

**CHAPTER 41A****EMERGENCY MEDICAL TECHNICIANS-  
PARAMEDIC: TRAINING AND  
CERTIFICATION****Authority**

N.J.S.A. 26:2K-7 through 20.

**Source and Effective Date**

R.2004 d.221, effective June 21, 2004.  
See: 35 N.J.R. 2130(a), 36 N.J.R. 3139(a).

**Chapter Expiration Date**

In accordance with N.J.S.A. 52:14B-5.1c, Chapter 41A, Emergency Medical Technicians-Paramedic: Training and Certification, expires on December 18, 2009. See: 41 N.J.R. 1928(a).

**Chapter Historical Note**

Chapter 41A, Certification and Operation of Emergency Medical Technician Defibrillator Programs, was adopted as R.1992 d.63, effective February 18, 1992, operative May 1, 1992. See: 23 N.J.R. 1254(a), 24 N.J.R. 585(a). Pursuant to Executive Order No. 66(1978), Chapter 41A expired on February 18, 1997.

Chapter 41A, EMT-D Cardiac Defibrillation, was adopted as new rules by R.1997 d.177, effective April 21, 1997. See: 28 N.J.R. 3287(a), 28 N.J.R. 3909(b), 29 N.J.R. 1558(a).

Chapter 41A, EMT-D Cardiac Defibrillation, was renamed "EMT-D/First Responder-D Cardiac Defibrillation" by R.1997 d.517, effective December 1, 1997. See: 29 N.J.R. 3957(a), 29 N.J.R. 5080(a).

Chapter 41A, EMT-D/First Responder-D Cardiac Defibrillation, was repealed and Chapter 41A, EMT/First Responder-D Cardiac Defibrillation, was adopted as new rules by R.2000 d.70, effective February 22, 2000. See: 31 N.J.R. 2868(a), 32 N.J.R. 704(a).

Chapter 41A, EMT/First Responder-D Cardiac Defibrillation, was repealed and Chapter 41A, Emergency Medical Technicians-Paramedic: Training and Certification, was adopted as new rules by R.2004 d.221, effective June 21, 2004. See: Source and Effective Date.

**Case Notes**

Department of Health and Senior Services has the authority under the 1984 Emergency Medical Services Act, N.J.S.A. 26:2K-7 to 53 (the EMS Act), to regulate emergency medical technicians, commonly known as EMT-Bs, who provide basic life support services, despite the fact that the classifications in the EMS Act do not specifically list EMT-Bs as a discrete subcategory of EMTs, and the corresponding departmental regulations pertaining to EMT-Bs, set forth in N.J.A.C. 8:40A-1.1 to 10.4, are valid and applicable to an EMT-B's effort to obtain recertification to serve in the State of New Jersey as an EMT-B. *D'ambrosio v. Department of Health and Senior Servs.*, 403 N.J. Super. 321, 958 A.2d 110, 2008 N.J. Super. LEXIS 220 (App.Div. 2008).

**CHAPTER TABLE OF CONTENTS****SUBCHAPTER 1. AUTHORITY, SCOPE AND  
DEFINITIONS**

- 8:41A-1.1 Authority
- 8:41A-1.2 Scope and purpose
- 8:41A-1.3 Definitions
- 8:41A-1.4 Waivers

**SUBCHAPTER 2. EMT-PARAMEDIC TRAINING  
PROGRAMS**

- 8:41A-2.1 General information and requirements
- 8:41A-2.2 Student qualifications
- 8:41A-2.3 Didactic training
- 8:41A-2.4 Clinical training
- 8:41A-2.5 Specific clinical objectives: Category I/Skills Division
- 8:41A-2.6 Specific clinical objectives: Category II/Specialty Care Division
- 8:41A-2.7 Specific clinical objectives: Category III/Field Experience
- 8:41A-2.8 Suspension or revocation of training site approval

**SUBCHAPTER 3. NREMT-PARAMEDIC CERTIFICATION  
EXAMINATION**

- 8:41A-3.1 General information
- 8:41A-3.2 Eligibility to sit for the examination
- 8:41A-3.3 Admittance to the examination
- 8:41A-3.4 Accommodations for persons with documented learning disabilities

**SUBCHAPTER 4. EMT-PARAMEDIC CERTIFICATION**

- 8:41A-4.1 Certification
- 8:41A-4.2 Reciprocity
- 8:41A-4.3 Recertification
- 8:41A-4.4 Expired certifications
- 8:41A-4.5 Inactive status

**SUBCHAPTER 5. SCOPE OF PRACTICE, ENFORCEMENT  
ACTIONS AND HEARINGS**

- 8:41A-5.1 Scope of practice
- 8:41A-5.2 Enforcement actions
- 8:41A-5.3 Hearings
- 8:41A-5.4 Penalty for impersonating an EMT-Paramedic

**SUBCHAPTER 1. AUTHORITY, SCOPE AND  
DEFINITIONS****8:41A-1.1 Authority**

These rules are promulgated pursuant to N.J.S.A. 26:2K-7 through 20, which authorize the Commissioner to adopt rules pertaining to the training, testing and certification of Emergency Medical Technicians-Paramedic.

**8:41A-1.2 Scope and purpose**

(a) These rules shall apply to:

1. Any person seeking certification or recertification as an EMT-Paramedic;
2. Certified EMTs-Paramedic;
3. Any private agency, organization or entity seeking approval as a clinical or didactic training site; and
4. Approved clinical and didactic training sites.

