

NOTICES OF EXEMPT RULEMAKING

The Administrative Procedure Act requires the *Register* publication of the rules adopted by the state's agencies under an exemption from all or part of the Administrative Procedure Act. Some of these rules are exempted by A.R.S. §§ 41-1005 or 41-1057; other rules are exempted by other statutes; rules of the Corporation Commission are exempt from Attorney General review pursuant to a court decision as determined by the Corporation Commission.

NOTICE OF EXEMPT RULEMAKING

TITLE 9. HEALTH SERVICES

CHAPTER 25. DEPARTMENT OF HEALTH SERVICES EMERGENCY MEDICAL SERVICES

[R05-316]

PREAMBLE

- 1. Sections Affected**
Exhibit 1
- 2. The statutory authority for the rulemaking, including both the authorizing statute (general) and the statutes the rules are implementing (specific):**
Authorizing statutes: A.R.S. §§ 36-136(F), 36-2202(A)(4), and 36-2209(A)(2)
Implementing statutes: A.R.S. §§ 36-2204(8) and 36-2205(A)
Statute or session law authorizing the exemption: A.R.S. § 36-2205(C)
- 3. The effective date of the rules:**
September 1, 2005
- 4. A list of all previous notices appearing in the *Register* addressing the exempt rule:**
None
- 5. The name and address of agency personnel with whom persons may communicate regarding the rulemaking:**

Name:	Gene Wikle, Bureau Chief
Address:	Arizona Department of Health Services Bureau of Emergency Medical Services 150 N. 18th Ave., Suite 540 Phoenix, AZ 85007
Telephone:	(602) 364-3150
Fax:	(602) 364-3568
E-mail:	wiklee@azdhs.gov
Or	
Name:	Kathleen Phillips, Rules Administrator
Address:	Arizona Department of Health Services Office of Administrative Rules 1740 W. Adams, Suite 202 Phoenix, AZ 85007
Telephone:	(602) 542-1264
Fax:	(602) 364-1150
E-mail:	phillik@azdhs.gov
- 6. An explanation of the rule, including the agency's reasons for initiating the rule:**
The drug lists in Exhibit 1 to A.A.C. R9-25-503 establish the drugs authorized for administration by different levels of emergency medical technicians (EMTs) and establish the minimum supply level for each drug required to be carried in an ambulance drug box. In this rulemaking, the Arizona Department of Health Services (ADHS) is adding two

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optional drugs to the EMT-P and Qualified EMT-I Drug List in Exhibit 1—Etomidate, a sedation agent, and Succinylcholine, a paralytic agent. Adding Etomidate and Succinylcholine to the EMT-P and Qualified EMT-I Drug List will enable EMS Providers to allow their EMT-Paramedics (EMT-Ps) to perform rapid sequence intubation (RSI), an advanced airway skill that some Arizona EMS Providers may consider beneficial for the care of their patients. In April 2003, the Emergency Medical Services Council and the Medical Direction Commission, two of the statutory committees that advise ADHS, recommended that the EMT-P scope of practice be expanded to include RSI as an optional procedure. Adding Etomidate and Succinylcholine to the EMT-P and Qualified EMT-I Drug List as optional drugs is consistent with these recommendations.

ADHS views RSI as an important prehospital tool, the safe and appropriate use of which requires a tremendous amount of time, resources, and dedication. Concurrently with this rulemaking, ADHS is issuing a substantive policy statement clarifying EMT-Ps' authority to perform RSI, a guidance document containing ADHS's recommendations for EMT-P performance of RSI in the prehospital EMS environment, a guidance document drug profile for Etomidate, and a guidance document drug profile for Succinylcholine. Ultimately, whether an EMS Provider's EMT-Ps are authorized to perform RSI and how the EMS Provider's RSI program is structured and implemented falls to the discretion of the EMS Provider's administrative medical director.

7. A reference to any study relevant to the rule that the agency reviewed and either relied on in its evaluation of or justification for the rule or did not rely on in its evaluation of or justification for the rule, where the public may obtain or review each study, all data underlying each study, and any analysis of each study and other supporting material:

Not applicable

8. A showing of good cause why the rule is necessary to promote a statewide interest if the rule will diminish a previous grant of authority of a political subdivision of this state:

Not applicable

9. The summary of the economic, small business, and consumer impact:

Not applicable

10. A description of the changes between the proposed rules, including supplemental notices, and final rules (if applicable):

Not applicable

11. A summary of the comments made regarding the rule and the agency response to them:

Not applicable

12. Any other matters prescribed by statute that are applicable to the specific agency or to any specific rule or class of rules:

Not applicable

13. Incorporations by reference and their location in the rules:

None

14. Was this rule previously made as an emergency rule? If so, please indicate the Register citation:

No.

