



INTERNATIONAL JOURNAL OF NURSING CARE

Institute of Medico-Legal Publications

4th Floor, Statesman house building
Barakhamba Road, Connaught Place
New Delhi-110001

tel no: +91 - 09971888542

Fax no: +91 11 3044 6500

Email: editor.ijonc@gmail.com

Website: www.ijonc.com

CALL FOR SUBSCRIPTIONS FOR 2013

International Journal of Nursing Care is a double blind peer reviewed international journal which has commenced its publication from January 2013. The journal is half yearly in frequency. The journal covers all aspects of nursing care. The journal has been assigned ISSN 2320-8643 (Print Version) and ISSN 2320-8651 (Online Version). The journal is indexed in many international data bases.

Journal Title	Pricing of Journals		
International Journal of Nursing Care	Print Only	Print+Online	Online Only
INDIAN	INR 3000	INR 4000	INR 2500
FOREIGN	USD 250	USD 350	USD 100

NOTE FOR SUBSCRIBERS

- Advance payment required by cheque/demand draft in the name of " Institute of Medico-Legal Publications " payable at Noida/New Delhi.
- Cancellation not allowed except for duplicate payment.
- Claim must be made within six months from issue date.
- A free copy can be forwarded on request.

Our Contact Info:

Prof. R K Sharma

Editor, International Journal of Nursing Care

Institute of Medico-Legal Publications

4th Floor, Statesman house building
Barakhamba Road, Connaught Place
New Delhi-110001

tel no: +91 - 09971888542

Fax no: +91 11 3044 6500

Email: editor.ijonc@gmail.com

Website: www.ijonc.com

Published, Printed and Owned : Dr. R.K. Sharma
Designed and Printed : M/s Vineeta Graphics, B-188, Subash Colony, Ballabgarh Faridabad
Published at : 4th Floor, Statesman House Building, Barakhamba Road,
Connaught Place, New Delhi-110 001
Editor : Dr. R.K. Sharma, Mobile:91-9971888542, Fax No: +91 11 3044 6500



MICHAEL R. PENCE, Governor
STATE OF INDIANA

INDIANA DEPARTMENT OF HOMELAND SECURITY
302 West Washington Street
Indianapolis, IN 46204

**EMERGENCY MEDICAL SERVICES COMMISSION
TECHNICAL ADVISORY COMMITTEE MEETING MINUTES**

DATE: April 1, 2014 10:00 a.m.

LOCATION: Noblesville Fire Department, Station 77
15251 Olio Road
Noblesville, IN 46060

PRESENT: Leon Bell, Chairman, ALS Training Institute
Jessica Lawley, ALS Training Program Director
Faril Ward, EMS Chief of Operating Officer
Michael McNutt, BLS Training Program Director
Tina Butt, First Responder Training Director
Charles Ford, EMS Chief Executive Officer
Michael Gamble, Emergency Department Director
Sherry Fetters, Vice Chairman, EMS Chief Executive Officer

NOT PRESENT: Edward Bartkus, EMS Medical Director
Elizabeth Weinstein, EMS for Children
Sara Brown, EMS Medical Director
Jaren Kilian,

OTHERS PRESENT: Myron Mackey, EMS Commissioner, John Zartman, EMS
Commissioner, Terri Hamilton EMS Commissioner, EMS State
Director Michael Garvey, Elizabeth Fiato, IDHS Staff, other IDHS
Staff

A) Meeting called to order at 10:07 a.m. by Chairman Leon Bell.

B) Quorum present

C) Adoption of minutes:

A motion was made by Mr. Faril Ward to accept the minutes from the meeting held on March 4, 2014. The motion was seconded by Mr. Charles Ford. The motion passed unanimously.

D) Public Comment:

None

E) Announcements:

a. Upcoming TAC meeting dates:

i. May 6, 2014

ii. July 1, 2014

iii. September 2, 2014

iv. November 18, 2014

b. Commission Staff Report

i. Chairman Bell asked if there was any legislation that will impact the TAC. Director Mike Garvey stated that there may be with a Narcan education program for law enforcement that the TAC may need to look at soon.

c. Surveys

TAC will perform analysis in May on results for all three surveys. Chairman Bell stated that if any TAC members do not have the survey letter and links email Candice and she will send it to you so the members can send it out.