**8:41A-1.3 Definitions**

The following words and terms, as utilized in this chapter, shall have the following meanings, unless the context in which they are utilized clearly indicates otherwise.

“ACLS certification” or “certification in ACLS” means valid certification in Advanced Cardiac Life Support as issued by the American Heart Association.

“Advanced life support” or “ALS” means an advanced level of pre-hospital, inter-facility or emergency medical care that includes basic life support functions, cardiac monitoring, cardiac defibrillation, telemetered electrocardiography, administration of anti-arrhythmic agents, intravenous (IV) therapy, administration of specific medications, drugs and solutions, utilization of adjunctive ventilation devices, trauma care and other techniques and procedures authorized in writing by the Commissioner.

“Advanced practice nurse” means a person who is validly licensed by the New Jersey Board of Nursing in accordance with the standards set forth at N.J.S.A. 45:11-45 et seq.

“AHA CPR Guidelines” means the “Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care” as published by the American Heart Association, National Center, 7272 Greenville Avenue, Dallas, TX 75231-4596, incorporated herein by reference, as amended and supplemented. A copy of the guidelines is on file and available for inspection at the Office of Emergency Medical Services.

“Air medical unit” or “AMU” means a specially equipped helicopter or airplane that is validly licensed by the Department and operated in accordance with the standards set forth at N.J.A.C. 8:41.

“Airplane” means, as defined at 14 C.F.R. 1.1, an engine-driven fixed-wing aircraft heavier than air, which is supported in flight by the dynamic reaction of the air against its wings.

“ALS crewmember” means:

1. A registered nurse who meets the requirements set forth at N.J.A.C. 8:41-9.9 or N.J.A.C. 8:41-10.8(d)1 through (d)5vii; and/or
2. An EMT-Paramedic, who staffs a mobile intensive care unit, specialty care transport unit or air medical unit.

“Automated external defibrillator” or “AED” means a device that can be attached to a patient in cardiopulmonary arrest, analyze an electrocardiogram for the presence of potentially lethal dysrhythmias (specifically, ventricular fibrillation and fast ventricular tachycardia), deliver an electrical defibrillation to the patient in accordance with the requirements of standard treatment protocols, and produce an event summary that documents significant events in the utilization of the device, specifically events prior to and after an electrical defibrillation.

“Available” means ready for immediate utilization (pertaining to equipment, vehicles and personnel) or immediately accessible (pertaining to records).

“Basic life support” or “BLS” means a basic level of pre-hospital care that includes patient stabilization, airway clearance and maintenance, cardiopulmonary resuscitation (CPR) (to the level of the Professional Rescuer or Health Care Provider as issued by either the American Heart Association, the American Red Cross, the National Safety Council or other entity determined by the Department to comply with AHA CPR Guidelines), hemorrhage control, initial wound care, fracture stabilization, victim extrication and other techniques and procedures as defined in the EMT-Basic: National Standard Curriculum promulgated by the National Highway Traffic Safety Administration of the United States Department of Transportation, as amended and supplemented (obtainable from The National Highway Traffic Safety Administration (NHTSA), 400 7th Street S.W., Washington, D.C. 20590, by accessing the NHTSA website at [www.nhtsa.dot.gov/people/injury/ems](http://www.nhtsa.dot.gov/people/injury/ems) or by calling (888) 327-4236).

“Basic life support ambulance” or “BLS ambulance” means an emergency medical services vehicle that is validly licensed by the Department and operated in accordance with the standards set forth at N.J.A.C. 8:40.

“BTLs certification” or “certification in BTLs” means valid certification in Basic Trauma Life Support as issued by the American College of Emergency Physicians.

“Certificate of need” means the formal written approval of the New Jersey Department of Health and Senior Services to construct or expand a health care facility or to institute a new health care service, in accordance with requirements set forth at N.J.A.C. 8:33.

“Certified” or “certification” means official documentation that a person has completed all the requirements of an approved training program and has demonstrated competence in the subject matter to the satisfaction of the certifying agency.

“Clinical portion” means the practical “hands-on” portion of the program curriculum or the refresher curriculum, as appropriate in the context of the provision.

“Clinical training site” means a mobile intensive care hospital, as defined in this section, which has been authorized by the Department to provide the clinical portion of an EMT-Paramedic training program.

“Commissioner” means the Commissioner of the New Jersey Department of Health and Senior Services.

“Controlled dangerous substance” means a drug, substance or immediate precursor identified in Schedules I through V of the New Jersey Controlled Dangerous Substances Act (N.J.S.A. 24:21-5 through 8.1). The term shall not include distilled spirits, wine or malt beverages, as those terms are defined or utilized in N.J.S.A. 33:1-1 et seq., or tobacco and tobacco products.

“Convicted” or “conviction” means a finding of guilt by a judge or jury, a guilty plea, a plea of nolo contendere or non-vult or entry into a pre-trial intervention program, conditional discharge or other diversionary program authorized under the statutes of the State of New Jersey or under any other state’s statutes.

“CPR certification” means valid certification in cardiopulmonary resuscitation to the level of the Professional Rescuer or Health Care Provider as issued by the American Heart Association, the American Red Cross, the National Safety Council or other entity determined by the Department to comply with AHA CPR Guidelines.

