

Legend: (Proposed Amendment(s))

Single Underline = Proposed new language

[Bold, Print, and Brackets] = Current language proposed for deletion

Regular Print = Current language

(No change.) = No changes are being considered for the designated subdivision

§157.2 Definitions.

The following words and terms, when used in these sections, shall have the following meanings, unless the context clearly indicates otherwise:

(1) Abandonment - Leaving a patient without appropriate medical care once patient contact has been established, unless emergency medical services personnel are following medical director's protocols, a physician directive or the patient signs a release; turning the care of a patient over to an individual of lesser education **[training]** when advanced treatment modalities have been initiated. **[to include, but not limited to, IVs, intubation, and drug therapy.]**

(2) Accreditation - Formal recognition by a national association of a provider's service or an education program based on **[voluntarily met]** standards established by that association.

(3) Act - Emergency Medical Services Act, Health and Safety Code, Chapter 773.

(4) Administrator of Record (AOR) – The administrator for an EMS provider which meets the requirements of Health and Safety Code §773.05712 and §773.0415.

(5) Advanced Emergency Medical Technician (AEMT) – An individual who is certified by the department and is minimally proficient in performing skills required to provide emergency prehospital or interfacility care by initiating and maintaining under medical supervision certain procedures, including intravenous therapy and endotracheal or esophageal intubation.

(6) **[(4)]** Advanced life support (ALS) - Emergency prehospital or interfacility care that uses invasive medical acts which would include ALS assessment. The provision of advanced life support shall be under the medical supervision and control of a licensed physician.

(7) **[(5)]** Advanced life support (ALS) vehicle - A vehicle that is designed for transporting the sick and injured and that meets the requirements of §157.11(j)(2) of this title as an [a basic] advanced life support vehicle and has sufficient equipment and supplies for providing advanced level of care based on national standards and the EMS provider's medical director approved treatment protocols [intravenous therapy and endotracheal or esophageal intubation or both].

(8) Advanced Life Support assessment – Assessment performed by an AEMT or paramedic that qualify as advanced life support based upon initial dispatch information, when it

could reasonably be believed that the patient was suffering from an acute condition that may require advanced skills.

(9) [(6)] Air ambulance provider - A person who operates/leases a fixed-wing or rotor-wing air ambulance aircraft, equipped and staffed to provide a medical care environment on-board appropriate to the patient's needs. The term air ambulance provider is not synonymous with and does not refer to the Federal Aviation Administration (FAA) air carrier certificate holder unless they also maintain and control the medical aspects that are consistent with EMS provider licensure.

(10) Ambulance – a vehicle for transportation of sick or injured person to, from or between places of treatment for an illness or injury, and provide out of hospital medical care to the patient.

(11) Authorized ambulance vehicle – A vehicle authorized to be operated by the licensed provider and that meets all criteria for approval as listed in §157.11(e) of this title.

(12) [(7)] Basic life support (BLS) - Emergency prehospital or interfacility care that uses noninvasive medical acts. The provision of basic life support will have sufficient equipment and supplies for providing basic level care based on national standards and the EMS provider's medical director approved treatment protocols **[shall be under the medical supervision and control of a licensed physician].**

(13) [(8)] Basic life support (BLS) vehicle - A vehicle that is designed for transporting the sick or injured and that has sufficient equipment and supplies for providing basic life support based on national standards and the EMS provider's medical director approved treatment protocols.

(14) [(9)] Basic trauma facility - A hospital designated by the department as having met the criteria for a Level IV trauma facility as described in §157.125 of this title (relating to Requirements for Trauma Facility Designation). Basic trauma facilities provide resuscitation, stabilization, and arrange for appropriate transfer of major and severe trauma patients to a higher level trauma facility, provide ongoing educational opportunities in trauma related topics for health care professionals and the public, and implement targeted injury prevention programs.

[(10) Board - The Texas Board of Health.]

[(11) Bureau - The Bureau of Emergency Management of the Texas Department of Health.]

[(12) Bureau chief - The chief of the Bureau of Emergency Management.]

(15) [(13)] Bypass - Direction given to a prehospital emergency medical services unit, by direct/on-line medical control or predetermined triage criteria, to pass the nearest hospital for the most appropriate hospital/trauma facility. Bypass protocols should have local

physician input into their development and should be reviewed through the regional performance improvement process.

(16) [(14)] Candidate - An individual who is requesting emergency medical services personnel certification or licensure, recertification or relicensure from the Texas Department of State Health Services.