Break out session 10:13am

Reconvened 12:50pm

Ms. Sherry Fetters reported out for the operations sub-group regarding the rule rewrite for the new Advance provider level. The group proposed to replace the word Intermediate with Advanced and add approved medical devices as well as medications for the Advance. They further proposed to delete all the medical devices and medications that were in the previous Intermediate language that were not approved for the Advanced EMT level. Discussion followed regarding IV fluids and medications that are allowed for the Advance. Ms. Fetters stated that the group had not completely replaced all of the Intermediates with Advance at the time of the discussion.

A motion was made by Ms. Tina Butt to accept the operation sub-groups recommendations to the EMS Commission for Advance provider organizations rule. The motion was seconded by Mr. Michael McNutt. The motion passed unanimously.

A motion was made by Mrs. Jessica Lawley to give Ms. Sherry Fetters editorial rights to finish typing the rest of the rule. With the agreement that after Ms Fetters is finished she will send it out for review to all the members of the TAC before its

inclusion in the EMS Commission packet for the April 25, 2014 Commission meeting. The motion was seconded by Ms. Tina Butt. The motion passed unanimously.

The education sub-committee read over and typed the recommendations from the March 4th meeting so they were ready to go to the Commission on April 25th. The group also discussed briefly the Student Bill of Rights.

Chairman Bell stated he would like the following to be discussed at the next TAC meeting on May 6th:

1. Operations
 - a. Epi-pen
 - b. TEMS
 - c. Article number 4 of the IAC 836 for Primary Instructors and Training Instructors and all levels
- F) Assignments-
- a. Old Assignments (2010-present)
 - i. In Progress
 1. Templates for hybrid course from EMR to Paramedic level
 2. EVOC training, Background Checks, Drug and Alcohol screens- the TAC is waiting on the results IDHS staff has sent out the surveys.
 3. Reassigned the Indiana Fire Chiefs Association letter –EPI pen EMR level- has been assigned to the operations group.

A motion was made by Dr. Michael Gamble to adjourn the meeting. The motion was seconded by Ms. Sherry Fetter. The motion passed. The meeting was adjourned at 1:16pm.

Approved _____

Leon Bell, Chairman

Rule 15. Requirements and Standards for Advanced Emergency Medical Technician Provider Organizations

836 IAC 2-7.2-1 General requirements for Advanced Emergency Medical Technician provider organizations

Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20

Affected: IC 4-21.5; IC 16-31-3; IC 16-41-10

Sec. 1. (a) A person shall not:

- (1) furnish;
- (2) operate;
- (3) maintain;
- (4) advertise; or
- (5) otherwise engage in providing;

emergency medical services as an Advanced Emergency Medical Technician provider organization unless the person is certified as an Advanced Emergency Medical Technician provider organization.

(b) If the Advanced Emergency Medical Technician provider organization also provides transportation of emergency patients, the Advanced Emergency Medical Technician provider organization shall be certified as an ambulance service provider organization in accordance with the requirements specified in 836 IAC 1 under IC 16-3.

(c) The Advanced Emergency Medical Technician nontransport provider organizations shall meet the requirements specified in 836 IAC 1-1-4 through 836 IAC 1-1-8.

(d) The Advanced Emergency Medical Technician provider organization shall ensure the following:

- (1) Ambulances used are certified and meet the requirements specified in 836 IAC 1-3.
- (2) All nontransport emergency medical services vehicles used for the provision of advanced life support meet all of the requirements in 836 IAC 2-14.

