eye protection or shields, surgical mask, appropriately sized N-95 masks; <u>fluid repellent gowns</u>
1	Isolation bag
1	Hand washing agent: topical germicide
2	Splinting devices: Extremity: adult-child long/short. <u>No backboard req. by System.</u>
	Sterile solution: Sterile saline or water solution (1,000mL), plastic bottle or bag
1	Stethoscope
1	Suction device (manually operated OK) with tubing and sterile single use suction catheters one from each size range: 6-8 Fr; 10-12 Fr; 14-18 Fr
4 - <u>2</u>	Tourniquet -type bandage: <i>disposable Combat Application Tourniquet, TMT or approved equivalent</i>
Medications/Drugs - BLS	
1 ea	Albuterol 2.5 mg /3 mL (0.083%); ipratropium 0.02% 0.5 mg/2.5 mL NS & 1 HHN and adaptors to deliver using BVM
4 ea	ASA chewable 81 mg tablets <u>for chest pain of suspected ischemic origin</u>
2	Diphenhydramine 50 mg tablets
Supplies for 2 injections	Epinephrine 1mg/1mL vial with (2) 0.5mL syringes (if available) or (2) 1mL syringes and (2) 21 or 22g needles for IM injection
1	Glucagon 1 mg for IN or IM administration
Supplies for up to 4 mg divided doses	Naloxone 2 mg/2 mL; with (4) 1 mL syringes; (4) 21 or 22 g needles; may give IM or IN
1 bottle	Nitroglycerin 0.4 mg (1/150 gr) tabs for suspected ischemic chest pain

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# needed	Products must meet the specifications listed on the EMS Drug and Supply list
2	Medication atomization devices for mucosal drug delivery
2	Ondansetron 4 mg ODT
Medications/Drugs/Supplies – ILS: Above plus the following:	
2	Normal saline 1000 mL bags IV fluid (no unwarmed fluids to pt w/severe trauma or shock)
1 each	IV catheter over the needle devices (protected): 14, 16, 18, 20 gauge (saline lock OK for IV meds only)
2	IV tubing: regular drip
1	IV tubing: microdrip (Peds patients)
2	IV protective dressings
4 each	CHG/IPA skin preps
1	Point of use sharps container (lg)
1 ea	Selective drugs by IO (already placed) and IV routes (SOP initial dose): diphenhydramine; dextrose 10% 25 Gm /250 mL premix IVPB, ondansetron
1 ea	Selective drugs (SOP initial dose) by IO (already placed) and IVP routes if vehicle has a cardiac monitor with viewable ECG tracing, ETCO₂ and SPO₂ : Adenosine, amiodarone, atropine sulfate, benzodiazepines, fentanyl (optional), ketorolac (shortage), lidocaine HCl 2%

- VI. **ALS** – BLS/ILS drugs/supplies as above (except AED) plus “ALS approved equipment (medication storage box with temperature/environmental control standards for medication storage), airway equipment, monitor/defibrillator) and medications” as below:

# needed	Products must meet the specifications listed on the EMS Drug & Supply list
Medications/Drugs – In addition to above for BLS/ILS, paramedics/PHRNs on an ALS alternate response vehicle may give medications by all routes and doses specified for ALS in the SOPs as full ALS monitoring and resuscitation equipment shall be available to them.	
1	Adenosine 6 mg / 2 mL
2	Amiodarone 150 mg/3 mL
2	Atropine 1 mg / 10 mL preload
3	Epinephrine (1mg/10mL)
1	Fentanyl 100 mcg / 2 mL (ampule pref, keep padded) – Optional
1	Ketamine 500 mg/10 mL (50mg/mL concentration)
1	Midazolam 10 mg/2 mL
1	Norepinephrine 4 mg / 4 mL (vial preferred)
1	Verapamil 5 mg
1	<u>10 g; catheter over the needle device; 3 or 3.25" long for needle cric & pleural decompression</u>
1 each	<u>i-gel® supraglottic airway (same sizes required on ALS ambulances; King LTS-D airway kits (size: 3/yellow, 4/red, 5 purple) to retire by attrition starting 3-1-19.</u>
1	<u>Choking kit: (If King Vision not carried: 1 standard laryngoscope handle and size 2 disposable blade - NOT to be used for ETI);</u> Magill or curved uterine forceps
1 ea	Syringes: 1 mL; 3 mL; 10-12mL; 20mL with needles
1	Cardiac monitor/defibrillator equipped with adult and pediatric size defibrillation pads capable of external pacing, <u>SpO₂; ETCO₂; 12-lead ECG</u> . Semi-automated AED with manual over-ride option based on waiver. (Not considered ALS in new Rules and national standards – IDPH will not grant ongoing waivers for monitor/defibrillators that do not meet ALS-capable standards on an ALS vehicle)

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# needed	Products must meet the specifications listed on the EMS Drug & Supply list
20	ECG electrodes (& 1 washcloth/towel and alcohol pads for skin prep)
Optional ALS	
1 ea	<i>EZ-IO driver plus 45 mm (Yellow); 25 mm (Blue); 15 mm (Pink) 15 g needles kits each with stabilizer</i>
1 ea	ResQPod Changed to required BLS
1	<i>Chest compression mechanical CPR Device (approved piston-type CPR devices)</i>
1 set	<i>King vision videolaryngoscopy equipment per ALS ambulance inventories</i>
Must have if King Vision carried	<u>2 each 6 or 6.5mm, 7 or 7.5mm, cuffed for use with King Vision curved channeled blade</u>
	<u>Bougie - 15Fr x 60-70cm with Coude Tip – disposable, single-use</u>
	<u>Commercial ETT holders; Battery operated suction unit with DuCanto catheters</u>

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