**16 DEPARTMENT OF PUBLIC SAFETY**

**163 BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS)**

**CHAPTER 4: AIR AMBULANCE SERVICE LICENSES**

1. No air ambulance service shall administer emergency medical services unless it is duly licensed by the Board under these Rules. Licensure under this Chapter authorizes the licensee only to provide emergency medical care using an air ambulance and does not constitute authority to provide air transportation. Such authority must be obtained from the Federal Aviation Administration and the United States Department of Transportation.
2. **License Factors** – an air ambulance service license is issued for a specific:
3. Type of service - which may be:
   1. Scene Response Air Ambulance Service
   2. Transfer Air Ambulance Service or
   3. Restricted Response Air Ambulance Service (RRAAS). In order to be licensed as a Restricted Response Air Ambulance Service, an applicant must demonstrate to the Board that the limited scope of the proposed service will fulfill a unique and/or unmet need regarding the air transport of patients in the state.
      * 1. Only Ground Ambulance Services may apply for this type of license.
           1. Notwithstanding the requirements of this Chapter, in order to receive a license as a RRAAS, an applicant must comply with any and all restrictions or modifications placed upon the licensee by the Board, including, but not limited to:
4. The primary service area to which the service may provide emergency medical services; and
5. The type and medical condition of patients that may be transported by the licensee. RRAAS is limited to response to non-emergency medical calls unless a Scene Response Air Ambulance Service or Transfer Air Service is unavailable to respond to emergency medical calls in the RRAAS response areas or unless the applicant has a plan, approved by the Maine EMS Board.
6. Level of care
   1. Scene Response Air Ambulance Services and Transfer Air Ambulance Services must be licensed at the Paramedic level.
   2. Restricted Response Air Ambulance Services will be licensed and permitted at the same levels as their Ground Ambulance Service license.
7. Ownership
   1. Upon request of the Board, an applicant for or licensee of an air ambulance service license must provide the Board with the identity and legal status (e.g., municipality, corporation, Limited Liability Company, sole proprietorship) of the person or entity that holds or is making application for the license. Failure to provide this information may result in the application being treated as incomplete.
   2. The air ambulance service license will be issued in the name of the operator, individual or organization directly responsible for the medical care aspects of the service.
8. Base Location for Scene Response Air Ambulance & Transfer Air Ambulance Services
   1. Unless otherwise approved by Maine EMS, a service must be separately licensed for each base location from which it operates; or
   2. A service may apply for a single license to operate from multiple base locations provided it has a Service Medical Director and a single Quality Assurance / Quality Improvement program that is approved by the Board and the State Medical Director.
9. **Change in License Factors**

A service must receive a new license before changing any licensing factors.

1. **Approval of License**

Once a service's application for a new or renewed license has been accepted as complete by Maine EMS, Maine EMS shall grant, refuse, or conditionally grant the license within seventy days.

1. **Licensing Standards**
2. An application will not be accepted as complete unless it includes all materials required to be evaluated for licensure. To obtain a new license, an applicant must:
   1. Apply on forms available from Maine EMS.
   2. Submit a fee of $100.00.
   3. Demonstrate to Maine EMS that:
      * 1. The applicant has placed a notice, approved by Maine EMS, in the most widely circulated newspaper(s) serving the proposed service area(s). The notice must state:
3. The name and legal status of the entity making application.
4. The name of the proposed service
5. The type of service proposed
6. The level of care to be provided
7. The names of the municipalities within the primary response area of the proposed service
8. That the public is invited to make comment to Maine EMS regarding the proposed application, and that comments must be received by Maine EMS within 30 calendar days after the date of the notice's publication and,
9. The current mailing address of the Maine EMS office.
   * + 1. The applicant has made a detailed manual of policies and procedures available for reference in the flight coordination office and available for inspection by Maine EMS to assist with EMS system planning and resource coordination efforts. Personnel shall be familiar and comply with policies contained within the manual, which shall include, but not be limited to:
10. A written policy and procedure specifying the:
11. Service’s mission statement
12. Scope of care to be provided by the service in accordance with Medical Direction and Practices Board-approved protocols; and
13. Education, clinical experience, and competency requirements of the medical crew commensurate with the scope of care to be provided.
14. Notification phone numbers and access dispatch procedure, including identification of those who may request a mission and those who will approve missions