“Crewmember” means any person (including, but not limited to, an EMT-Basic, EMT-Paramedic or registered nurse) who staffs a basic life support ambulance, mobile intensive care unit, specialty care transport unit or aeromedical unit.

“Crime” means, in accordance with the New Jersey Code of Criminal Justice, specifically N.J.S.A. 2C:1-4, any offense for which a sentence of imprisonment in excess of six months is authorized.

“Department” means the New Jersey Department of Health and Senior Services.

“Didactic coordinator” means the person responsible for coordinating the didactic portion of an EMT-Paramedic training program. The specific responsibilities required of a didactic coordinator are set forth at N.J.A.C. 8:41A-2.3(c).

“Didactic portion” means the textbook/lecture portion of the program curriculum or the refresher curriculum, as appropriate in the context of the provision.

“Didactic training site” means a New Jersey college, accredited by the Department of Higher Education, which has been authorized by the Department to provide the didactic portion of an EMT-Paramedic training program.

“Director” means the person responsible for all activities of a mobile intensive care program. The specific requirements necessary to serve as a mobile intensive care program director are set forth at N.J.A.C. 8:41-9.3.

“Disorderly persons offense” or “petty disorderly persons offense” shall have the same meaning as the definition provided by the New Jersey Code of Criminal Justice at N.J.S.A. 2C:1-4, incorporated herein by reference, as amended and supplemented. Generally, such offenses are under the jurisdiction of municipal courts, carry a maximum jail term of six months or less, and are characterized by being minor in nature, not giving rise to the rights of trial by jury or indictment by grant jury. Examples of these offenses include harassment, obstructing a public passage, and fighting in a public place.

“Emergency” means a person’s perceived need for immediate medical care in order to prevent death or aggravation of physiological or psychological illness or injury.

“Emergency medical services” or “EMS” means a system for the provision of emergency care and transportation of persons who are sick or injured and in need of immediate medical care.

“Emergency Medical Technician-Basic” or “EMT-Basic” means a person trained in basic life support care and validly certified or recognized by the Commissioner in accordance with the standards for Emergency Medical Technician-Basic certification as set forth at N.J.A.C. 8:40A.

“Emergency Medical Technician-Paramedic” or “EMT-Paramedic” means a person trained in advanced life support cares and validly certified or recognized by the Commissioner in accordance with the standards for Emergency Medical Technician-Paramedic certification as set forth in this chapter.

“EMS Educator” means the person responsible for coordinating all activities associated with the clinical portion of an EMT-Paramedic training program. The specific responsibilities required of an EMS Educator are set forth at N.J.A.C. 8:41A-2.4(c).

“EMT-Paramedic student” means a person enrolled in an EMT-Paramedic training program.

“EMT-Paramedic training program” means a course of study, as provided for in this chapter, consisting of both didactic and clinical instruction, designed for the purpose of preparing a person to sit for the NREMT-Paramedic Certification Examination.

“Evaluator” means a person responsible for administering the practical “hands-on” portion of the NREMT-Paramedic Certification Examination. Evaluators are identified, appointed and trained by the Office of Emergency Medical Services to observe and record the actions of each EMT-Paramedic student based upon the criteria for each skill tested, in accordance with the standards and guidelines established by the National Registry of Emergency Medical Technicians.

“Field preceptor” means a person, identified by the didactic coordinator and/or the EMS Educator, who possesses a higher level of expertise in both the subject matter and field training requirements of EMT-Paramedic students. A field preceptor shall be responsible for monitoring EMT-Paramedic students in the demonstration of knowledge and in the performance of skills during the course of a student’s required field experience.

“General hospital” means any hospital, validly licensed by the Department, which maintains and operates organized facilities and services for the diagnosis, treatment or care of

persons suffering from acute illness, injury or deformity and in which all diagnoses, treatment and care are administered by or performed under the direction of persons who, in accordance with N.J.S.A. 45:9-6, are validly licensed to practice medicine and surgery by the New Jersey State Board of Medical Examiners.

“Helicopter” means a heavier-than-air aircraft that depends principally for its support in flight on the lift generated by one or more rotors.

“Medical command” means the medical direction provided to ALS crewmembers by a medical command physician.

“Medical command physician” means a physician or a person validly licensed by another state’s Board of Medical Examiners (or equivalent licensing agency) who provides medical direction to ALS crewmembers via radio, telephone or other direct means of communications. The criteria for medical command physicians differ for mobile intensive care units, specialty care transport units and aero-medical units. The specific criteria for each is set forth at N.J.A.C. 8:41-9.5, 8:41-10.5 and 8:41-11.5, respectively.

“Medical director” means the physician responsible for the medical oversight of the operations of a mobile intensive care program. The specific criteria required of a medical director are set forth at N.J.A.C. 8:41-9.4.

“Medical record” means any information and/or reports (including, but not limited to, patient care reports) that describe a person’s physical condition and/or medical history.

“Mobile intensive care hospital” means a general hospital authorized by the Commissioner, by way of a certificate of need, to develop and maintain a mobile intensive care program for the purpose of providing advanced life support care to a specific population, geographic region or political subdivision.

“Mobile intensive care nurse” or “MICN” means a registered nurse who meets all of the criteria set forth at N.J.A.C. 8:41-9.9.