(e) The chief executive officer of each Advanced Emergency Medical Technician provider organization shall certify that the provider organization has an agreement, or interdepartmental memo if hospital based, with one (1) or more supervising hospitals for the following services:

- (1) Continuing education.
- (2) Audit and review.
- (3) Medical control and direction.
- (4) Provisions to allow the Advanced Emergency Medical Technicians affiliated with the supervised Advanced Emergency Medical Technician provider organization to function within the appropriate hospital department in order to obtain continuing practice in their clinical skills. The agreement or interdepartmental memo shall include a detailed description of how such services shall be provided to the Advanced Emergency Medical Technician provider organization. In those cases where more than one (1) hospital enters into an agreement, or seeks to enter into an agreement, with an Advanced Emergency Medical Technician provider organization as a supervising hospital, the interhospital agreement shall clearly define the specific duties and responsibilities of each hospital to ensure medical and administrative accountability of system operation.

(f) The Advanced Emergency Medical Technician provider organization shall have a medical director provided by the Advanced Emergency Medical Technician provider organization or jointly with the supervising hospital. The medical director is responsible for providing competent medical direction as established by the medical control committee. Upon establishment of a medical control policy, the medical director and chief executive officer of the Advanced Emergency Medical Technician provider organization have the duty to enact the policy within the Advanced Emergency Medical Technician provider organization and accordingly enforce the policy. The duties and responsibilities of the medical director include, but are not limited to, the following:

- (1) Provide liaison with physicians and the medical community.
- (2) Assure that the:
 - (A) drugs;
 - (B) medications;
 - (C) supplies; and
 - (D) equipment;

are available to the Advanced Emergency Medical Technician provider organization.

- (3) Monitor and evaluate day-to-day medical operations of Advanced Emergency Medical Technician provider organizations.
- (4) Assist in the provision and coordination of continuing education.
- (5) Provide individual consultation to Advanced Emergency Medical Technicians.

- (6) Participate in at least quarterly audit and review of cases treated by Advanced Emergency Medical Technicians of the supervising hospital.
- (7) Attest to the competency of Advanced Emergency Medical Technicians affiliated with the Advanced Emergency Medical Technician provider organization to perform skills required of an Advanced Emergency Medical Technician under 836 IAC 4-7.1.
- (8) Establish protocols for basic life support and advanced life support.
- (9) Establish and publish a list of medications, including minimum quantities and dosages to be carried on the vehicle.
- (10) Provide liaison between the:
 - (A) emergency medical service provider organization;
 - (B) emergency medical service personnel; and
 - (C) hospital;
 in regards to communicable disease testing under IC 16-41-10.
- (g) The Advanced Emergency Medical Technician provider organization shall do the following:
 - (1) The Advanced Emergency Medical Technician provider organization shall maintain a communications system that shall be available twenty-four (24) hours a day between the Advanced Emergency Medical Technician provider organization and the emergency department, or equivalent, of the supervising hospital using radio or cellular voice communications. The communications system shall be licensed by the Federal Communications Commission.
 - (2) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services.
 - (3) Notify the commission in writing within thirty (30) days of assigning any individual to perform the duties and responsibilities required of an Advanced Emergency Medical Technician. This notification shall be signed by the provider organization and medical director of the provider organization.
- (h) An Advanced Emergency Medical Technician ambulance service provider organization must be able to provide an Advanced Emergency Medical Technician level response. For the purpose of this subsection, "Advanced Emergency Medical response" consists of the following:
 - (1) An Advanced Emergency Medical Technician.
 - (2) An emergency medical technician or higher.
 - (3) An ambulance in compliance with the requirements of section 3(d)(2) of this rule.
 - (4) During transport of the patient, the following are the minimum staffing requirements:
- (i) If Advanced Emergency Medical Technician level advanced life support treatment techniques have been initiated or are needed:
 - (1) the ambulance must be staffed by at least an Advanced Emergency Medical Technician and an emergency medical technician; and
 - (2) an Advanced Emergency Medical Technician shall be in the patient compartment.
- (j) If advanced life support treatment techniques have not been initiated and are not needed:
 - (1) the ambulance must be staffed by at least an emergency medical technician; and
 - (2) an emergency medical technician shall be in the patient compartment.
- (k) For an Advanced Emergency Medical Technician provider organization, when an advanced life support nontransport vehicle is dispatched Advanced Emergency Medical Technician response, it shall, at a minimum, be staffed by an Advanced Emergency Medical Technician.
 - (1) The Advanced Emergency Medical Technician provider organization shall do the following:
 - (a) Notify the agency in writing within thirty (30) days of any change in the operation as stated in the application.
 - (2) With medical director and chief executive officer approval, allow a graduate or student of an Indiana approved Advanced Emergency Medical Technician course to perform advanced life support under the direction of a preceptor. This person shall be actively pursuing certification as an Indiana certified Advanced Emergency Medical Technician. This provision shall be limited from one (1) year from date of course completion as indicated on course report.

