



Oklahoma State Department of Health
Creating a State of Health

2019 EMS Personnel Renewal Application National Registry EMT Renewing as Oklahoma Intermediate

Renewal applications will be accepted no later than July 30, 2019.

After July 30, 2019 a completed OSDH **INITIAL** EMS Personnel Application will be required for reinstatement of licensure. In cases of hardship, an extension can be granted for up to 90 days. Requests for an extension must be submitted via email to esystems@health.ok.gov. The State EMS office cannot issue any license for renewal after 90 days of the expiration date. **If your Oklahoma Intermediate license lapses and you have to complete an initial application form, you will be licensed at the level of your National Registry license level.**

Complete this form only if you are an Oklahoma Intermediate (I-85) who has not transitioned to the NR AEMT level. Your National Registry will be dropped to the EMT level but you can maintain your Oklahoma Intermediate license.

To maintain your Oklahoma Intermediate license:

- 1. Maintain your National Registry EMT certification.**
- 2. Provide proof of an approved Intermediate 36 hour refresher course within the last two years.**
- 3. Complete the Verification of Skill Maintenance (page 7 of this form).**
- 4. Fulfil the 36 Continuing Education requirements (see page 8 of this form).**

Early Renewal - Early renewals are appreciated, but will have to be held in our office until after January 30, 2019. This form may be completed and turned in before January 1, 2019, but the Department will not be allowed to process the applications until after the New Year. Expect your renewed EMS License after January 30, 2019.

During the peak renewal period, you can expect a wait for up to 4 weeks before receiving your renewed EMS license. Renewing your license early in the year will help to ensure your license does not lapse during this wait.

310:641-5-13. Issuance of licenses

- (a) Upon successful completion of the examinations, an Oklahoma certification or license at the respective level of emergency medical personnel shall be issued. Concurrent registration with the National Registry is included during the initial license period. NREMT certification shall be maintained by emergency medical personnel licensed after April 1, 2010. Oklahoma emergency medical personnel licenses will be extended to meet the new expiration date for a two year transition period. An exception is permitted for Oklahoma licensed Intermediates that did not test to become AEMTs. When their national certification is not renewed, they may still retain their Intermediate license subject to Oklahoma requirements for renewal.

SPECIAL NOTES:

EMS Personnel who are placed on Tax Hold by the Oklahoma State Tax Commission must be released by the Tax Commission on or before June 30, 2019.

*****PLEASE READ AND UNDERSTAND THE MEMO Medical Control Requirements for Certified and Licensed Personnel ON THE FOLLOWING PAGE!**

EMS Personnel who are instructors should submit their instructor renewal by email to esystems@health.ok.gov. The form for instructor renewal is located at: <http://www.ok.gov/health2/documents/NEWInstructorRenewalApp.pdf>

Regulations concerning EMT Licensure may be found on our website at: <http://ems.health.ok.gov>

If you have any questions, please contact the EMS Division at 405-271-4027 or by email at esystems@health.ok.gov



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Medical Control Requirements for Certified and Licensed Personnel

December 16, 2011

Revised: December 11, 2014

To: Oklahoma Certified Emergency Medical Responders

Oklahoma Licensed Emergency Medical Technicians **(All Levels)**

From: Dale Adkerson, Administrative Program Manager- EMS Division

OSDH-Emergency Systems

Re: Working outside of Medical Control

This information results from an issue the Department has been working to address for some time. Specifically, the issue is certified and licensed personnel working without a medical director at private and corporate events. The intended desire is not to restrict employment opportunities, but to educate members of the profession of the current statutory and regulatory requirements.

EMR's and EMT's are often hired to provide medical support for private events such as races, rodeos, skating events, movie sets, and concerts. The producers, sponsors, and owners of these events hire personnel to provide on-site medical support. Personnel accept these jobs, and assumptions are made about their ability to provide care at these events. Oklahoma statutes and regulations define the circumstances in which personnel may provide care and within what scope of practice.

The ability for personnel to perform within their scope of practice is found in Oklahoma statutes and regulations. The applicable statutes and regulations are detailed below.

The statute that allows personnel to provide care is:



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§63-1-2506. Performance of medical procedures.

Licensed and certified emergency medical personnel, while a duty to act is in effect, shall perform medical procedures to assist patients to the best of their abilities under the direction of a medical director or in accordance with written protocols, which may include standing orders, authorized and developed by the medical director and approved by the State Department of Health when not in conflict with standards approved by the State Board of Health, giving consideration to the recommendations of the Trauma and Emergency Response Advisory Council created in Section 44 of this act. Licensure, certification and authorization for emergency medical personnel to perform medical procedures must be consistent with provisions of this act, and rules adopted by the Board. Medical control and medical directors shall meet such requirements as prescribed through rules adopted by the Board.

(Added by Laws 1990, c. 320, § 10, emerg. eff. May 30, 1990. Amended by Laws 2005, c. 204, § 1, eff. July 1, 2005; Laws 2013, c. 229, § 66, eff. Nov. 1, 2013.)

To clarify, the Duty to Act referenced above applies to licensed ambulance services, not to certified and licensed personnel. This is detailed in Title 63 O.S. § 1-2504.1, which states:

§63-1-2504.1. Duty to act - Mutual aid - Exemption.

A. There is a required duty to act within the licensed area upon the acceptance of an ambulance service license. All licensed ambulance services shall respond appropriately, consistent with the level of licensure, when called for emergency service regardless of the patient's ability to pay.