“Mobile intensive care program” means a program, operated by a mobile intensive care hospital, which is validly licensed by the Department to provide pre-hospital advanced life support cares by way of a specially equipped and staffed mobile intensive care unit. The mobile intensive care hospital shall be vested with the ultimate responsibility for the delivery of services and shall be held accountable for the actions of all of its crewmembers in the event that there are violations of any State or Federal licensing standards.

“Mobile intensive care unit” or “MICU” means a specialized emergency medical services vehicle that is validly licensed by the Department and operated in accordance with the standards set forth at N.J.A.C. 8:41.

“NREMT” means The National Registry of Emergency Medical Technicians, which is a professional testing agency specializing in the development of evaluation instruments designed for utilization by various states in the certification and registration of emergency medical services professionals. The NREMT is headquartered at the Rocco V. Morando Building, 6610 Busch Boulevard, P.O. Box 29233, Columbus, OH 43229-0233.

“Neonatal” means the period of time from the moment of birth up to and including the 28th day following birth.

“Office of Emergency Medical Services” or “OEMS” means the Office of Emergency Medical Services in the New Jersey Department of Health and Senior Services, PO Box 360, Trenton, New Jersey, 08625. The telephone number for OEMS is (609) 633-7777.

“Official NREMT representative” means a person responsible for the administration of the NREMT-Paramedic Certification Examination. Official NREMT representatives are appointed by the Office of Emergency Medical Services and are trained by the National Registry of Emergency Medical Technicians, in accordance with the its standards and guidelines, to conduct all NREMT-Paramedic Certification Examination related activities.

“PALS certification” or “certification in PALS” means valid certification in Pediatric Advanced Life Support as issued by the American Heart Association.

“Patient” means any person who is ill or injured, living or deceased and with whom a crewmember has established physical or verbal contact.

“Patient care report” means and includes the written documentation completed each time a crewmember makes physical or verbal contact with a patient.

“Pediatric” means the period of time beginning with the 29th day following birth up to, but not including, a person’s 13th birthday.

“PEPP-Advanced certification” or “certification in PEPP-Advanced” means valid certification in Pediatric Education for Prehospital Providers as issued by the American Academy of Pediatrics.

“PHTLS certification” or “certification in PHTLS” means valid certification in Pre-Hospital Trauma Life Support as issued by the National Association of EMTs.

“Physician” means a person who is validly licensed by the New Jersey State Board of Medical Examiners in accordance with the standards set forth at N.J.S.A. 45:9-6.

“Physician assistant” means a person who is validly licensed by the New Jersey State Board of Medical Examiners in accordance with the standards set forth at N.J.S.A. 45:9-27.13.

"Pre-hospital" means the period of time prior to the delivery of a patient to a physician or registered nurse at a general hospital or satellite emergency department.

"Program curriculum" means the Emergency Medical Technician-Paramedic: National Standard Curriculum (EMT-P) 1998 edition published by the National Highway Traffic Safety Administration of the United States Department of Transportation, incorporated hereby by reference, as amended and supplemented. Copies may be obtained from The National Highway Traffic Safety Administration, 400 7th Street S.W., Washington, D.C. 20590 or by calling (888) 327-4236 or accessing the website at [www.nhtsa.dot.gov/people/injury/ems](http://www.nhtsa.dot.gov/people/injury/ems).

"Refresher curriculum" means the Emergency Medical Technician-Paramedic: 2001 National Standard Curriculum Refresher Course edition published by the National Highway Traffic Safety Administration of the United States Department of Transportation, incorporated herein by reference, as amended and supplemented. Copies may be obtained from the National Highway Traffic Safety Administration, 400 7th Street S.W., Washington, D.C. 20590 or by calling (888) 327-4236 or accessing the website at [www.nhtsa.dot.gov/people/injury/ems](http://www.nhtsa.dot.gov/people/injury/ems).

"Registered nurse" means a person who is validly licensed by the New Jersey State Board of Nursing in accordance with the standards set forth at N.J.S.A. 45:11-26.

"Remediation" means the formal process by which students who are experiencing difficulties following the lesson plan receive a formal review of any and all cognitive and psychomotor objectives associated with a specific module.

"Respiratory care practitioner" means a person who is validly licensed by the New Jersey State Board of Respiratory Care in accordance with the standards set forth at N.J.S.A. 45:14E-10.

"Revocation" or "revoked" means the permanent voiding, withdrawal and/or cancellation of a license or certification.

"Satellite emergency department" means a facility that is owned and operated by a general hospital that provides emergency care and treatment.

"Specialty care transport unit" or "SCTU" means a specialized transport medical service vehicle that is validly licensed by the Department and operated in accordance with the standards set forth at N.J.A.C. 8:41.

"Standing orders" means specific treatment protocols, authorized by the Commissioner, that occur prior to any communications with the medical command physician.

"Valid" or "validly" means original (not a photo copy), current, up-to-date, not expired, in effect and/or not past the renewal date required by the issuer.

#### 8:41A-1.4 Waivers

(a) The Commissioner or his or her designee may grant a waiver of any part of this chapter if, in his or her opinion, such a waiver would not:

1. Endanger the life of any person;
2. Endanger the public health, safety or welfare; or
3. Adversely affect the provision of basic or advanced life support care.