15. The full text of the rules follows:

TITLE 9. HEALTH SERVICES

CHAPTER 25. DEPARTMENT OF HEALTH SERVICES
EMERGENCY MEDICAL SERVICES

ARTICLE 5. MEDICAL DIRECTION PROTOCOLS FOR EMERGENCY MEDICAL TECHNICIANS

Section

Exhibit 1. EMT-P and Qualified EMT-I Drug List; EMT-I Drug List; EMT-B Drug List

Arizona Administrative Register / Secretary of State
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ARTICLE 5. MEDICAL DIRECTION PROTOCOLS FOR EMERGENCY MEDICAL TECHNICIANS

Exhibit 1. EMT-P and Qualified EMT-I Drug List; EMT-I Drug List; EMT-B Drug List

EMT-P AND QUALIFIED EMT-I DRUG LIST

AGENT	MINIMUM SUPPLY
ADENOSINE	30 mg
ALBUTEROL SULFATE * (sulfite free)	10 mg
AMIODARONE (optional)	300 mg
ASPIRIN	324 mg
ATROPINE SULFATE	4 prefilled syringes, total of 4 mg 8 mg multidose vial (1)
CALCIUM CHLORIDE	1 g
CHARCOAL, ACTIVATED (without sorbitol)	50 g
DEXAMETHASONE (optional)	8 mg
DEXTROSE	50 g
DIAZEPAM	20 mg
DIAZEPAM RECTAL DELIVERY GEL (optional)	20 mg
DIPHENHYDRAMINE HCl	50 mg
DILTIAZEM (optional)	25 mg
DOPAMINE HCl	400 mg
EPINEPHRINE HCl, 1:1,000 solution	2 mg 30 mg multidose vial (1)
EPINEPHRINE HCl, 1:10,000 solution	6 mg
<u>ETOMIDATE (optional)</u>	<u>80 mg</u>
FUROSEMIDE or If FUROSEMIDE is not available, BUMETANIDE	100 mg 4 mg
GLUCAGON	2 mg
IPRATROPIUM BROMIDE * 0.02%	5 mL
LIDOCAINE HCl IV	3 prefilled syringes, total of 300 mg 1 g vials or premixed infusion, total of 2 g
MAGNESIUM SULFATE	5 g
METHYLPREDNISOLONE SODIUM SUCCINATE	250 mg

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MIDAZOLAM (Versed®) (optional)	10 mg
MORPHINE SULFATE	20 mg
NALMEFENE HCl (optional)	4 mg
NALOXONE HCl	10 mg
NITROGLYCERIN TABLETS or NITROGLYCERIN SUBLINGUAL SPRAY	1 bottle 1 bottle
OXYTOCIN (optional)	10 units
PHENYLEPHRINE NASAL SPRAY 0.5%	1 bottle
SODIUM BICARBONATE 8.4%	100 mEq
<u>SUCCINYLCHOLINE (optional)</u>	<u>400 mg</u>
THIAMINE HCl	100 mg
VASOPRESSIN (optional)	40 units
VERAPAMIL HCl	10 mg
NITROUS OXIDE (optional)	Nitrous oxide 50% / Oxygen 50% fixed ratio setup with O ₂ fail-safe device and self-administration mask, 1 setup
SYRINGES	1 mL tuberculin (2) 3 mL (4) 10-12 mL (4) 20 mL (2) 50-60 mL (2)
FILTER NEEDLES	5 micron (3)
NON-FILTER NEEDLES	assorted sizes
INTRAVENOUS SOLUTIONS: (Bulk restricts inclusion of all fluids in drug box)	
DEXTROSE, 5% in water	250 mL bag (1)
LACTATED RINGER'S	1 L bag (4)
NORMAL SALINE	1 L bag (4) 250 mL bag (3) 50 mL bag (2)

* Administer by nebulizer

Note: No change

EMT-I DRUG LIST

No change

EMT-B DRUG LIST

No change