§ 70411. Basic Emergency Medical Service, Physician on Duty, Definition.
Basic emergency medical service, physician on duty, means the provision of emergency medical care in a specifically designated area of the hospital which is staffed and equipped at all times to provide prompt care for any patient presenting with urgent medical problems.

§ 70413. Basic Emergency Medical Service, Physician on Duty, General Requirements.
(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the administration and medical staff where such is appropriate.
(b) The responsibility and the accountability of the emergency medical service to the medical staff and administration shall be defined.
(c) The emergency medical service shall be so located in the hospital as to have ready access to all necessary services.
(d) A communications system employing telephone, radiotelephone or similar means shall be in use to establish and maintain contact with the police department, rescue squads and other emergency services of the community.
(e) The emergency medical service shall have a defined emergency and mass casualty plan in concert with the parent hospital’s capabilities and the capabilities of the community serviced.
(f) The hospital shall require continuing education of all emergency medical service personnel.
(g) Medical records shall be maintained on all patients presenting themselves for emergency medical care. These shall become part of the patient’s hospital medical record. Past hospital records shall be available to the emergency medical service.
(h) An emergency room log shall be maintained and shall contain at least the following information related to the patient: name, date, time and means of
arrival, age, sex, record number, nature of complaint, disposition and time of departure. The name of those dead on arrival shall be entered in the log.

(i) All medications furnished to patients through the emergency service shall be provided by a pharmacists or an individual lawfully authorized to prescribe. Such medications shall be properly labeled and all required records shall be maintained in accordance with state and federal laws.

(j) Each Basic Emergency Medical Service shall be identified to the public by an exterior sign, clearly visible from public thoroughfares. The wording of such signs shall state: BASIC EMERGENCY MEDICAL SERVICE, PHYSICIAN ON DUTY.

(k) Standardized emergency nursing procedures shall be developed by an appropriate committee of the medical staff.

(l) A list of referral services shall be available in the basic emergency service. This list shall include the name, address and telephone number of the following:

1. Police department.
2. Antivenin service.
3. Burn center.
4. Drug abuse center.
5. Poison control information center.
6. Suicide prevention center.
7. Director of the State Department of Health or his designee.
8. Local health department.
10. Emergency psychiatric service.
11. Chronic dialysis service.
12. Renal transplant center.
15. Radiation accident management service.
16. Ambulance transport and rescue service.
17. County coroner or medical examiner.

(m) The hospital shall have the following service capabilities:

1. Intensive care service with adequate monitoring and therapeutic equipment.
2. Laboratory service with the capability of performing blood gas analysis and electrolyte determinations.
3. Radiological service shall be capable of providing the necessary support for the emergency service.
4. Surgical services shall be immediately available for life-threatening situations.
5. Postanesthesia recovery service.
(6) The hospital shall have readily available the services of a blood bank containing common types of blood and blood derivatives. Blood storage facilities shall be in or adjacent to the emergency service.

(n) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70415. Basic Emergency Medical Service, Physician on Duty, Staff.
(a) A physician trained and experienced in emergency medical services shall have overall responsibility for the service. He or his designee shall be responsible for:
(1) Implementation of established policies and procedures.
(2) Providing physician staffing for the emergency services 24 hours a day who are experienced in emergency medical care.
(3) Development of a roster of specialty physicians available for consultation at all times.
(b) All physicians, dentists and podiatrists providing services in the emergency room shall be members of the organized medical staff.
(c) A registered nurse trained and experienced in emergency nursing care shall be on duty at all times.
(d) A registered nurse trained and experienced in emergency nursing care shall be on duty at all times.
(e) There shall be sufficient other licensed nurses and skilled personnel as required to support the services offered.

§ 70417. Basic Emergency Medical Service, Physician on Duty, Equipment and Supplies.
All equipment and supplies necessary for life support shall be available, including but not limited to, airway control and ventilation equipment, suction devices, cardiac monitor defibrillator, pacemaker capability, apparatus to establish central venous pressure monitoring, intravenous fluids and administration devices.

§ 70419. Basic Emergency Medical Service, Physician on Duty, Space.
(a) The following space provisions and designations shall be provided:
(1) Treatment room.
(2) Cast room.
(3) Nursing station.
(4) Medication room.
(5) Public toilets.
(6) Observation room.
(7) Staff support rooms including toilets, showers and lounge.
(8) Waiting room.
(9) Reception area.
(b) Observation beds in the emergency medical service shall not be counted in the total licensed bed capacity of the hospital.