(b) Any agency, organization, entity or person seeking a waiver shall apply, in writing, to OEMS.

(c) An application for waiver shall include the following:

1. The nature of the waiver requested;
2. The specific standards for which the waiver is requested;
3. Reasons for requesting the waiver, including a statement of the type and degree of hardship that would result if the waiver is not granted;
4. An alternate proposal that would ensure public safety; and
5. Documentation to support the waiver application.

(d) The Department reserves the right to request additional information before processing an application for waiver.

## SUBCHAPTER 2. EMT-PARAMEDIC TRAINING PROGRAMS

### 8:41A-2.1 General information and requirements

(a) Paramedic training shall consist of two components; didactic and clinical. The didactic component shall be conducted in accordance with these rules by those entities described as being eligible for conducting such training. The didactic component shall serve as the initial training component, while the clinical component shall serve as the secondary component. The clinical training component shall be conducted in accordance with these rules by those sites described as being eligible for conducting such training. No portion of clinical training shall commence until such time as the academic equivalent has been successfully completed.

(b) Each EMT-Paramedic training program shall safeguard the health and safety of its students, faculty and any patients associated with the training activities.

(c) Each EMT-Paramedic training program shall make academic counseling services available to each of its students, both didactic and clinical. Guidance procedures shall be established that include documentation of regular and

timely discussions with qualified faculty and the field preceptors regarding the student's strengths, weaknesses and overall progress in the EMT-Paramedic training program.

(d) Accurate information regarding didactic and clinical training requirements, tuition, fees, institutional policies, programmatic policies, procedures and supportive services shall be available to all EMT-Paramedic training program applicants and students.

(e) The paramedic students' didactic and sponsoring clinical training programs shall maintain on file a descriptive synopsis of the current curriculum, both didactic and clinical, as well as current course objectives, course outlines, schedules of didactic and clinical courses, field experience schedules and instructional plans. These files shall be made available to applicants and students during normal business hours, and shall be made available to Department staff upon demand.

(f) The Department shall conduct such audits and inspections as necessary to ensure compliance with the provisions of this chapter. Within 30 days of the conclusion of the didactic program, the didactic coordinator shall submit to OEMS the final grade reports of the students enrolled. All clinical training sites shall submit student rosters to the Department to monitor the programs for compliance with this chapter.

(g) The didactic coordinator or EMS Educator, as applicable, shall retain students records for at least three years from the end of training or termination of a student from the didactic or clinical portion of an EMT-Paramedic training program and shall make those records available to Department staff upon demand.

#### 8:41A-2.2 Student qualifications

(a) The requirements for enrollment in, and to receive credit for, an EMT-Paramedic training program shall be as follows:

1. Attainment of the age of 18 by the first day of the program;
2. Possession of a high school diploma or its equivalent;
3. Possession of EMT-Basic and CPR certifications. The student shall maintain EMT-Basic and CPR certifications throughout the duration of the EMT-Paramedic training program and until such time as he or she is either certified as an EMT-Paramedic or terminated from the EMT-Paramedic training program. The student's EMT-Basic and CPR certification cards shall be made available to Department staff upon demand;
4. Physical capability to perform all required skills and tasks of an EMT-Paramedic student as cited in the clinical and didactic portions of the program curriculum; and

5. Application, for and receipt of, sponsorship from a mobile intensive care hospital for the clinical portion of an EMT-Paramedic training program.

(b) A person enrolled in an EMT-Paramedic training program shall possess both ACLS and either PALS or PEPP-Advanced certifications.

#### 8:41A-2.3 Didactic training

(a) An EMT-Paramedic training program shall provide a coordinated course of study, consisting of both didactic and skill instruction, designed for the purpose of preparing a person to sit for the NREMT-Paramedic Certification Examination.

(b) The didactic portion of an EMT-Paramedic training program shall be conducted by a postsecondary educational institution such as a university, county college or community college that has been accredited by the New Jersey Commission on Higher Education.

1. An accredited educational institution seeking to be approved as a didactic training site for the purpose of offering the didactic portion of an EMT-Paramedic training program shall first apply, in writing, to OEMS for approval. Application information shall include, but not be limited to, proposed lesson plans, affiliated clinical training sites, instructional personnel, physical plant and course content. Approval of new didactic training sites shall be based on compliance with the requirements of this chapter and on system needs as determined by the Department.

2. No classes shall be offered by an applicant training site until approval is granted by the Department.

3. No institution shall offer, or claim to offer, the didactic portion of an EMT-Paramedic training program until approved by the Department to do so.

(c) Each didactic training site shall employ a didactic coordinator. The didactic coordinator shall have graduated from an accredited college with at least an Associate's degree, be an EMT-Paramedic or registered nurse and have a minimum of three years experience in a mobile intensive care program providing advanced life support cares. In lieu of a college degree, a person may serve as a didactic coordinator if he or she can document to the satisfaction of OEMS that he or she has at least two years of practical experience in the actual training of EMT-Paramedic students. The didactic coordinator's responsibilities shall include, but are not limited to:

1. Coordinating all activities associated with the didactic portion of an EMT-Paramedic training program;
2. Ensuring that all persons providing didactic instruction to students enrolled in the didactic portion of an EMT-Paramedic training program are competent to provide the necessary training and have received formal orientation to the program curriculum, with particular attention to didactic training;

1. A person seeking reciprocity shall first obtain the sponsorship of a mobile intensive care hospital and shall then apply jointly, with that sponsoring mobile intensive care hospital, for reciprocity. All requests shall be made in writing, and shall be in a form and manner specified by the Department, including, but not limited to, a listing of all similar valid certifications and demographic and identifying information.