(l) All ambulances and nontransport vehicles used by the Advanced Emergency Medical Technician provider organization shall meet the insurance requirements under 836 IAC 1-3-6. (*Indiana Emergency Medical Services Commission; 836 IAC 2-7.2-1; filed Feb 20, 2003, 8:00 a.m.: 26 IR 2353; filed Jun 11, 2004, 1:30 p.m.: 27 IR 3542; filed Jul 31, 2007, 10:01 a.m.: 20070829-IR-836060011FRA; readopted filed Jul 29, 2010, 8:07 a.m.: 20100825-IR-836100267RFA*)

836 IAC 2-15-2 Application for certification; renewal

Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20

Affected: IC 16-31-3

Sec. 2. (a) Application for certification as an Advanced Emergency Medical Technician provider organization shall be made on forms provided by the agency and shall include, but not be limited to, the following:

(1) An applicant shall complete and submit the required forms to the agency at least sixty (60) days before the requested effective date of the certificate.

(2) Each application shall include a narrative summary of plans for providing advanced life support services, including the following:

(A) Defined primary area of response, including location of advanced life support response vehicles.

(B) A listing of all Advanced Emergency Medical Technicians, including certification numbers, to be affiliated by the Advanced Emergency Medical Technician provider organization.

(C) The staffing pattern of personnel.

(D) Base of operations.

(E) Organizational structure, including name, address, and phone numbers for the:

(i) owner;

(ii) chief executive officer;

(iii) chief operations officer;

(iv) training officer; and

(v) medical director.

(F) Location of Advanced Emergency Medical Technician provider organizations records.

(G) Proof of insurance coverage for emergency medical service vehicles as required by 836 IAC 1-3-6.

(H) Plans and methodologies to ensure that the trained personnel are provided with supervised continuing education to maintain proficiency. Continuing education is under the direct supervision of the Advanced Emergency Medical Technician provider organization medical director with the cooperation of the supervising hospital.

(I) A listing of medications and special onboard life support equipment to be carried on board each vehicle as approved by the medical director.

(J) Letter of approval from the supervising hospital stating acceptance of the:

(i) Advanced Emergency Medical Technicians;

(ii) agreement to fulfill the responsibilities of the supervising hospital.

(K) Certification required in section 1(d) of this rule.

(L) Other information as required by the agency.

(3) Advanced Emergency Medical Technician provider organizations that do not also provide transportation of emergency patients shall submit and maintain a copy of a current written agreement between the nontransporting Advanced Emergency Medical Technician provider organization and an ambulance service provider organization certified under IC 16-31. The agreement shall:

(A) ensure that the nontransporting Advanced Emergency Medical Technician provider organization can be assured that patients treated shall be transported in a timely and safe manner; and

(B) not preclude another ambulance service provider organization, if available, from transporting the patients.

(C) Upon approval, an Advanced Emergency Medical Technician provider organization shall be issued certification for the provisions of advanced life support certification.

(4) The certificate:

(A) expires on the date appearing in the expiration date section of the certificate; and

(B) shall be prominently displayed at the place of business.

(C) An application for an Advanced Emergency Medical Technician provider organization certification renewal shall be made at least sixty (60) days before the expiration date of the current certification.

(5) Application for renewal shall:

(A) be made on forms provided by the agency; and

(B) show evidence of compliance with the requirements as set forth for original certification.