§ 70451. Comprehensive Emergency Medical Service Definition.
Comprehensive Emergency medical service means the provision of diagnostic and therapeutic services for unforeseen physical and mental disorders which, if not promptly treated, would lead to marked suffering, disability or death. The scope of services is comprehensive with in-house capabilities for managing all medical situations on a definitive and continuing basis.

§ 70453. Comprehensive Emergency Medical Service General Requirements.
(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the administration and medical staff where such is appropriate.
(b) The responsibility and the accountability of the emergency medical service to the medical staff and administration shall be defined.
(c) The emergency medical service shall be so located in the hospital as to have ready access to all necessary services.
(d) A communications system employing telephone, radiotelephone or similar means shall be in use to establish and maintain contact with the police department, rescue squads and other emergency services of the community.
(e) The emergency medical service shall have a defined emergency and mass casualty plan in concert with the hospital’s capabilities and the capabilities of the community served.
(f) The hospital shall require continuing education of all emergency medical service personnel.
(g) Medical records shall be maintained on all patients presenting themselves for emergency medical care. These shall become part of the patient’s hospital record. Past hospital records shall be available to the emergency medical service.
(h) An emergency room log shall be maintained and shall contain at least the following information relating to the patient: name, date, time and means of arrival, age, sex, record number, nature of complaint, disposition and time of departure. The name of those dead on arrival shall also be entered in the log.
(i) All medications furnished to patients through the emergency service shall be provided by a pharmacist or an individual lawfully authorized to prescribe. Such medications shall be properly labeled and all required records shall be maintained in accordance with state and federal laws.

(j) Each comprehensive emergency medical service shall be identified to the public by an exterior sign, clearly visible from public thoroughfares. The wording of such signs shall state: COMPREHENSIVE EMERGENCY MEDICAL SERVICE PHYSICIAN ON DUTY.

(k) Standardized emergency nursing procedures shall be developed by an appropriate committee of the medical staff.

(l) A list of referral services shall be available in the emergency center. This list shall include the name, address and telephone number of the following:

1. Police department.
2. Antivenin service.
3. Drug abuse center.
4. Poison control information center.
5. Suicide prevention center.
6. Director of State Department of Health or his designee.
7. Local health department.
8. Clergy.
9. County coroner or medical examiner.

(m) The hospital shall have the following additional services which shall be continuously staffed in a manner that permits the performance of all required functions:

1. Chronic dialysis service.
2. Burn center.
3. Respiratory care service.
4. Intensive care newborn nursery.
5. Coronary care service.
6. Intensive care service.
7. Pediatric service.
8. Psychiatric unit.
9. Cardiovascular surgery service.
10. Postanesthesia recovery unit.

(n) The radiological service shall be capable of performing contrast studies including angiography in addition to its usual capabilities.

(o) The clinical laboratory shall be capable of performing blood gas analysis, pH, serum electrolytes and other procedures appropriate for emergency medical care.

(p) Surgical services shall be immediately available for life-threatening situations.
(q) The hospital shall have readily available the service of a blood bank containing common types of blood and blood derivatives. Blood storage facilities shall be in or adjacent to the emergency service.

(r) There shall be affiliation of the emergency medical service with a medical school.

(s) Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70455. Comprehensive Emergency Medical Service Staff
(a) A full-time physician trained and experienced in emergency medical service shall have overall responsibility for the service. The physician or her or his designee shall be responsible for:

(1) Implementation of established policies and procedures.
(2) Providing continuous staffing with physicians trained and experienced in emergency medical service. Such physicians shall be assigned to and be located in the emergency service area 24 hours a day.

(3) Providing experienced physicians in specialty categories to be available in-house 24 hours a day. Such specialties include but are not limited to medicine, surgery, anesthesiology, orthopedics, neurosurgery, pediatrics and obstetrics-gynecology.

(4) Maintenance of a roster of specialty physicians immediately available for consultation and/or assistance.

(5) Assurance of continuing education for all emergency service staff including physicians, nurses and other personnel.

(b) All physicians, dentists and podiatrists providing services in the emergency room shall be members of the organized medical staff.

(c) A registered nurse qualified by education and/or training shall be responsible for nursing care within the service.

(d) All registered nurses shall have training and experience in emergency lifesaving and life support procedures.

(e) A registered nurse trained and experienced in emergency nursing care shall be on duty at all times.

(f) There shall be sufficient licensed nurses and other skilled personnel on duty as required to support the services.

§ 70457. Comprehensive Emergency Medical Service Equipment and Supplies.
All equipment and supplies necessary for life support shall be available, including but not limited to: airway control and ventilation equipment, suction devices, cardiac
monitor, defibrillators, pacemaker capability, apparatus to establish central nervous system monitoring and administration devices.