2. Once the completed application has been received, all information has been verified and the Department determines the person is eligible for reciprocity, a provisional EMT-Paramedic certification shall be issued. This provisional certification shall be valid for a one-year period or the duration of the out-of-State certification, whichever is the lesser amount of time.

i. A provisionally certified EMT-Paramedic shall be monitored for performance by the medical director and the Department.

ii. A provisionally certified EMT-Paramedic shall operate only when under the direct supervision of an EMT-Paramedic, registered nurse or physician. Under no circumstances may a provisionally certified EMT-Paramedic act independently or in conjunction with another provisionally certified EMT-Paramedic on the same MICU, SCTU or AMU.

iii. The EMS Educator or the director shall monitor the progress of the provisionally certified EMT-Paramedic, and shall forward to the Department a progress report at the end of the provisional period, or as required by the Department.

iv. The Department shall have the right to restrict or otherwise limit the scope of practice of a provisionally certified EMT-Paramedic. Failure to meet such conditions or any terms of the provisional period shall be deemed cause for refusal to issue certification.

(b) A person who is not certified by the NREMT as an EMT-Paramedic shall sit for the NREMT-Paramedic Certification Examination within six months after the issuance of a provisional certification.

1. A person who has taken and failed the NREMT-Paramedic Certification Examination and whose out-of-State certification has expired may request an extension of his or her provisional certification until the next available NREMT-Paramedic Certification Examination. Only one such extension shall be granted.

(c) A person who is certified as an EMT-Paramedic by the NREMT shall be eligible for certification, after at least six months of provisional certification, upon endorsement of the sponsoring mobile intensive care hospital.

(d) A person who fails to gain certification at the expiration of the provisional certification shall be ineligible for EMT-Paramedic certification unless he or she successfully

completes a continuing education program for persons with expired certifications, as set forth at N.J.A.C. 8:41A-4.4.

(e) Upon successful completion of the NREMT-Paramedic Certification Examination, or at the end of the provisional period (as applicable), the person shall be issued EMT-Paramedic certification.

(f) The Department shall verify all requests for reciprocity in a timely manner. The Department shall obtain written verification as to the person's status from the certifying agency in the jurisdiction under which he or she is certified.

(g) Persons validly certified as EMT-Paramedics in other jurisdictions shall be eligible for reciprocity, provided the certification period is less than two years from the date it was issued (for example, the certificate is not in the third year of a four-year certification period).

#### 8:41A-4.3 Recertification

(a) The requirements for recertification as an EMT-Paramedic shall be as follows:

1. Possession of EMT-Paramedic, CPR, ACLS and either PALS or PEPP-Advanced certifications;

2. Successful completion of a minimum of 48 hours of advanced level continuing education, as set forth in (a)2i through iii below. The Department may evaluate standard courses (for example, New Jersey State Police HAZ-MAT courses) and college and professional (for credit) courses to determine applicability to EMT-Paramedic recertification. The Department shall provide information on approvals to interested parties.

i. A minimum of three of the six divisions of the program curriculum. The hours shall have been obtained, at a minimum, in each of divisions two through six of the program curriculum;

ii. A minimum of 36 hours shall cover divisions two through six. No more than 12 hours shall be applied to division one; and

iii. A minimum of eight hours of instruction in Pediatric Advanced Life Support;

3. Demonstration to the medical director of proficiency in all skills approved for pre-hospital care, as specified at N.J.A.C. 8:41A-5.1;

i. Proficiency may be demonstrated based on actual observation, field performance, or other methods as deemed necessary by the medical director. The medical director shall complete the forms required by this section and submit them to the Department attesting to the level of proficiency of each EMT-Paramedic seeking recertification. Such forms shall reflect whether the skill level is satisfactory and shall bear the original signature of the medical director. The EMS Educator or director shall

keep records to allow the completion of such forms that may be required for recertification; and

4. Endorsement of a mobile intensive care hospital.

i. The EMS Educator or the director shall verify that all requirements for recertification have been met and that the EMT-Paramedic is physically capable of performing his or her duties and shall forward all required documentation to the Department. The EMS Educator or the director shall sign the endorsement.

ii. If a mobile intensive care hospital chooses not to extend its endorsement for recertification of an EMT-Paramedic, the medical director shall notify the Department and the EMT-Paramedic by certified mail at least 60 calendar days prior to the expiration of the certification. Such notification shall include a statement explaining why such action is being taken, and shall include a plan for remediation, if applicable.

(b) A person seeking recertification shall document successful completion of continuing education requirements as set forth in (a)3i through iii above on a form to be submitted to OEMS. These 48 continuing education hours shall be accrued over the 24-month period immediately prior to recertification;

(c) No person shall be recertified until documentation of all of the requirements set forth in (a)1 through 5 above has been provided.

(d) Continuing education credits shall not be carried forward from one recertification period to the next. At the beginning of the next recertification period, the continuing education balance shall be reset to zero credits.