(17) [(15)] Certificant - Emergency medical services personnel with current certification from the Texas Department of State Health Services.

(18) [(16)] Comprehensive trauma facility - A hospital designated by the department as having met the criteria for a Level I trauma facility as described in §157.125 of this title. Comprehensive trauma facilities manage major and severe trauma patients, provide ongoing educational opportunities in trauma related topics for health care professionals and the public, implement targeted injury prevention programs, and conduct trauma research.

(19) [(17)] Course medical director - A Texas licensed physician approved by the department with experience in and current knowledge of emergency care who shall provide direction over all instruction and clinical practice required in EMS training courses.

(20) [(18)] Credit hour - Continuing education credit unit awarded for successful completion of a unit of learning activity as defined in §157.32 of this title (relating to EMS Education Program and Course Approval).

(21) [(19)] Critically injured person - A person suffering major or severe trauma, with severe multi system injuries or major unisystem injury; the extent of the injury may be difficult to ascertain, but which has the potential of producing mortality or major disability.

(22) Current – Within active certification or licensure period of time.

(23) [(20)] Department - The Texas Department of State Health Services.

(24) Designated infection control officer – A designated officer who serves as a liaison between the employer's employees who have been or believe they have been exposed to a potentially life-threatening infectious disease, through a person who was treated and/or transported by the EMS provider.

(25) [(21)] Designation - A formal recognition by the department of a hospital's trauma care capabilities and commitment.

(26) Distance learning – A method of learning remotely without being in regular face-to-face contact with a instructor in the classroom.

(27) [(22)] Diversion - A procedure put into effect by a trauma facility to ensure appropriate patient care when that facility is unable to provide the level of care demanded by a trauma patient's injuries or when the facility has temporarily exhausted its resources.

(28) [(23)] Emergency call - a **[telephone]** call or other similar communication from a member of the public, as part of a 9-1-1 system or other emergency access communication system, made to obtain emergency medical services.

(29) [(24)] Emergency care attendant (ECA) - An individual who is certified by the department as minimally proficient to provide emergency prehospital care by providing initial aid that promotes comfort and avoids aggravation of an injury or illness.

(30) [(25)] Emergency medical services (EMS) - Services used to respond to an individual's perceived need for **[immediate]** medical care and to prevent death or aggravation of physiological or psychological illness or injury.

(31) [(26)] Emergency medical services (EMS) operator - a person who, as an employee of a public agency, as that term is defined by Health and Safety Code, §771.001, receives emergency calls.

[(27) Emergency Medical Service Administrator - The principal executive manager of an emergency medical service organization who is responsible for the non-medical operations, staffing, policies and procedures, and overall management of the service.]

(32) [(28)] Emergency medical services and trauma care system - An arrangement of available resources that are coordinated for the effective delivery of emergency health care services in geographical regions consistent with planning and management standards.

(33) [(29)] Emergency medical services personnel -

(A) emergency care attendant (ECA);

(B) emergency medical technician (EMT);

(C) advanced emergency medical technician (AEMT) **[emergency medical technician-intermediate (EMT-I)]**; **[or]**

(D) emergency medical technician-paramedic (EMT-P); or

(E) licensed paramedic.

(34) [(30)] Emergency medical services (EMS) provider - A person who uses, operates or maintains EMS vehicles and EMS personnel to provide EMS. See §157.11 of this title (relating to Requirements for an EMS Provider License) regarding fee exemption.

(35) [(31)] Emergency medical services (EMS) volunteer provider - An EMS that **[which]** has at least 75% of the total personnel as volunteers and is a nonprofit organization. See §157.11 of this title regarding fee exemption.

(36) [(32)] Emergency medical services (EMS) volunteer - EMS personnel who provide emergency prehospital or interfacility care in affiliation with a licensed EMS provider or a registered First Responder organization without remuneration, except for reimbursement for expenses.

(37) [(33)] Emergency medical technician (EMT) - An individual who is certified by the department as minimally proficient to perform emergency prehospital care that is necessary for basic life support and that includes the control of hemorrhaging and cardiopulmonary resuscitation.

[(34) Emergency medical technician-intermediate (EMT-I) - An individual who is certified by the department as minimally proficient in performing skills required to provide emergency prehospital or interfacility care by initiating and maintaining under medical supervision certain procedures, including intravenous therapy and endotracheal or esophageal intubation or both.]