§ 70459. Comprehensive Emergency Medical Service Space.
(a) The following space provisions and designations shall be provided:
   (1) Treatment rooms.
   (2) Cast rooms.
   (3) Operating room fully equipped.
   (4) Intensive care in or adjoining the emergency medical service area.
   (5) Nursing station.
   (6) Medication room.
   (7) Clean and dirty utility room.
   (8) X-ray spaces.
   (9) Laboratory facilities.
   (10) Staff support rooms including toilets, showers, lounge and sleeping area.
   (11) Public toilets.
   (12) Observation room.
   (13) Police and press room.
   (14) Waiting room.
   (15) Reception area.
(b) Observation beds in the emergency medical service shall not be counted in the total licensed bed capacity of the hospital.
§ 70649. Standby Emergency Medical Service, Physician on Call, Definition.  
Standby emergency medical service, physician on call, means the provision of emergency medical care in a specifically designated area of the hospital which is equipped and maintained at all times to receive patients with urgent medical problems and capable of providing physician service within a reasonable time.

§ 70651. Standby Emergency Medical Service, Physician on Call, General Requirements.
(a) Written policies and procedures shall be developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Policies shall be approved by the administration and medical staff where such is appropriate.
(b) The responsibility and the accountability of the emergency medical service to the medical staff and administration shall be defined.
(c) There shall be a roster of names of physicians and their telephone numbers who are available to provide emergency service.
(d) A communication system employing telephones, radiotelephone or similar means shall be in use to establish and maintain contact with the police department, rescue squads and other emergency services of the community.
(e) The emergency medical service shall have a defined emergency and mass casualty plan in concert with the hospital's capabilities and the capabilities of the community served.
(f) The hospital shall require continuing education of all emergency medical service personnel.
(g) Medical records shall be maintained on all patients presenting themselves for emergency medical care. These shall become part of the patient's hospital medical record. Past hospital records shall be available to the emergency medical service.
(h) An emergency room log shall be maintained and shall contain at least the following information relating to the patient: name, date, time and means of arrival, age, sex, record number, nature of complaint, disposition and time of departure. The name of those dead on arrival shall also be entered in the log.
(i) Each standby emergency medical service shall be identified to the public by an exterior sign, clearly visible from public thoroughfares. The wording of such signs shall state STANDBY EMERGENCY MEDICAL SERVICE, PHYSICIAN ON CALL.
(j) Standardized emergency nursing procedures shall be developed by an appropriate committee of the medical staff.
(k) A list of referral services shall be available in the emergency service. This list shall include the name, address and telephone number of the following:

1. Police department.
2. Blood bank.
3. Antivenin service.
4. Burn center.
5. Drug abuse center.
6. Poison control information center.
7. Suicide prevention center.
8. Director of the State Department of Health or his designee.
9. Local health department.
10. Clergy.
11. Emergency psychiatric service.
12. Chronic hemodialysis service.
13. Renal transplant center.
15. Emergency maternity service.
16. Radiation accident management service.
17. Ambulance transport and rescue services.
18. County coroner or medical examiner.

(l) Periodically, and appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.

§ 70653. Standby Emergency Medical Service, Physician on Call, Staff.

(a) A physician shall have overall responsibility for the service. He or his designee shall be responsible for:

1. Implementation of established policies and procedures.
2. Development of a system for assuring physician coverage on call 24 hours a day to the emergency medical service.
3. Assurance that physician coverage is available within a reasonable length of time, relative to the patient’s illness or injury.
4. Development of a roster of specialty physicians available for consultation at all times.
5. Assurance of continuing education for the medical and nursing staff.

(b) All physicians, dentists and podiatrists providing services in the emergency room shall be members of the organized medical staff.

(c) A registered nurse shall be immediately available within the hospital at all times to provide emergency nursing care.
(d) There shall be sufficient other personnel to support the services offered.

§ 70655. Standby Emergency Medical Service, Physician on Call, Equipment and Supplies.
All equipment and supplies necessary for life support shall be available. Equipment shall include, but need not be limited to, airway control and ventilation equipment, suction devices, cardiac monitor defibrillator, intravenous fluids and administering devices and including blood expanders.

§ 70657. Standby Emergency Medical Service, Physician on Call, Space.
(a) The following space provisions and designations shall be met:
   (1) Designated emergency room area.
   (2) Reception area.
   (3) Observation room.
(b) Observation beds in the emergency medical service shall not be counted in the total licensed bed capacity of the hospital.