(e) A new certification card shall be furnished free of charge upon recertification. All requests for replacement cards must be submitted in writing and accompanied by a certified bank check (for example, a cashier's check) or money order in the amount of \$5.00, made payable to "Treasurer, State of New Jersey." Requests sent via e-mail, facsimile or without the \$5.00 fee shall not be honored.

(f) EMT-Paramedic recertifications shall be valid through the expiration date listed on the card, but in no event shall they be valid for more than 24 months from the date of issue. No grace periods are allowed, nor shall extensions be granted.

(g) Consistent with N.J.A.C. 8:41A-5.3(b), a person denied recertification as an EMT-Paramedic shall be entitled to a hearing at the New Jersey Office of Administrative Law to contest the denial.

(h) A person who has not been able to meet the recertification requirements due to personal illness or injury may be eligible for an extension of his or her EMT-Paramedic certification for a period of up to one year.

1. A person seeking such an extension shall submit a request, in writing, to OEMS. The request shall include:

- i. An explanation of the need for the extension;
- ii. Medical documentation from a licensed physician; and
- iii. A letter of endorsement from the Director.

2. The Department shall advise the person of its decision within 30 calendar days of receipt of the request.

3. The length of the extension shall equal the period of disability, but shall not exceed one year. Only one such extension shall be granted.

Petition for Rulemaking.  
See: 41 N.J.R. 2348(b), 4128(b).

#### 8:41A-4.4 Expired certifications

(a) The requirements for certification of a person formerly certified as an EMT-Paramedic who has allowed that certification to expire (that is, a person who, for whatever reason, has not completed the required number of continuing education credits necessary for recertification) shall be as follows:

1. Sponsorship of a mobile intensive care hospital;
2. Possession of EMT-Basic and CPR certifications;
3. Successful completion of the didactic portion of an EMT-Paramedic training program equivalent to the refresher curriculum;
  - i. Prior to the completion of the didactic portion of the program, the person shall complete any other training required to enter the NREMT-Paramedic Certification Examination process, and possess certification in both ACLS and either PALS or PEPP-Advanced, as well as certification in either PHTLS or BTLS;
4. Successful completion of 200 hours of clinical training;
  - i. These hours shall be completed within one year of entering into the program. No hours may be completed until the Department has notified the person that he or she has been admitted into the program;
  - ii. The areas covered by the program shall be determined by the EMS Educator, based on the needs of the person, and shall be scheduled at the discretion of the EMS Educator;
  - iii. During retraining, the person shall have the same status as an EMT-Paramedic student, and shall not act independently to provide advanced life support care;
5. Documentation as required by the NREMT, including but not limited to, certification and medical director endorsement; and

6. Achievement of a passing score on the NREMT-Paramedic Certification Examination.

(b) Upon successful completion of all of the requirements set forth in (a)1 through 6 above, the person shall be issued an EMT-Paramedic certification card, which shall bear the person's previous certification number and that shall be valid for a period of not less than 24, nor more than 30, months.

(c) An EMT-Paramedic whose certification has expired shall retain status as an EMT-Basic for a period of one year from the date of the expiration of his or her EMT-Paramedic certification. A separate EMT-Basic certification card shall not be issued unless specifically requested.

Petition for Rulemaking.  
See: 41 N.J.R. 2348(b), 4128(b).

#### 8:41A-4.5 Inactive status

(a) An EMT-Paramedic who chooses not to be actively engaged in the provision of advanced life support care at the time of recertification may request that he or she be placed on inactive status. Educators, administrators or regulators who are not actively treating patients should consider this status.

1. An EMT-Paramedic seeking to be placed on inactive status shall make such a request, in writing, to OEMS.

i. Requests may be made at any time, provided that they are made at least 30 calendar days before a person's certification is due to expire.

2. Upon being placed on inactive status, the person shall be issued an EMT-Paramedic "Inactive Status" certification card that shall bear the person's EMT-Paramedic certification number and shall clearly identify the person as an inactive EMT-Paramedic. The card shall be valid for a period of 24 months.

i. A person on inactive status shall not act in the capacity, or perform the duties, of a certified EMT-Paramedic.

ii. "Inactive Status" cards shall be renewed automatically, unless the person requests to be placed back on active status.

(b) A person seeking to be placed back on active status shall make such a request, in writing, to OEMS.

1. A person shall not be placed back on active status until he or she has met the standards set forth at N.J.A.C. 8:41A-4.3(a).

2. Upon being placed on active status, the person shall be issued an EMT-Paramedic certification card, which shall bear the person's previous certification number and that shall be valid for a period of not less than 24, nor more than 30, months.

Petition for Rulemaking.  
See: 41 N.J.R. 2348(b), 4128(b).

## SUBCHAPTER 5. SCOPE OF PRACTICE, ENFORCEMENT ACTIONS AND HEARINGS

### 8:41A-5.1 Scope of practice

(a) EMTs-Paramedic shall operate within their approved scope of practice.