(Indiana Emergency Medical Services Commission; 836 IAC 2-7.2-2; filed Feb 20, 2003, 8:00 a.m.: 26 IR 2355; filed Jun 11, 2004, 1:30 p.m.: 27 IR 3544; filed Jul 31, 2007, 10:01 a.m.: 20070829-IR-836060011FRA; readopted filed Jul 29, 2010, 8:07 a.m.: 20100825-IR-836100267RFA)

836 IAC 2-15-3 Advanced Emergency Medical Technician provider organization operating procedures

Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20

Affected: IC 16-31-3

Sec. 3. (a) Each Advanced Emergency Medical Technician provider organization shall do the following:

(1) Comply with the ambulance service provider operating procedures of 836 IAC 1-2-3. The Advanced Emergency Medical Technician provider organization nontransport provider organization shall comply with the operating procedures listed in 836 IAC 1-1-8.

(2) Establish daily equipment checklist procedures to ensure the following:

(A) Electronic and mechanical equipment are in proper operating condition.

(B) Emergency response vehicles are maintained in a safe operating condition at all times.

(C) All required medications and intravenous fluids approved by the medical director of the Advanced Emergency Medical Technician provider organization and the supervising hospital are on board all nontransport emergency medical services vehicles and ambulances when used for the provision of advanced life support and available to the Advanced Emergency Medical Technician.

(D) Equipment, medication, fluid, and supplies have not exceeded the manufacturer's specified expiration date.

(E) A copy of the medication list and protocols shall be maintained by the Advanced Emergency Medical Technician provider organization and the supervising hospital emergency department. Any changes to the medications list shall be forwarded to the agency within thirty (30) days.

(F) All medications and advanced life support supplies are to be supplied by order of the medical director.

Accountability for:

(1) distribution;

(2) storage;

(3) ownership; and

(4) security;

of medications is subject to applicable requirements as determined by the medical director, pharmacist, and the United States Department of Justice Drug Enforcement Administration.

(3) The Advanced Emergency Medical Technician provider organization shall ensure the following:

(A) That stocking and administration of supplies and medications are limited to the Indiana Advanced Emergency Medical Technician curriculum and the following approved modules:

(i) Acquisition and transmission of 12 Lead with continuing monitoring

(ii) Manual defibrillation

(iii) Acquisition and interpretation of the five (5) rhythms

Ventricular Fibrillation

Ventricular Tachycardia

Asystole

Pulseless Electrical Activity

Normal Sinus

(iv) Non visualized airway

(v) Adult IO

(4) Procedures performed by the Advanced Emergency Medical Technician are also limited to the Indiana Advanced Emergency Medical Technician curriculum and the following approved modules:

(i) Acquisition and transmission of 12 Lead with continuing monitoring

(ii) Manual defibrillation

(iii) Acquisition and interpretation of the five (5) rhythms

Ventricular Fibrillation

Ventricular Tachycardia

Asystole

Pulseless Electrical Activity

Normal Sinus

(iv) Non visualized airway

(v) Adult IO

(5) That all ambulances used for the provision of advanced life support contain the emergency care equipment required in 836 IAC 1-3-5, the rescue equipment required in 836 IAC 1-3-4, and communication equipment required in 836 IAC 1-4-2. The advanced life support emergency medical services vehicles shall also carry the following equipment:

(A) Portable defibrillator

(B) Intravenous fluids and administration supplies approved by the medical director, including pediatric and adult IO supplies.

(C) An Advanced Emergency Medical Technician provider organization and any affiliated Advanced Emergency Medical Technician possessing approval for intravenous line placement from the medical director may transport and treat a patient or patients from a health care facility as follows if:

(1) The only procedure that has been previously initiated for the patient is an intravenous line or lines administering prepackaged solutions of dextrose or electrolytes that contain one (1) or more of the following additives and no others:

(i) Vitamins.

(ii) Sodium chloride, excluding saline solutions in excess of nine-tenths percent (0.9%) concentration.

(iii) Potassium chloride (forty (40) milliequivalent per liter maximum).

(D) The ambulance contains sufficient quantities of the intravenous supplies and solutions received by the patient in order to:

(1) maintain the patient's established medical intervention; and to *[sic]*

(E) manage patient complications that may be reasonably anticipated to occur en route to the patient's destination.

