Emergency Medical Services Regulatory Board

Schedule of Operations

Ambulance Service: LIFE LINK III, ST. PAUL

EMS #: 359

Region: Metropolitan

Service Level: Specialized Advanced

Licensee operates under the following two separate schedules of operation:

I. a. Licensee must provide pre-arranged mobile intensive care transport service, available 24 hours per day within the State of Minnesota. This service shall be limited to: (a) interfacility transfers either to or between tertiary care medical facilities\(^1\); and (b) patients determined by medical control to be in need of mobile intensive care services during transport. These patients will be critically ill or injured, referred by a physician, requiring specialized and intensive ongoing monitoring and therapy en route that is not routinely available/provided by standard advanced ambulance licensees and beyond the capacity of the local provider. The intent of this limitation (b) is to define mobile intensive care as a level of care that duplicates the level of care available in an in-patient intensive care setting. Patients not requiring this level of care during pre-hospital transport are specifically excluded from provision of this license.

b. All ambulances operated by the licensee shall meet and be equipped according to the standards defined in Minnesota Rule, Chapter 4690 for advanced ambulance service. In addition to the minimum standards, the licensee shall routinely carry or have available for immediate use the following equipment:

(a) medications as specified in writing by the licensee’s medical director;
(b) compressed gas and related equipment;
(c) endotracheal intubation equipment in adult, child and infant sizes;
(d) invasive pressure monitor;
(e) non-wire line telephone;
(f) intra-aortic balloon pump;
(g) mechanical ventilators for adult and pediatric patients and;
(h) other equipment as specified by the Medical Director and documented in licensee’s files, according to the provisions of this license.

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\(^1\)A medical care facility the equivalent of comprehensive specialized services as described by the Joint Commission on Accreditation of Hospitals, Hospital Categorization Guidelines.
c. The licensee shall utilize personnel trained in the use of the equipment specified above including paramedics, and registered nurses, as appropriate. If no license or registration process has been established by the Emergency Medical Services Regulatory Board for a particular category of skills, personnel exercising those skills shall be certified in writing by the licensee’s Medical Director as competent in that skill, with particular reference to the following:

(a) initial training and skill-testing standards used;
(b) continuing education and quality assurance standards used;
(c) specification of any specialized equipment not otherwise authorized for use by the licensee’s non-physician personnel; and
(d) names and certification level and certificate # of personnel so certified, by skill category.

Current documentation of such certification shall be maintained in the licensee’s files, and current copies of such documentations shall be submitted for review by the Emergency Medical Services Regulatory Board.

d. No ambulance substations may be established without the required licensure process outlined in Minnesota Statutes 144.802, subd. 3.

e. Licensee shall request permission of the Emergency Medical Services Regulatory Board in writing for prior approval on any new or additional service to be provided, or changes in this schedule, which may be subject to the provisions of a change in type of service as designated in Minnesota Statute governing ambulance operation within Minnesota.

f. This schedule is subject to review by the Emergency Medical Services Regulatory Board, at a minimum, during biennial licensure renewal.

g. Licensee shall display this schedule with the current license issued by the Emergency Medical Services Regulatory Board.

II. a. This schedule of operations is limited to pre-arranged ALS and BLS interfacility Ambulance transportation from health facilities\(^2\) within the area designated in b. below. The transport must be requested by a physician, acting personally or through a registered nurse who is acting as a representative of the medical facility of origin, and requesting transportation to any Life Link III consortium member hospital\(^3\). Any request for interfacility ambulance transportation shall be pre-arranged for at least 30 minutes after receipt of the initial request for service. Exception to this provision shall be noted for the Emergency Medical Services Regulatory Board review. The use of red lights and siren are prohibited en route to pick-up location. This will be appropriately noted on the required trip report form as to time called, time en route, and arrival at scene.

\(^2\)For purposes of this schedule of operations, a health facility means any facility licensed under 144A.51 (Hospitals, Nursing Homes, Boarding Care Homes, Psychiatric Hospitals, Outpatient Surgical Centers and Supervised Living Facilities). In addition to the facilities in 144A.51 the transportation of patients may also include facilities offering health care to the general public in which the transportation is being requested by a licensed health care professional.

\(^3\)Consortium Members Hospitals of this licensee include Abbott Northwestern Hospital, Regions Hospital, Fairview-University Medical Center and Clinic and Childrens Health Care, Minneapolis.
b. Licensee may provide interfacility ambulance service to the primary service area within the following counties as identified below:

Hennepin, Ramsey

All of Hennepin County with the exception of Minnetrista, St. Bonifacious, Mound, Chanhassen, and Shorewood.

All of Ramsey County with the exception of White Bear Lake, Gem Lake, North St. Paul, Maplewood, and White Bear Township.

c. Equipment carried by vehicles during interfacility transports shall be consistent with current Minnesota Rules governing ambulance operations within Minnesota.

d. Licensee shall comply with all applicable rules governing ambulance services, including provisions of any local ordinance in effect approved by the Emergency Medical Services Regulatory Board.

e. All ALS interfacility trip report forms shall be forwarded to the Emergency Medical Services Regulatory Board for compliance review, as determined by the Emergency Medical Services Regulatory Board.

f. Licensee shall request permission of the Emergency Medical Services Regulatory Board, in writing, for prior approval on any new or additional service to be provided, or changes in this schedule, which may be subject to the provisions of a change in type of service as designated in Minnesota Statute governing ambulance operation within Minnesota.

g. This schedule is subject to review by the Emergency Medical Services Regulatory Board, at a minimum, during biennial licensure renewal.

h. Licensee shall display this schedule with the current license issued by the Emergency Medical Services Regulatory Board.

Effective Date (Part I): 10/96
Effective Date (Part II): 9/10/90

Reviewed 5/1/96