1. Capabilities of medical transport personnel
2. Type of aircraft vehicle(s) used and operational protocols specific to type
3. Coordination of medical protocols and operating practices with hospital and pre-hospital providers and other public safety agencies
4. Response and coverage area for the service
5. Preparation and stabilization of the patient
6. A safety program of policies and procedures specific to patient care.
7. Coordination of medical protocols and operating practices with those of the hospital and pre-hospital providers and public safety agencies with whom the service will interact
8. Ongoing familiarization for those ambulance and non-transporting services, public safety agencies, and hospital personnel with whom the air ambulance service may interact routinely.
9. Scene Response Services must have ongoing safety communications program consisting of integration with Public Safety Answering Points and other emergency dispatch facilities in the state.
10. Procedures for acceptance of requests, referrals, and/or denial of service for medically related reasons.
11. Geographical boundaries and features for the service area.
12. Service area maps shall be readily available.
13. Scheduled hours of operation.
14. Criteria for the medical conditions and indications or medical contraindications for flight.
15. Field triage criteria for all trauma patients that include anatomic, physiologic, and situational components identified in order to risk-stratify injury severity and guide decisions as to activation, destination, and transport modality.
16. Procedures for call verification and advisories to the requesting party.
17. Acceptable destinations and landing areas.
18. Procedures for medical crew assignments and notification including rosters of medical personnel.
19. Written policy that ensures that air medical personnel shall not be assigned or assume cockpit duties concurrent with patient care duties and responsibilities.
20. Communications procedures.
21. On-ground communications.
22. Flight cancellation procedures.
23. Mutual aid procedures.
24. Written plan that addresses the actions to be taken in the event of an emergency or patient crisis during transport operations.
25. Procedures for informing requesting party of flight procedures, anticipated time of helicopter arrival, and termination of flight.
26. Patient tracking procedures that shall assure air/ground position reports at intervals not to exceed ten (10) minutes (inflight).
27. Scene Response Services must have provisions for contemporaneous flight following and during all operations and a readily accessible post-accident incident plan as they relate to patient care.
28. Services that respond to incident scenes and/or support disaster response shall provide Helicopter Safety and Landing Zone Procedures in a written format to all public safety/law enforcement agencies and hospital personnel who interface with the medical service that includes but is not limited to the following:
    1. The identification, designation and preparation of appropriate landing zones
    2. Ground personnel safety in and around the aircraft
    3. Ground to air communications
    4. Victim recovery procedures in the post-crash or unanticipated incident
       * 1. The applicant possesses the equipment, required by these Rules, for the type of service and level of care proposed.

* + - 1. The applicant can provide personnel required by these Rules for the type of service and level of care proposed.
      2. An applicant for a Scene Response Air Ambulance Service or Restricted Response Air Ambulance Service must demonstrate full time dispatch capabilities.
      3. The applicant possesses two-way radio communications equipment and frequencies for the proposed type of service, including, but not limited to the hospital-ambulance frequencies utilized in the service area(s) pursuant to these Rules and the designated Maine EMS statewide frequency "155.385."
      4. Applicants for licensure must demonstrate liability coverage for injuries to persons and for loss or property damages resulting from negligence by the service or medical crew. A license holder should immediately notify Maine EMS and cease operations if the coverage required by this section is cancelled or suspended. Maine EMS will not issue an air ambulance service license to an air ambulance service unless the applicant for a license or the licensee has:
         1. Evidence of medical professional liability insurance that requires the insurer to compensate for injuries to persons or unintentional damage to property.
         2. Worker’s compensation coverage is required as defined by individual state regulating bodies.
      5. The applicant meets the quality assurance/quality improvement requirements of Chapter 18 of these Rules.
      6. The applicant has a physician medical director who is:

1. Licensed and authorized to practice as a physician in Maine and is board certified in a specialty consistent to the mission of the service and actively practices in the care and management of critically ill or injured adult and pediatric patients
2. Experienced in both air and ground emergency medical services and is familiar with the national consensus criteria of appropriate utilization of air medical and ground inter-facility critical care services
3. Responsible for supervising and evaluating the quality of medical care provided by the medical personnel and the program
4. Actively involved in the selection, training and recurrent education and practice of the flight medical crew and has expertise with the flight environment, including flight physiology and the management of diseases affected by altitude
5. Actively involved in the Quality Assurance / Quality Improvement (QA/QI) program for the service, including the review of all missions by a qualified physician and in administrative decisions affecting medical care provided by the service
6. Familiar with Maine EMS Protocols, the Maine Trauma System and the capabilities of referring and receiving hospitals
7. Knowledgeable of the capabilities and limitations of the aircraft used in the service; and,
8. Responsible to ensure that appropriate aircraft, medical crew, and equipment are provided for each mission based on a system of preflight patient evaluation for inter-hospital transports and an established protocol consistent with types of scene responses anticipated if so licensed.
9. Has established a plan for on-line medical direction if needed during transport.
   * + 1. If the application is for a new service or a change of service ownership: the applicant, if an individual is of good character, and if a partnership or corporation, its partners or principal officers are of good character. Four character references, written within the past year, must be submitted as a condition of meeting this requirement; none may be from a relative or employee of the applicant.
       2. If the application is for a restricted air ambulance service, the service has either (1) guaranteed continuity of care for the patient by entering into written agreements with the ambulance services that will transport its patients or (2) otherwise addressed these concerns in a plan approved by Maine EMS that includes as a component a written agreement of this nature with at least one ambulance service.
       3. The applicant has submitted a quality assurance plan that is subject to Maine EMS approval and that includes review of all flights by a qualified physician pursuant to these Rules.
       4. The applicant has established a service level Quality Assurance/Quality Improvement Committee (for approval under 32 M.R.S. §92-A).
       5. The applicant has designated a service director, who shall act as the point of contact for the service.
       6. The applicant has designated a person who serves as the training and education point of contact for the service.
       7. The applicant demonstrates that all medical crew members are appropriately trained and qualified.
       8. The applicant has identified the designated infection control officer for the proposed service. Pursuant to 42 U.S.C. §300ff-136, each employer of emergency response employees in the State of Maine must have a designated infection control officer (ICO) for the purposes of receiving notifications and responses and making requests under 42 U.S.C. Chapter 6A, Subchapter XXIV, Part G. The licensee shall provide the ICO name and contact information to Maine EMS, and promptly notify Maine EMS of any changes in ICO during the term of its license. Maine EMS will provide this information to the Department of Health and Human Services, Maine Center for Disease Control, Division of Infectious Disease.
       9. The applicant complies with the drugs and medication requirements in Chapter 6 of these Rules.
10. Except as provided in paragraph 3, below, a service license is issued for a period of 12 months. Maine EMS may issue a license that expires prior to the twelfth month and may prorate the licensing fee; if it is determined that such a change is in the best interest of the service and the system.
11. Effective January 1, 2020, initial and renewal service applications will be issued/renewed with a November 30, 2020 expiration date in order to establish a common month of expiration for all services. Maine EMS will prorate service and vehicle fees during the transition period.
12. Notwithstanding the notice requirements of §5(C) (1), Maine EMS may issue a temporary service license for up to 60 days to an applicant if Maine EMS determines that issuance of the temporary license will avert the disruption of emergency medical services in the primary service area(s) listed in the applicant’s application.
13. **Licensing Standards for Restricted Response Air Ambulance Services**
14. An application will not be accepted as complete unless it includes all materials required to be evaluated for licensure. To obtain a new license, an applicant must:
    1. Apply on forms available from Maine EMS.
    2. Demonstrate to Maine EMS that:
       * 1. The applicant has made a detailed manual of policies and procedures available for reference, which shall include, but not be limited to:
15. Education, clinical experience, and competency requirements of the medical crew commensurate with the scope of care to be provided;
16. Notification phone numbers and access dispatch procedure, including identification of those who may request a mission and those who will approve missions;
17. Type of aircraft vehicle(s) used and operational protocols specific to type;
18. Coordination of operating practices with hospital and pre-hospital providers and other public safety agencies;
19. Preparation and stabilization of the patient;
20. A safety program of policies and procedures specific to patient care;
21. Procedures for acceptance of requests, referrals, and/or denial of service for medically related reasons;
22. Criteria for the medical conditions and indications or medical contraindications for flight;
23. Acceptable destinations and landing areas;
24. Written policy that ensures that air medical personnel shall not be assigned or assume cockpit duties concurrent with patient care duties and responsibilities; and
25. Written plan that addresses the actions to be taken in the event of an emergency or patient crisis during transport operations.
    * + 1. Applicants for licensure must demonstrate liability coverage for injuries to persons and for loss or property damages resulting from negligence by the service or medical crew. A license holder should immediately notify Maine EMS and cease operations if the coverage required by this section is cancelled or suspended. Maine EMS will not issue a Restricted Response Air Ambulance service license unless the applicant for a license or the licensee has:
           1. Evidence of medical professional liability insurance that requires the insurer to compensate for injuries to persons or unintentional damage to property.
           2. Worker’s compensation coverage is required as defined by individual state regulating bodies.
        2. The applicant meets the quality assurance/quality improvement requirements of Chapter 18 of these Rules.
        3. The service has either (1) guaranteed continuity of care for the patient by entering into written agreements with the ambulance services that will transport its patients or (2) otherwise addressed these concerns in a plan approved by Maine EMS that includes as a component a written agreement of this nature with at least one ambulance service.
26. Except as provided in paragraph 3 below, a service license is issued for a period of 12 months. Maine EMS may issue a license that expires prior to the twelfth month if it is determined that such a change is in the best interest of the service and the system.
27. Maine EMS may issue a temporary service license for up to 60 days to an applicant if Maine EMS determines that issuance of the temporary license will avert the disruption of emergency medical services in the primary service area(s) listed in the applicant’s application.
28. **Renewal of Service License**
29. Renewal of a service license must be obtained each year, not later than the twelfth month after the license is issued. If Maine EMS and the service agree, a license may be renewed in less than a year, and the licensing fee prorated in order to shift the service's licensing anniversary.
30. A licensee shall submit an application for renewal prior to the expiration date of the license. An application will not be accepted as complete unless it includes all materials required to be evaluated for licensure. A service may apply for a renewal license for up to ninety (90) days after the date of expiration. The ninety-day period does not postpone the expiration date of the license. An air ambulance service with an expired license cannot provide emergency medical services until a renewed license has been issued. An application submitted more than 90 days after the license expiration date shall be considered an application for a new license and subject to all requirements governing new applications.
31. In order to obtain and maintain a license renewal, a service must, for each base location:

* 1. Apply on forms available from Maine EMS
  2. Submit a fee of $100.00
  3. Demonstrate, as required by Maine EMS, that it meets the licensure requirements called for in these Rules
  4. Scene Response and Transfer Air Ambulance Services must be fully accredited by a national or international accreditation service as recognized by the State, provided the accreditation service meets the following minimum standards:
     + - 1. Provides accreditation for no more than three consecutive years without an updated inspection and reaccreditation.
         2. Has a multi-disciplinary Board of Directors representing medical transport organizations.
         3. Uses trained site-surveyors with experience in medical transport at the level of accreditation and license.
         4. Assures services that have identified standards deficiencies will implement corrective action or improvement plans to correct any deficiencies.
         5. Has an open process that encourages and accepts comments on changes to its accreditation standards.
         6. Provides transparency to the public on its standards, accreditation process, list of accredited programs, and policies and procedures.
         7. Maintains insurance (General liability, Medical Professional Liability, Directors & Officers and Travel) and be able to present its current certificates of insurance to Maine EMS.

* 1. Scene Response Air Ambulance Services must submit on an annual basis a utilization report to Maine EMS and the Medical Direction and Practices Board (MDPB) that includes at minimum:
     + 1. Medically related data from all flights discharged from receiving hospitals in less than 24 hours; and
       2. Clinical performance data as requested by the MDPB.

1. **Renewal of Service License for a Restricted Response Air Ambulance Service**
2. In order to obtain and maintain a license renewal, a service must, for each base location:

* 1. Apply on forms available from Maine EMS; and
  2. Demonstrate, as required by Maine EMS, that it meets the licensure requirements called for in these Rules.