(F) Medications and medical devices as approved by the medical director limited to the following:

(1) Baby aspirin, eighty-one (81) milligrams each.

(2) Oral glucose.

(3) Sublingual Nitroglycerine

(4) 1:1000 Epinephrine

(5) Glucagon

(6) Dextrose solution

(7) Inhaled beta agonist

(8) Narcotic (Opioid) antagonist

(9) Blood glucose monitor

(10) Pulse oximetry capable of adult and pediatric monitoring

(11) Length based pediatric resuscitation tape

(G) The following medications and medical devices as approved by the medical director may be carried:

(1) Cardiac monitor capable of any or all of the following:

(i) Continuous cardiac monitoring

(ii) Manual defibrillation

(iii) 12 Lead Acquisition and transmission

(2) Nitrous oxide

(3) Epinephrine auto-injector or auto-injectors

(6) A current copy of advanced life support protocols shall be maintained on board the emergency medical services vehicle at all times.

(7) A copy of the medication list, including quantities and concentrations approved by the medical director.

(8) The Advanced Emergency Medical Technician provider organization shall do the following:

(A) Ensure that all nontransport emergency medical services vehicles used for the provision of advanced life support meet all of the requirements in 836 IAC 2-14.

(B) Follow the rigid sanitation procedures listed in 836 IAC 1-1-8.

(9) An Advanced Emergency Medical Technician provider organization shall not do the following:

(A) Operate an ambulance or other emergency medical service vehicle unless it is in full compliance with this article.

(B) Transport any emergency patient or patient receiving advanced life support in any vehicle except an ambulance certified under IC 16-31.

(10) Advanced Emergency Medical Technicians are prohibited from having in their possession, or maintained on board emergency response vehicles, any advanced life support equipment or supplies that have not been approved by the Advanced Emergency Medical Technician provider organization medical director. (*Indiana Emergency Medical Services Commission; 836*

IAC 2-7.2-3; filed Feb 20, 2003, 8:00 a.m.: 26 IR 2356; filed Jun 11, 2004, 1:30 p.m.: 27 IR 3545; filed Jul 31, 2007, 10:01 a.m.:

20070829-IR-836060011FRA; readopted filed Jul 29, 2010, 8:07 a.m.: 20100825-IR-836100267RFA)

836 IAC 2-7.2-4 Application for provisional certification

Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20

Affected: IC 4-21.5; IC 16-31-3-8; IC 16-31-3-20

Sec. 4. (a) An applicant may apply for and obtain provisional certification as an Advanced Emergency Medical Technician provider organization for the purpose of prehospital training of Advanced Emergency Medical Technician students when in the presence of a preceptor approved by the commission in accordance with this section.

(b) A provisional certification may only be issued to a certified ambulance service provider organization.

(c) The applicant shall submit a fully completed application for provisional certification on forms provided by the agency.

(d) The provisional certification may only be issued:

(1) after the applicant has demonstrated to the satisfaction of the director that the ambulance to be used for such training is certified and meets the requirements of this article; and

(2) if the ambulance service provider organization has and shall maintain an adequate number of Advanced Emergency Medical Technician students, preceptors, and ambulances to provide continuous twenty-four (24) hour advanced life support service.

(e) The provisional certification expires not later than the earlier of the following dates:

(1) Sixty (60) days after the completion date of the Advanced Emergency Medical Technician course completion as identified on the approved course application.

(2) Twenty-four (24) months from the starting date of the course contained on the approved course application.

(f) The issuance of an Advanced Emergency Medical Technician provider organization certification invalidates any provisional certification. (*Indiana Emergency Medical Services Commission; 836 IAC 2-7.2-4; filed Jun 11, 2004, 1:30 p.m.: 27 IR*

3547; filed Jul 31, 2007, 10:01 a.m.: 20070829-IR-836060011FRA; readopted filed Jul 29, 2010, 8:07 a.m.:

20100825-IR-

836100267RFA)

Attachment #6

Greg Poe, MHA, CPHQ
Director of Quality & Systems Improvement
American Heart Association
Gregory.poe@heart.org

**MISSION:
LIFELINE™**



Mission: Lifeline EMS Recognition 

It's a brand new program that recognizes EMS teams across the nation for their vital role in providing timely treatment for STEMI patients through Mission: Lifeline systems of care.