(38) [(35)] Emergency medical technician-paramedic (EMT-P) - An individual who is certified by the department as minimally proficient to provide emergency prehospital, interfacility care, health care facility's emergency or urgent care clinical setting, including a hospital emergency room and a freestanding emergency medical care facility by providing advanced life support that includes initiation and maintenance under medical supervision of certain procedures, including intravenous therapy, endotracheal or esophageal intubation or both, electrical cardiac defibrillation or cardioversion, and drug therapy.

(39) [(36)] Emergency medical services vehicle-

- (A) basic life support (BLS) vehicle;
- (B) advanced life support (ALS) vehicle;
- (C) mobile intensive care unit (MICU);
- (D) MICU rotor wing and MICU fixed wing air medical vehicles; or
- (E) specialized emergency medical service vehicle.

(40) Emergency Medical Task Force (EMTF) – A unit specially organized to provide coordinated emergency medical response operation systems during large scale EMS incidents

(41) [(37)] Emergency prehospital care - Care provided to the sick and injured within an health care facility's emergency or urgent care clinical setting, including a hospital emergency room and a freestanding emergency medical care facility, before or during transportation to a medical facility, including any necessary stabilization of the sick or injured in connection with that transportation.

(42) [(38)] Facility triage - The process of assigning patients to an appropriate trauma facility based on injury severity and facility availability.

(43) Fixed location – The address as it appears on the initial and/or renewal EMS provider license application in which the patient care records and administrative offices will be located.

(44) [(39)] General trauma facility - A hospital designated by the department as having met the criteria for a Level III and Level IV trauma facility as described in §157.125 of this title. General trauma facilities provide resuscitation, stabilization, and assessment of injury victims and either provide treatment or arrange for appropriate transfer to a higher level trauma facility, provide ongoing educational opportunities in trauma related topics for health care professionals and the public, and implement targeted injury prevention programs.

(45) [(40)] Governmental entity - A county, a city or town, a school district, or a special district or authority created in accordance with the Texas Constitution, including a rural fire prevention district, an emergency services district, a water district, a municipal utility district, and a hospital district.

(46) [(41)] Health care entity - A first responder, EMS provider, physician, nurse, hospital, designated trauma facility, or a rehabilitation program.

(47) Inactive EMS provider status – The period when a licensed EMS provider is not able to respond or response ready to an emergency or non-emergency medical dispatch.

(48) [(42)] Industrial ambulance - Any vehicle owned and operated by an industrial facility as defined in the Texas Transportation Code, Chapter 541, §201, and used for initial transport or transfer of company employees who become urgently ill or injured on company premises to an appropriate medical facility.

(49) [(43)] Interfacility care - Care provided while transporting a patient between medical facilities.

(50) [(44)] Lead trauma facility - A trauma facility [**that has made an additional commitment to its trauma service area. This commitment,**] which usually is offered by the highest level of trauma facility in a given trauma service area, includes receipt of major and severe trauma patients transferred from lower level trauma facilities. It also includes on-going support of the regional advisory council and the provision of regional outreach, prevention, and trauma educational activities to all trauma care providers in the trauma service area regardless of health care system affiliation.

(51) Legal entity name – The name of the lawful or legally standing association, corporation, partnership, proprietorship, trust, or individual. Has legal capacity to (1) enter into agreements or contracts, (2) assume obligations, (3) incur and pay debts, (4) sue and be sued in its own right, and (5) to be accountable for illegal activities.

(52) [(45)] Licensee - An individual who holds a current paramedic license from the Texas Department of State Health Services (department); an individual who uses, maintains or operates EMS vehicles and EMS personnel to provide EMS and who holds a licensed paramedic [an EMS provider] license from the department.

(53) [(46)] Major trauma facility - A hospital designated by the department as having met the criteria for a Level II trauma facility as described in §157.125 of this title. Major trauma facilities provide similar services to the Level I trauma facility although research and some medical specialty areas are not required for Level II facilities, provide ongoing educational opportunities in trauma related topics for health care professionals and the public, and implement targeted injury prevention programs.

(54) [(47)] Major trauma patient - A person with injuries, or potential injuries, severe enough to benefit from treatment at a trauma facility. These patients may or may not present with alterations in vital signs or level of consciousness or obvious significant injuries (see severe trauma patient), but have been involved in an incident which results in a high index of suspicion for significant injury and/or disability. Co-morbid factors such as age and/or the presence of significant medical problems should also be considered. These patients should initiate a system's or health care entity's trauma response, including prehospital triage to a designated trauma facility. For performance improvement purposes, these patients are also identified retrospectively by an injury severity score of 9 or above.

