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Email: register.information@tn.gov**For Department of State Use Only**Sequence Number: 04-13-14Rule ID(s): 5690File Date: 4/10/14Effective Date: 7/9/14

Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing. T.C.A. § 4-5-205

Agency/Board/Commission:	Department of Health
Division:	Emergency Medical Services
Contact Person:	Keith D. Hodges
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Revision Type (check all that apply): Amendment New Repeal**Rule(s) Revised** (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please enter only **ONE** Rule Number/Rule Title per row)

Chapter Number	Chapter Title
1200-12-02	Procedures for Administering Chemical Agent Antidotes in Emergency Situations
Rule Number	Rule Title
1200-12-02-.06	Immunizations During Declared Disasters and Emergencies

Department of Health
Board of Emergency Medical Services
Division of Emergency Medical Services

Rule Amendment

Chapter 1200-12-02 Procedures for Administering Chemical Agent Antidotes in Emergency Situations is amended by deleting the chapter title in its entirety and substituting instead the following language, so that as amended, the new chapter title shall read:

1200-12-02 Disasters, Emergencies and Mass Casualty Events

Authority: T.C.A. §§ 68-140-303, 68-140-304, 68-140-309, and 68-140-310.

Department of Health
Board of Emergency Medical Services
Division of Emergency Medical Services

New Rule

1200-12-02-.06

Immunizations During Declared Disasters and Emergencies

New Table of Contents

1200-12-02-.01 Introduction
1200-12-02-.02 Definitions
1200-12-02-.03 Procedures
1200-12-02-.04 Reports
1200-12-02-.05 Notification
1200-12-02-.06 Immunizations During Declared Disaster and Emergencies

1200-12-02-.06 Immunizations During Declared Disasters and Emergencies shall read as follows:

- (1) Notwithstanding any rule to the contrary, during declared disasters and emergencies under T.C.A. § 58-2-101, et. seq., emergency medical technician-IVs (EMT-IVs), advanced emergency medical technicians (AEMTs), paramedics and critical care paramedics (CCPs) may administer immunizations to the public in vaccination clinics operated by State or local health departments in areas covered by the order(s) declaring the disaster or emergency, subject to the following conditions:
 - (a) Public health departments shall provide required, "just-in-time" training for vaccination clinics and document successful completion by EMT-IVs, AEMTs, paramedics or CCPs prior to their administering immunizations in the vaccination clinic.
 - (b) Public health departments shall provide medical direction and control for EMT-IVs, AEMTs, paramedics and CCPs at clinics.

Authority: T.C.A. §§ 68-140-303, 68-140-304, 68-140-309, and 68-140-310.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Sullivan K. Smith, MD	✓				
Timothy Bell	✓				
Ralph Brooks, MD	✓				
Jeffrey L. Davis	✓				
Richard Holliday	✓				
Larry Hutsell				✓	
Kevin Mitchell	✓				
James E. Ross	✓				
Stephen Sutton	✓				
Robert W. Thurman, Jr.	✓				
Robert A. Webb	✓				
Tyler White	✓				

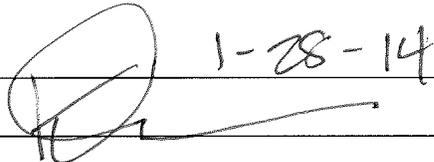
I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Tennessee Emergency Medical Services Board on 12/04/2013, and is in compliance with the provisions of T.C.A. § 4-5-222.

I further certify the following:

Notice of Rulemaking Hearing filed with the Department of State on: 10/11/13

Rulemaking Hearing(s) Conducted on: (add more dates). 12/04/13

Date: 1-28-14

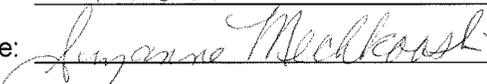
Signature: 

Name of Officer: Keith D. Hodges

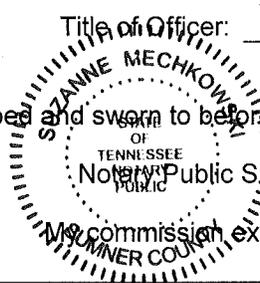
Assistant General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on: 1-28-14

Notary Public Signature: 

My commission expires on: MY COMMISSION EXPIRES APRIL 19, 2017



All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.


 Robert E. Cooper, Jr.
 Attorney General and Reporter
4-8-14
 Date

Department of State Use Only

Filed with the Department of State on: 4/10/14

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OFFICE OF
SECRETARY OF STATE

Effective on: 7/9/11



Tre Hargett
Secretary of State

Public Hearing Comments

One copy of a document containing responses to comments made at the public hearing must accompany the filing pursuant to T.C.A. § 4-5-222. Agencies shall include only their responses to public hearing comments, which can be summarized. No letters of inquiry from parties questioning the rule will be accepted. When no comments are received at the public hearing, the agency need only draft a memorandum stating such and include it with the Rulemaking Hearing Rule filing. Minutes of the meeting will not be accepted. Transcripts are not acceptable.