(b) The following skills and procedures are within the approved scope of practice for an EMT-Paramedic, an EMT-Paramedic student (provided that the student is under the direct supervision of an EMT-Paramedic, registered nurse or physician) or a provisionally certified EMT-Paramedic (within the limits set forth at N.J.A.C. 8:41A-4.2(a)2):

1. Performance all of the skills and procedures approved for EMTs-Basic, as set forth at N.J.A.C. 8:40A-10.1;

2. Performance of history taking and physical examination of patients in order to obtain necessary information to permit the rendering of appropriate medical care;

3. Utilization of telemetry and proper communications procedures in the field, as defined by the Federal Communications Commission and good professional practice;

4. Visualization of the airway by utilization of the laryngoscope and removal of foreign bodies with forceps;

5. Application of electrodes and monitoring of cardiac electrical activity, including electrocardiograms;

6. Utilization of mechanical cardiopulmonary resuscitation devices; and

7. Assessing and managing patients in accordance with the program curriculum.

(c) In addition, with medical command authorization or utilizing the standing orders set forth at N.J.A.C. 8:41-7 and 8, the persons identified in (b) above may:

1. Initiate IV therapy, either by direct infusion, IV catheter plug or other cannulae-IV lines;

2. Perform venipuncture for the purpose of obtaining blood samples for analysis (excluding blood alcohol levels drawn solely for legal purposes);

3. Prepare and administer approved medications and solutions (that is, those set forth at N.J.A.C. 8:41-6.1) by intravenous, intramuscular, subcutaneous, intraosseous, oral, sublingual, topical, inhalation, rectal or endotracheal routes;

4. Administer oxygen therapy, including nebulizer treatments in accordance with N.J.A.C. 8:41-6.1, non-invasive positive pressure ventilation, and the provide ventilatory support using approved equipment as specified in N.J.A.C. 8:41;

5. Perform cardiac defibrillation, synchronized cardioversion and transcutaneous cardiac pacing;

6. Perform electrocardiogram monitoring, including taking of 12-lead electrocardiogram tracings;
7. Perform endotracheal intubation (oral and nasal) and nasogastric tube insertion and aspiration;
8. Perform pulmonary ventilation by the utilization of oral, nasal, endotracheal or tracheostomy intubation;
9. Perform intraosseous infusion;
10. Perform needle chest decompression; and
11. Perform Valsalva maneuvers;

(d) In addition to the skills and procedures identified in (b) and (c) above, a program or service's medical director may choose to allow EMTs-Paramedic to perform the following procedures, subject to approval by the Department:

1. The insertion of esophageal airways, laryngeal mask airways or other commercial airways of similar design and function;
2. Access of established central venous catheters and subcutaneous indwelling catheters;
3. Access of AV fistulas or shunts;
4. Percutaneous needle cricothyrotomy; and
5. Rapid sequence induction.

(e) The persons identified in (b) above may perform any of the skills and procedures identified in (b) and (c) above in the emergency department of a mobile intensive care hospital provided that the EMT-Paramedic:

1. Is performing under the direct order of a physician;
2. Records the treatment on the patient's chart and signs the chart in compliance with institutional policy;
3. Is providing medical treatment strictly within the approved scope of practice for an EMT-Paramedic;
4. Is present in the emergency department for the sole purpose of meeting training requirements and maintaining the skills necessary for recertification;
5. Does not perform the duties or fill the position of another health care professional employed by the hospital;
6. Does not delay a response to any dispatch as a result of his or her duties in the emergency department; and
7. Is not be utilized to meet any personnel requirement for in-hospital purposes as required by N.J.A.C. 8:43G.

#### 8:41A-5.2 Enforcement actions

(a) The Commissioner, or his or her designee, may summarily suspend a person's EMT-Paramedic certification when, in his or her opinion, the continued certification of that person poses an immediate or serious threat to the public health, safety or welfare.

1. A person whose EMT-Paramedic certification has been summarily suspended shall have the right to apply for emergency relief, as provided for at N.J.A.C. 8:41A-5.3(a).

(b) The Commissioner, or his or her designee, may issue a formal written warning, impose a monetary penalty, place on probation, suspend, revoke and/or refuse to issue or renew the certification of any EMT-Paramedic for violation of any of the rules set forth in this chapter. This shall include, but is not limited to:

1. Demonstrated incompetence or inability to provide adequate services;
2. Deceptive or fraudulent procurement of certification or recertification credentials and/or documentation;
3. Negligent practice;
4. Acting beyond the approved scope of practice of an EMT-Paramedic;
5. Abuse or abandonment of a patient;
6. Rendering of services while under the influence of any substance that substantially compromises a person's decision-making abilities (including, but not limited to, alcohol or narcotics);
7. Operation of any emergency medical services vehicle (including, but not limited to, a BLS ambulance, MICU, SCTU or AMU) in a reckless or grossly negligent manner or while under the influence of any substance that substantially compromises a person's decision-making abilities (including, but not limited to, alcohol or narcotics);
8. Unauthorized disclosure of medical or other confidential patient information;
9. Willful preparation or filing of false medical reports, or the inducement of others to do so;
10. Destruction of medical records, including but not limited to patient care reports, or other records or reports required by the Department;
11. Refusal to respond to a call or to render medical services while on duty because of a patient's race, sex, creed, national origin, sexual preference, age, disability, medical condition or ability to pay;
12. Conviction of any crime;
13. Conviction of any disorderly persons offense;
14. Conviction of a petty disorderly persons offense involving the possession, utilization, sale and/or distribution of any controlled dangerous substance; representing a risk of harm to the health, safety or welfare of patients; and/or involving patient abuse or patient neglect;
15. Misuse, misappropriation or theft of any drug, medication or equipment;