(55) [(48)] Medical control - The supervision of prehospital emergency medical service providers by a licensed physician. This encompasses on-line (direct voice contact) and off-line (written protocol and procedural review).

(56) [(49)] Medical Director - The licensed physician who provides medical supervision to the EMS personnel of a licensed EMS provider or a recognized First Responder Organization under the terms of the Medical Practices Act (Occupations Code, Chapters 151 – 165 [Chapter 6, Texas Civil Statutes 4495b]) and rules promulgated by the Texas Medical [State] Board [of Medical Examiners]. Also may be referred to as off-line medical control.

(57) [(50)] Medical oversight - The assistance and management given to health care providers and/or entities involved in regional EMS/trauma systems planning by a physician or group of physicians designated to provide technical assistance.

(58) [(51)] Medical supervision - Direction given to emergency medical services personnel by a licensed physician under the terms of the Medical Practice Act, (Occupations Code, Chapters 151 – 165 [Chapter 6, Texas Civil Statutes 4495b]) and rules promulgated by the Texas Medical [State] Board [of Medical Examiners] pursuant to the terms of the Medical Practice Act.

(59) [(52)] Mobile intensive care unit (MICU) - a vehicle that is designed for transporting the sick or injured and that meets the requirements of the advanced life support vehicle and has sufficient equipment and supplies to provide cardiac monitoring, defibrillation,

cardioversion, drug therapy, and two-way communication with at least one paramedic on the vehicle when providing EMS.

(60) Off-line medical direction – The licensed physician who provides approved protocols and medical supervision to the EMS personnel of a licensed EMS provider under the terms of the Medical Practices Act (Occupations Code, Chapters 151 – 165) and rules promulgated by the Texas Medical Board (Title 22, Texas Administrative Code, §197.3).

(61) Online course – A directed learning process, comprised of educational information (articles, videos, images, web links), communication (messaging, discussion forums) with a process and some way to measure students' knowledge.

(62) Operational name – Name under which the business or operation is conducted and presented to the world.

(63) [(53)] Operational policies - Policies and procedures which are the basis for the operation of EMS include, but are not limited to such areas as vehicle maintenance, proper maintenance and storage of supplies, equipment, medications, and patient care devices; complaint investigation, multicasualty incidents, hazardous materials; but do not include personnel or financial policies.

(64) Out of service vehicle – The period when a licensed EMS Provider vehicle is unable to respond or be response ready for an emergency or non-emergency response.

(65) [(54)] Person - An individual, corporation, organization, government, governmental subdivision or agency, business, trust, partnership, association, or any other legal entity.

(66) [(55)] Prehospital triage - The process of identifying medical/injury acuity or the potential for severe injury based upon physiological criteria, injury patterns, and/or high-energy mechanisms and transporting patients to a facility appropriate for their medical/injury needs. Prehospital triage for injury victims is guided by the prehospital triage protocol adopted by the regional advisory council (RAC) and approved by the department.

(67) Practical exam – sometime referred to as psychomotor, is an exam that assesses the subject's ability to perceive instructions and perform motor responses.

(68) Primary EMS provider response area – The geographic area in which an EMS agency routinely provides emergency EMS as agreed upon by a local or county governmental entity or by contract.

(69) Public safety answering point (PSAP) – The call center responsible for answering calls to an emergency telephone number for ambulance services; sometimes called “public safety access point,” or “dispatch center.”

(70) [(56)] Quality management - Quality assurance, quality improvement, and/or performance improvement activities.

(71) Regional Advisory Council (RAC) – An organization serving as the Department of State Health Service recognized health care coalition responsible for the development, implementation and maintenance of the regional trauma and emergency health care system within the geographic jurisdiction of the Trauma Service Area. A Regional Advisory Council must maintain 501(C) (3) status.

(72) [(57)] Regional EMS/trauma system - A network of healthcare providers within a given trauma service area (TSA) collectively focusing on traumatic injury as a public health problem, based on the given resources within each TSA. **[An EMS and trauma care system that has been developed by a RAC in a multi-county area and has been recognized by the department. The Texas Trauma system is a network of the regional EMS/trauma systems.]**

(73) [(58)] Regional medical control - Physician supervision for prehospital emergency medical services (EMS) providers in a given trauma service area or other geographic area intended to provide standardized oversight, treatment, and transport guidelines, which should, at minimum, follow the regional advisory council's regional EMS/trauma system plan components related to these issues and Title 22, Texas Administrative Code, §197.3, Off-line medical director.