1. **Personnel Requirements for Air Ambulance Service Licensees**
2. Scene Response Air Ambulance Services and Transfer Air Ambulance Services
3. The flight medical crew must consist of at least two people medically certified/licensed by the State. One of these crew members must be licensed by Maine EMS or designated as a flight nurse pursuant to 32 M.R.S §83 and must have:
   * + 1. Successfully completed a course based upon standards approved by the Board that includes, but is not limited to, altitude physiology;
       2. Current certifications in any specialty programs as required, and published, by the Board.
       3. Scene Response Air Ambulance Service must provide one crew member licensed at the Paramedic level while responding to scene requests.
       4. All paramedics must have completed the Maine EMS Paramedic Interfacility Transport Program training.
4. Personnel in addition to the Paramedic will be utilized consistent with the patient's needs.
5. Restricted Response Air Ambulance Service
   1. The flight medical crew must consist of at least one EMS Person, Registered Nurse, Advanced Practice Registered Nurse, Physician, or Physician’s Assistant, licensed by the State, at or above the level to which the service is licensed.
   2. Personnel in addition to the person identified in §7(2)( A) of this chapter may be utilized consistent with the patient's needs.
6. A service must report to Maine EMS the addition of any licensed EMS person to its roster of responding personnel prior to that person responding on behalf of the service and must report the termination or resignation of any EMS provider from the service within 5 days of the termination or resignation of the provider. Notification to Maine EMS may be made electronically or by mail.
7. Pursuant to 42 U.S.C. §300ff-136, each employer of emergency response employees in the State of Maine must have a designated infection control officer (ICO) for the purposes of receiving notifications and responses and making requests under 42 U.S.C. Chapter 6A, Subchapter XXIV, Part G. The licensee shall provide the ICO name and contact information to Maine EMS, and promptly notify Maine EMS of any changes in ICO during the term of its license. Maine EMS will provide this information to the Department of Health and Human Services, Maine Center for Disease Control, Division of Infectious Disease.
8. **Service Availability for Response for Scene Response & Transfer Air Ambulance Services**
9. An air ambulance service must provide prompt notification to the requesting agency of the air ambulance’s estimated time of arrival to the scene of a medical emergency or interfacility transfer pick-up location. Changes in estimated time of arrival will be immediately communicated to the requesting agency by the air ambulance service.
10. Failure of a service to comply with these response requirements will be reviewed by Maine EMS to determine if corrective action is required. Maine EMS shall notify the service of any required corrective action and shall set a reasonable amount of time for the service to carry out this action.
11. **Patient Care Report**

For each request for service, or for each patient when more than one patient is involved in a call, an air ambulance service must complete and submit an electronic Maine EMS patient care report as specified by Maine EMS, within twenty-four hours. Additionally, a Restricted Response Air Ambulance Service must indicate in the electronic run reporting system which responses were air ambulance responses.

1. **Pilot Projects**

For the purpose of evaluating the workability and appropriateness of incorporating a particular emergency medical treatment technique or a type of equipment into any licensure level, the Board may elect to exempt a service from the requirements of the relevant licensure level so as to permit the service to utilize the designated techniques or equipment on an experimental basis. Such authorizations may be continued at the discretion of the Board. Such authorizations should not be construed as levels of licensure.