The regulations that arise from these statutes are:

310:641-3-50. Requirement

- (a) While performing with a licensed ambulance service and/or a certified emergency medical response agency, emergency medical personnel shall perform authorized procedures, which may not exceed the level of license or certification.*

310:641-5-50. Requirement and utilization

- (a) Emergency medical personnel, licensed, certified, or otherwise authorized by this act, may perform procedures authorized while a duty to act is in effect, only under medical control of an identifiable medical director.*

To summarize the above references:



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* Individually certified and licensed personnel do not have a “duty to act”. Licensed ambulance services have that specific requirement.

* Personnel working at an ambulance service are able to perform within their scope of practice the procedures authorized by a medical director.

Regarding the private and corporate events; certified and licensed personnel are able to work these venues under the following regulations and conditions:

310:641-5-50. Requirement and utilization

- (b) Emergency medical personnel may be utilized by hospitals, health care facilities, ambulance services, and emergency medical response agencies. Health care facilities may include, but not limited to, nursing homes, doctor offices or clinics, organized industrial or private health facility services, athletic training facilities, or any other organized group who may legally render patient care.*
- (1) While performing at a hospital and/or a health care facility, emergency medical personnel shall be limited to authorized procedures of a specific written "job description" approved by a physician, and/or medical staff, of that facility.*

Essentially, this states that if certified or licensed persons are employed outside of an ambulance service or emergency medical response agency, they are to be limited to the procedures authorized by a physician approved job description. The physician continues to provide the medical oversight of the individual, and defines the scope of practice through a written job description.

Lastly, anytime a licensed person is rendering care, skills, or procedures when a physician is not providing oversight, this regulation must be followed:

310:641-5-50. Requirement and utilization

- (c) While performing under any other condition or situation, emergency medical personnel, licensed or certified by this act, may perform only to the level of care as described for the **Certified Emergency Medical Responder**, or in accordance with the Act.*



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When an EMT at any level is without the authorization of medical control, the only skills that may be performed are those within the **Emergency Medical Responder** scope of practice. These situations may be at these private and corporate events, or driving by an accident when not on duty. The scope of practice for an Emergency Medical Responder is:

310:641-5-61. Emergency medical responder

(c) Certified emergency medical responders may perform to the following level or standard of care:

(1) Patient assessment and triage;

(2) Basic wound management, including hemorrhage control;

(3) Bandaging and splinting of fractures;

(4) Basic life support (BLS) including use of the semi-automated external defibrillator (SAED);

(5) Upon approved standing order of local medical director, administer aspirin to patients complaining of chest pain;

(6) Such other skills contained within the Department of Transportation national standard first responder curriculum, and;

(7) Upon the approval of the Department, and recommendation of the Council, additional skills may be authorized upon the written request of a medical director.

Ultimately, the ability for licensed and certified personnel to perform within their respective scope of practice comes from a medical director. Do not assume your medical director has provided the authority to work outside of your agency.

Personnel that work at these private and corporate events need to ensure they have the oversight of a medical director, or limit the scope of practice to that of an Emergency Medical Responder.

Please feel free to contact our office you have questions or concerns by calling 405.271.4027, or emailing our office at ESystems@health.ok.gov.

2019 Oklahoma EMS License Renewal Application
Nationally Registered EMT Renewing as Oklahoma Intermediate:

Please print clearly or type and check ALL applicable boxes

FELONY STATEMENT

Have you been convicted of a felony since the last issuance of your license? YES NO

If "YES", submit with this application documentation that fully describes the offense: date of offense; copies of relevant court documents; disposition and current status.

Have any disciplinary actions been taken against you since your last certification? YES NO

I have read the memo Medical Control Requirements for Certified and Licensed Personnel and will not provide care above the level of First Aid, CPR and the use of an AED in cases where I have no Medical Direction

Last Name _____ First Name _____ MI _____

OK EMS License #: _____ National Registry #: _____ NR Exp. Date: ____/____/____

SSN: XXX/XX/____ DOB: ____/____/____ Gender: _____

Mailing Address: _____

City: _____ County: _____ State: _____ Zip: _____

Telephone #: _____ Email: _____

Current EMS Employer(s)/Job Title:

_____ / _____

I hereby affirm and declare that all statements contained on this application are true and correct. I understand that false statements may be sufficient cause by the Oklahoma State Department of Health to place on probation, suspend, or revoke any license issued. Upon written request by the Department, I agree to provide copies of all documents supporting fulfillment of the Oklahoma EMS renewal requirements.

Signature of Applicant

Date

CHECKLIST:

- Completed license renewal application including Con-Ed Summary Form and Verification of Skill Maintenance form.
- Copy of your National Registry Certification. (NREMT Card OR Certificate)
- Proof of a State approved 36 hour Intermediate refresher course during the previous license period. (attach a copy of a Certificate of Completion)
- The license renewal fee of \$27.50. **Check or Money Order (paid to OSDH)**
- EMS Instructors: Submit your instructor renewal by email to esystems@health.ok.gov



Mail to:
OSDH Emergency Systems
Attn: Financial Management
PO Box 268823
Oklahoma City, OK 73126-8823

Oklahoma Intermediate Verification of Skill Maintenance

Statement of satisfaction by physician for skills:

As physician, I do hereby affix my signature attesting to the continued competence of

_____ in all the following skills:
Applicant's Name (Print) OK License Number

The skill was performed to my satisfaction and determined by way of:

1. Field Evaluation
2. Practical performance examination
3. Other (please describe)_____

Indicate the Method of evaluation for each skill by checking one or more boxes in items 1-7.

	1	2	3
1 Patient Assessment/management (Medical and Trauma)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ventilatory Management Skills/Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2a Intubation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 IV Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Hemorrhage Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 OB/Gynecologic Skills/Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Spinal restriction – including cervical collar, vest-type extrication device and long spine boards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Fracture immobilization – including traction splints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physician Name (Print)

Physician Signature

Physician License # _____ State of _____