(74) [(59)] Recertification - The procedure for renewal of emergency medical services certification.

(75) Receiving facility – A facility to which an ambulance may transport a patient who requires prompt continuous medical care.

(76) [(60)] Reciprocity - The recognition of certification or privileges granted to an individual from another state or recognized EMS system.

(77) [(61)] Relicensure - The procedure for renewal of a paramedic license as described in §157.40 of this title (relating to Paramedic Licensure); the procedure for renewal of an EMS provider license as described in §157.11 of this title.

(78) Response pending status – The status of an EMS vehicle that just delivered a patient to a final receiving facility, and the dispatch center has another EMS response waiting that EMS vehicle.

(79) [(62)] Response ready - When an EMS vehicle is equipped and staffed in accordance with §157.11 of this title (relating to Requirements for a Provider License) and is immediately available to respond to any emergency call 24 hours per day, seven days per week (24/7).

(80) Scope of practice – Describes the procedures, actions and processes that an EMS personnel is permitted to undertake in keeping with the terms of the professional license or certification and approved by the EMS provider medical director.

(81) [(63)] Severe trauma patient - A person with injuries or potential injuries that require treatment at a tertiary trauma facility. These patients may be identified by an alteration in vital signs and/or level of consciousness or by the presence of significant injuries and shall initiate a system's and/or health care entity's highest level of trauma response including prehospital triage to a designated trauma facility. For performance improvement purposes, these patients are also identified retrospectively by an injury severity score of 15 or above.

(82) [(64)] Shall - Mandatory requirements.

(83) [(65)] Site survey - An on-site review of a trauma facility applicant to determine if it meets the criteria for a particular level of designation.

(84) [(66)] Sole provider - The only licensed emergency medical service provider in a geographically contiguous service area and in which the next closest provider is greater than 20 miles from the limits of the area.

(85) [(67)] Specialized emergency medical services vehicle - A vehicle that is designed for responding to and transporting sick or injured persons by any means of transportation other than by standard automotive ground ambulance or rotor or fixed wing air craft and that has sufficient staffing, equipment and supplies to provide for the specialized needs of the patient transported. This category includes, but is not limited to, water craft, off-road vehicles, and specially designed, configured or equipped vehicles used for transporting special care patients such as critical neonatal or burn patients.

(86) [(68)] Specialty centers - Entities that care for specific types of **[trauma]** patients such as trauma, pediatric, stroke, cardiac hospitals and burn units that have received certification, categorization, verification or other form of recognition by an appropriate agency regarding their capability to definitively treat these types of patients.

(87) [(69)] Staffing plan - A document which indicates the overall working schedule patterns of EMS personnel.

(88) [(70)] Standard of care - Care equivalent to what any reasonable, prudent person of like certification level would have given in a similar situation, based on locally, regionally and nationally **[local or regionally]** adopted standard emergency medical services curricula as adopted by reference in §157.32 of this title (relating to Emergency Medical Services Training and Course Approval).

(89) Substation – an EMS provider station location that is not the fixed station and which is likely to provide rapid access to a location to which the EMS vehicle may be dispatched.

(90) [(71)] Trauma - An injury or wound to a living body caused by the application of an external force or violence, including burn injuries. Poisonings, near-drownings and suffocations, other than those due to external forces are to be excluded from this definition.

(91) [(72)] Trauma facility - A hospital that has successfully completed the designation process, is capable of stabilization and/or definitive treatment of critically injured persons and actively participates in a regional EMS/trauma system.

(92) [(73)] Trauma nurse coordinator/trauma program manager - A registered nurse with demonstrated interest, education, and experience in trauma care and who, in partnership with the trauma medical director and hospital administration, is responsible for coordination of trauma care at a designated trauma facility. This coordination should include active participation in the trauma performance improvement program, the authority to positively impact trauma care of trauma patients in all areas of the hospital, and targeted prevention and education activities for the public and health care professionals.

(93) [(74)] Trauma patient - Any critically injured person who has been evaluated by a physician, a registered nurse, or emergency medical services personnel, and found to require medical care in a trauma facility based on local, regional or national medical control protocols.

(94) [(75)] Trauma registry - A statewide database which documents and integrates medical and system information related to the provision of trauma care by health care entities.

(95) Trauma Service Area – An organized geographical area of at least three counties administered by a regional advisory council for the purpose of providing prompt and efficient transportation and/or treatment of sick and injured patients.

(96) [(76)] When in service - The period of time when an EMS vehicle is at the scene or when enroute to a facility with a patient.