1. **Scene Response & Transfer Air Ambulance Vehicles**
2. Except as otherwise exempted by 32 M.R.S. §82 and §12 of this chapter, no aircraft shall provide emergency medical services within Maine unless it is licensed as an ambulance under these Rules.
3. An air ambulance vehicle license is valid for a period of one year, starting from the month the service license is issued. Maine EMS will ensure concurrent expiration dates for service and vehicle licenses.
4. An aircraft licensed as an air ambulance must be maintained in a clean and sanitary condition, free from interior corrosion, dirt, or contaminating foreign matter.
5. An air ambulance license is issued to a particular service and for a particular vehicle, except as permitted in Chapter 4 §12.2 of these Rules. If a service is required to relicense under Chapter 4 §3 of these Rules because of a change of ownership, then all of the service's vehicle licenses end, and the service must apply for new vehicle licenses. The fee for licensing a vehicle is $60.00.
6. When a service acquires a new or used air ambulance under Chapter 4 §12 of these Rules, it shall apply to Maine EMS on forms available from Maine EMS and shall pay the vehicle licensing fee necessary to license the vehicle . Within 45 days, Maine EMS shall issue, or decline to issue, a license for the vehicle.
7. At least once each year, Maine EMS shall inspect each air ambulance aircraft to be sure that it is clean and otherwise in conformity with these Rules. If a vehicle does not pass inspection and its continued operation presents a hazard to health or safety, the Board may suspend its license to provide emergency medical services at once consistent with Maine Law (See 5 M.R.S. §10004 and 4 M.R.S. §184). Alternatively, if the continued operation of the air ambulance aircraft at the level of care for which it is permitted pursuant to Chapter 4 §2(2) of these Rules presents a hazard to health or safety, the Board may immediately suspend the aircraft’s level of care permit consistent with Maine law (see 5 M.R.S. §10004 and 4 M.R.S. §184) and allow the aircraft to operate at the next lowest level of care for which it is properly equipped. If the deficiencies are not such as to require the immediate suspension of the aircraft’s license to provide emergency medical services or the immediate suspension of its level of care permit, then Maine EMS shall notify the operator of the deficiencies and set a reasonable amount of time in which the operator may continue to provide emergency medical services while bringing it into conformity with the law and Rules. If the aircraft is not brought into conformity within the time set, Maine EMS may refuse to renew, or seek revocation of, the aircraft’s license to provide emergency medical services.
8. **Scene Response & Transfer Air Ambulance Vehicle Licensing Requirements**
9. Permanent Air Ambulance Vehicles - Any air ambulance vehicle used by a licensed air ambulance service for providing emergency medical services more than four times in any, one-year period, must be licensed to the respective service. An air ambulance vehicle may be licensed to more than one service, with each service independently responsible for its own licensure and use of the vehicle.
10. Temporary Air Ambulance Vehicles – Any air ambulance vehicle used for patient transport by a licensed air ambulance service no more than four times in any one-year period will be considered to be duly licensed to that service by the Board if it meets the requirements of this chapter. Within 7 days after such a transport, the service must notify Maine EMS of the date, time, and origin/destination points of the transport as well as the type and registration number of the aircraft and the reason for its use instead of a “permanent” vehicle. Maine EMS will place this information in the service file and may inspect the aircraft.
11. **Scene Response and Transfer Air Ambulance Vehicle Design Requirements**
12. Maine EMS requires that an aircraft licensed by the Board must:
    1. Be configured to allow medical attendants to have full-body patient view and access, and access to equipment and supplies in order to initiate both basic and advanced life support emergency procedures;
    2. Be designed and configured for patient placement that allows for safe crew egress without compromising patient stability during loading, unloading or in-flight operations;
    3. Be configured to allow operation of the aircraft doors from the interior and that the doors be capable of being fully opened and held by a mechanical device;
    4. Have sufficient space to accommodate at least one patient on a stretcher, two medical attendants, and the medical equipment required;
    5. Be equipped with a patient stretcher and patient securing systems/straps capable of accommodating adult and pediatric patients. The stretcher must be designed to support effective cardiopulmonary resuscitation (CPR) or a backboard or equivalent device to achieve CPR must be readily available;
       * 1. Patients under 60 pounds (27 kg.) shall be provided with an appropriately sized restraining device (for patient's height and weight) which is further secured by a locking device;
         2. All patients under 40 lbs. must be secured in a five-point safety strap device that allows good access to the patients from all sides and permits the patient’s head to be raised at least 30 degrees;
         3. There must be some type of restraining device within an isolette to protect the patient in the event of air turbulence and the isolette must be capable of being opened from its secured position in order to provide full access to the infant in the event of complicated airway problems or extrication from the isolette becomes necessary;
         4. There shall be access and necessary space to ensure any on-board patient's airway is maintained and to provide adequate ventilatory support from the secured, seat-belted position of medical transport personnel.
    6. Be equipped with safety belts and securing restraints adequate to stabilize and secure any patient, medical attendants, and equipment. Medical attendants must be able to wear seat belts while having access to the patient's head and upper body;
    7. Be large enough to accommodate loading of a stretcher without rotating it more than 30 degrees about the longitudinal axis or 45 degrees about the lateral axis of the patient and does not compromise functioning of monitoring systems, intravenous lines and manual or mechanical ventilation;
    8. Be equipped with climate controls capable of preventing adverse effects on patients or medical personnel on board;
    9. Be configured so that operational controls and communications equipment are protected from intended or accidental interference by the patient, medical transport personnel, medical equipment or medical supplies;
    10. Be designed and configured so that the head-strike envelope for the patient and medical attendants is clear of objects or surfaces that could cause injury in the event of air turbulence or sudden hard landing. Medical crews in rotorcraft must wear helmets.
    11. Be pressurized if an altitude is to be flown which would otherwise compromise the patient's condition.
    12. Be equipped with an oxygen system with adequate capacity and available oxygen for every mission. Oxygen tanks must be secured to prevent movement. No oxygen tank may be secured on the area of the stretcher designed for patient placement.