There were no public comments, either written or oral.

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process as described in T.C.A. § 4-5-202(a)(3) and T.C.A. § 4-5-202(a), all agencies shall conduct a review of whether a proposed rule or rule affects small businesses.

(If applicable, insert Regulatory Flexibility Addendum here)

REGULATORY FLEXIBILITY ANALYSIS

- (1) **The extent to which the rule or rule may overlap, duplicate, or conflict with other federal, state, and local governmental rules.**

These rules do not overlap, duplicate, or conflict with other federal, state, or local governmental rules.

- (2) **Clarity, conciseness, and lack of ambiguity in the rule or rules.**

These rules exhibit clarity, conciseness, and lack of ambiguity.

- (3) **The establishment of flexible compliance and/or reporting requirements for small businesses.**

These rules do not create flexible compliance and/or reporting requirements for small businesses.

- (4) **The establishment of friendly schedules or deadlines for compliance and/or reporting requirements for small businesses.**

These rules do not involve schedules or deadlines for compliance or reporting requirements for small businesses.

- (5) **The consolidation or simplification of compliance or reporting requirements for small businesses.**

These rules do not consolidate or simplify compliance reporting requirements for small businesses.

- (6) **The establishment of performance standards for small businesses as opposed to design or operational standards required in the proposed rule.**

These rules do not establish performance, design, or operational standards.

- (7) **The unnecessary creation of entry barriers or other effects that stifle entrepreneurial activity, curb innovation, or increase costs.**

These rules do not create unnecessary barriers or stifle entrepreneurial activity or innovation.

STATEMENT OF ECONOMIC IMPACT TO SMALL BUSINESSES

Name of Board, Committee or Council: Tennessee Emergency Medical Services Board

Rulemaking hearing date: 12/04/2013

- 1. Type or types of small business and an identification and estimate of the number of small businesses subject to the proposed rule that would bear the cost of, and/or directly benefit from the proposed rule:**

Providers of emergency services, including EMT-IVs, AEMTs, and CCPs, along with state and local governmental health departments, will be subject to the proposed rule amendments. The providers will not be directly burdened with any costs as the designated health departments will be responsible for providing training, medical direction, and control.

- 2. Projected reporting, recordkeeping and other administrative costs required for compliance with the proposed rule, including the type of professional skills necessary for preparation of the report or record:**

Reporting, recordkeeping and other administrative costs will not be borne by providers. The designated health departments will be responsible for such costs associated with these rule amendments.

- 3. Statement of the probable effect on impacted small businesses and consumers:**

These rule amendments should not impact small businesses. Consumers of health department services, the residents of Tennessee, will be positively impacted by these rule amendments due to an increased number of emergency medical providers that will be able to administer immunizations during disasters, emergencies, and mass casualty events.

- 4. Description of any less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of the proposed rule that may exist, and to what extent, such alternative means might be less burdensome to small business:**

There are no less burdensome, less intrusive or less costly alternative methods of achieving the purpose of these rule amendments.

- 5. Comparison of the proposed rule with any federal or state counterparts:**

Federal: None

State: None

- 6. Analysis of the effect of the possible exemption of small businesses from all or any part of the requirements contained in the proposed rule.**

The proposed amendments do not impose any requirements from which small businesses could be made exempt.

Impact on Local Governments

Pursuant to T.C.A. § 4-5-228(a), "any rule proposed to be promulgated shall state in a simple declarative sentence, without additional comments on the merits of the policy of the rules or regulation, whether the rule or regulation may have a projected financial impact on local governments."

The proposed rule amendments should not have a financial impact on local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A)** A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

1200-12-02: The Board of Emergency Medical Services seeks to replace Chapter title Procedures for Administering Chemical Agent Antidotes in Emergency Situations with the new title Disasters, Emergencies and Mass Casualty Events. This title simplifies the rule and provides for regulations regarding immunizations for new threats posed by disasters and mass casualty events.

1200-12-.06: The Board of Emergency Medical Services also seeks to add new rule Immunizations During Declared Disasters and Emergencies. This proposed rule amendment would allow emergency medical technician IVs (EMT-IVs), advances emergency medical technicians (AEMTs), paramedics and critical care paramedics (CCPs) to administer vaccines during emergency situations in state and local health departments in areas where the emergency or disaster was declared or the mass casualty event occurred as long as the designated health department provides training to the above-listed emergency personnel as well as direction and control.

- (B)** A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

None.

- (C)** Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

These rules affect emergency care providers in Tennessee as well as the all Tennessee residents.

- (D)** Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule;

None.

- (E)** An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

These rules should not result in any increase or decrease in state and local government revenues and expenditures.

- (F)** Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Keith D. Hodges, Assistant General Counsel, Tennessee Department of Health, possess substantial knowledge and understanding of these rules.