Medical transport personnel will be able to determine if oxygen is “on” by in-line pressure gauges mounted in the patient care area indicating quantity of oxygen remaining and measurement of liter flow;

Each gas outlet will be clearly marked for identification, and oxygen flow can be stopped at or near the oxygen source from inside the aircraft or ambulance;

Oxygen flow meters and outlets must be padded, flush mounted, or so located to prevent injury to medical transport personnel;

There must be a back-up source of oxygen (of sufficient quantity to get safely to a facility for replacements) in the event the main system fails. This back-up source can be the required portable tank as long as the portable tank is accessible in the patient care area during flight and must be located and. Under no circumstances will a portable tank be located between the patient’s legs.

* 1. Be designed so that hangers/hooks are available to secure IV solutions, or a mechanism is provided for delivery of high flow fluids. IV hooks must be padded, flush mounted, or so located to prevent head trauma to the medical transport personnel in the event of a hard landing in the aircraft;
  2. Be designed so that medications, medical supplies and equipment - consistent with the service’s scope of care and necessary for patient medical care - are accessible to the flight medical crew while they are secured in seatbelts;
  3. Be designed so that the cardiac monitor, defibrillator and external pacemaker displays are visible and that the equipment is secured and positioned to provide easy access by the flight medical crew while they are secured in seatbelts. Extra batteries or other power source must be available;
  4. Be designed and configured so that the service's mission and ability to transport two or more patients does not compromise the airway or stabilization or the ability to perform emergency procedures on any on-board patient, and be designed to provide access for simultaneous airway management if there is a two-patient configuration;
  5. Be designed so that the floor, sides, and ceiling in the patient compartment have a surface capable of being cleaned and disinfected in accordance with Occupational Safety and Health Administration regulations.
  6. Have overhead illumination at the patient level sufficient for patient care.
  7. Carry radios capable of communicating: with all Maine hospitals which may be over flown; Maine EMS Statewide frequency 155.385; with the flight service dispatch; and with personnel on the ground if scene pickups are routinely conducted. Headset equipment for pilot/medical crew communication is required if such communication would not otherwise be possible.
  8. Be capable of communications utilizing the designated Maine EMS statewide frequency "155.385".
  9. Be equipped with an electrical power source(s) that will accommodate commonly carried medical equipment (AC or DC powered) without compromising the operation of any aircraft electrical equipment and that is not dependent upon a portable battery.
  10. Be configured and equipped so as to prevent interference with medical systems.
  11. Be equipped with a suction aspirator that must be powered by the aircraft’s electrical or engine-vacuum system and that must be capable of providing a free air flow of at least 20 lpm and achieving a minimum of 300 mm. Hg within 4 seconds after the suction tube is closed.

1. **Air Ambulance Service Equipment Requirements**
2. All medical equipment and medical supplies carried on an air ambulance vehicle shall be latex free.
   1. Transfer Air Ambulance Services must utilize equipment consistent with the patient's needs and must carry as a minimum, that equipment listed in these Rules.
   2. Scene Response Air Ambulance Services must comply with the air ambulance equipment requirements included in these Rules unless an air ambulance service demonstrates to Maine EMS that such equipment is not practicable for air ambulance services in general or that a substitute piece of equipment would be more appropriate in an air ambulance. All medical equipment and supplies must be secured.
   3. Restricted Response Air Ambulance Services must carry with them on the air ambulance any equipment necessary to continue patient care.
3. **Duty to Report**
4. A licensee or an applicant for licensure under this chapter shall notify the Board in writing within 10 days of a:

* 1. Change of name or address
  2. Criminal conviction
  3. Revocation, suspension, or other disciplinary action taken in this or any other jurisdiction against any occupational or professional license held by the applicant or licensee; or,
  4. Material change in the conditions or qualifications set forth in the original application for licensure submitted to the Board.

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December 25, 1982 - Sec. 2.31, 3131, 6.311, 6.63 and 6.73

January 1, 1984 - Sec. 1, 2, 3, 5, 6, 8.32, 10.2, 10.3, 11.1066 and 11.1067

April 30, 1985 - Sec. 1, 2.846.222, 6.332, 9.313, 8.3216 and 9.11

January 1, 1986 - Sec. 1, 6. 8.15, 8.2, 8.3, 8.4 and 11.103

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