- (G)** Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Donna G. Tidwell, Director, Division of Emergency Medical Services, Tennessee Department of Health, and Keith D. Hodges, Assistant General Counsel, Tennessee Department of Health, will explain the rule at a scheduled meeting of the committees.

- (H)** Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Donna G. Tidwell, Director, Division of Emergency Medical Services, Tennessee Department of Health, 665 Mainstream Drive, Nashville, Tennessee 37243, (615) 741-4521, Donna.G.Tidwell@tn.gov, and Keith D. Hodges, Assistant General Counsel, Tennessee Department of Health, 665 Mainstream Drive, Nashville, Tennessee, (615) 741-1611, Keith.D.Hodges@tn.gov.

- (l) Any additional information relevant to the rule proposed for continuation that the committee requests.

RULES
OF
THE TENNESSEE DEPARTMENT OF HEALTH
BUREAU OF HEALTH LICENSURE AND REGULATION
DIVISION OF EMERGENCY MEDICAL SERVICES

CHAPTER 1200-12-02
PROCEDURES FOR ADMINISTERING CHEMICAL AGENT
ANTIDOTES IN EMERGENCY SITUATIONS

DISASTERS, EMERGENCIES AND MASS CASUALTY EVENTS

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1200-12-2-.01 INTRODUCTION.

- (1) During the response to emergency situations such as those precipitated by a terrorist event, emergency responders or persons may encounter patients or suffer self-exposure to toxic chemical agents requiring the immediate administration of antidotes or medications to preserve and sustain life and vital functions. Upon the exposure to a significant risk, this rule authorizes emergency treatment by use of autoinjection or intramuscular injection of such antidotes or medications as shall be approved by the Board or the State Medical Officer.

Authority: T.C.A. §4-5-202, 4-5-203, 4-5-204, 68-140-503, 68-140-504, 68-140-509, and 68-140-510.
Administrative History: Original rule filed January 4, 2005; effective March 20, 2005.

1200-12-2-.02 DEFINITIONS. Within the meaning of this rule:

- (1) "Emergency responder" – Emergency responder means emergency medical technicians, paramedics, fire fighters, emergency medical first response workers, law enforcement and other public safety officials or volunteers making an authorized response or rendering emergency care at the scene of an emergency.
- (2) "Exposure" – Exposure means the presence of an injurious agent in such circumstances that life threatening symptoms may reasonably be anticipated, and that such situations impose an immediate threat to life.

Authority: T.C.A. §4-5-202, 4-5-203, 4-5-204, 68-140-503, 68-140-504, 68-140-509, and 68-140-510.
Administrative History: Original rule filed January 4, 2005; effective March 20, 2005.

1200-12-2-.03 PROCEDURES.

- (1) EMS personnel or emergency responders may utilize or administer the antidotes or medications upon the availability of antidote kits or means to administer antidotes or other medications approved for intramuscular injection or autoinjection by the Board or the Commissioner of Health.

Authority: T.C.A. §4-5-202, 4-5-203, 4-5-204, 68-140-503, 68-140-504, 68-140-509, and 68-140-510.
Administrative History: Original rule filed January 4, 2005; effective March 20, 2005.

1200-12-2-.04 REPORTS.

- (1) Upon the administration of such antidotes or medication by autoinjection or intramuscular injection during an emergency situation, the time and use of such antidotes or medications shall be reported to the appropriate medical personnel assuming care for the patient.

Authority: T.C.A. §4-5-202, 4-5-203, 4-5-204, 68-140-503, 68-140-504, 68-140-509, and 68-140-510.
Administrative History: Original rule filed January 4, 2005; effective March 20, 2005.

1200-12-2-.05 NOTIFICATION

- (1) Upon a situation or event involving suspected chemical agents or other toxic substances responding personnel shall immediately notify an emergency dispatch center and inform appropriate public safety and health officials.

Authority: T.C.A. §4-5-202, 4-5-203, 4-5-204, 68-140-503, 68-140-504, 68-140-509, and 68-140-510.
Administrative History: Original rule filed January 4, 2005; effective March 20, 2005.

1200-12-02-.06 Immunizations During Declared Disasters and Emergencies.

- (1) Notwithstanding any rule to the contrary, during declared disasters and emergencies under T.C.A. § 58-2-101, et. seq., emergency medical technician-IVs (EMT-IVs), advanced emergency medical technicians (AEMTs), paramedics and critical care paramedics (CCPs) may administer immunizations to the public in vaccination clinics operated by State or local health departments in areas covered by the order(s) declaring the disaster or emergency, subject to the following conditions:

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- (a) Public health departments shall provide required, "just-in-time" training for vaccination clinics and document successful completion by EMT-IVs, AEMTs, paramedics or CCPs prior to their administering immunizations in the vaccination clinic.
- (b) Public health departments shall provide medical direction and control for EMT-IVs, AEMTs, paramedics and CCPs at clinics.

Authority: T.C.A. §§ 68-140-303, 68-140-304, 68-140-309, and 68-140-310.