What are the Achievement Measures?

1. Percentage of patients with non-traumatic chest pain \geq 35 years treated by EMS who get a pre-hospital 12-lead electrocardiogram
2. Percentage of STEMI patients with first (pre-hospital) medical contact to device time within 90 minutes (non-transfer)
3. Percentage of STEMI patients taken to a referral hospital who administers fibrinolytic therapy with a door to needle time within 30 minutes.

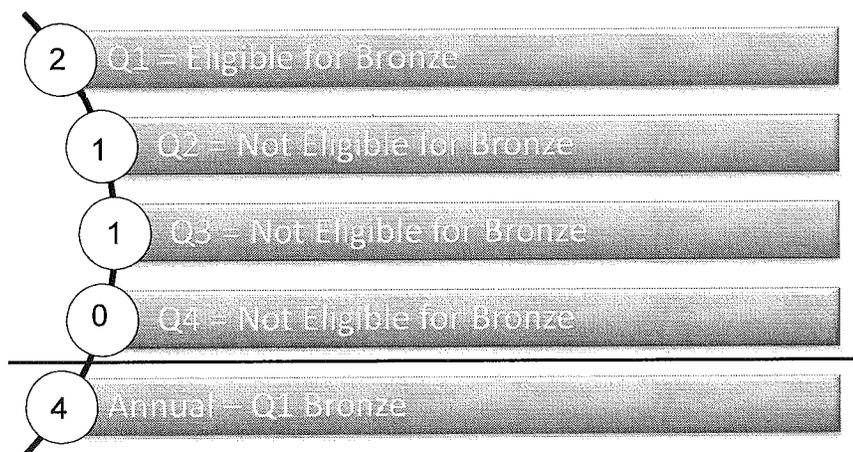
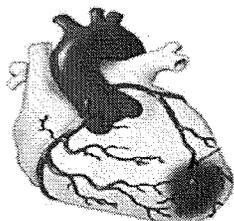
Must all 3 measures be reported?

Transport Destination Protocols determine achievement measures required to complete:

Agencies with STEMI patients transported to STEMI Receiving Centers only	Reporting Measures #1 and #2 required
Agencies with STEMI patients transported to STEMI Referring Centers only	Reporting Measures #1 and #3 required
Agencies with STEMI patients transported to both STEMI Receiving Centers and STEMI Referring Centers	Reporting Measures #1, #2, and #3 required

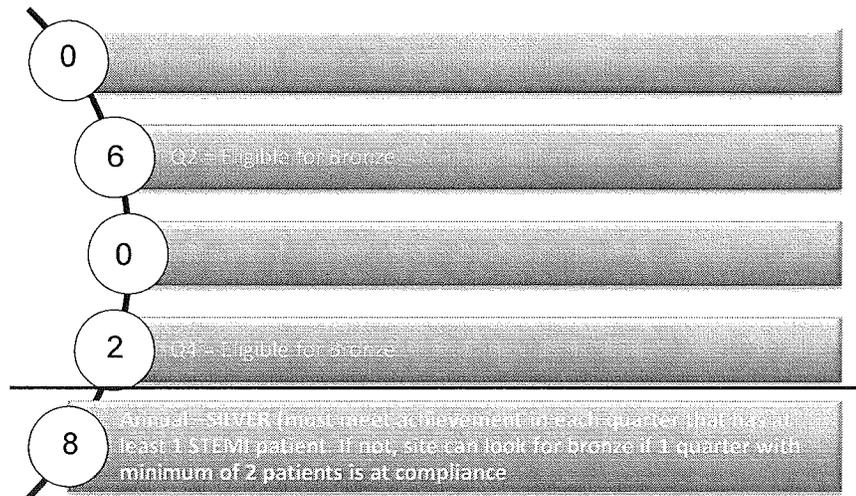
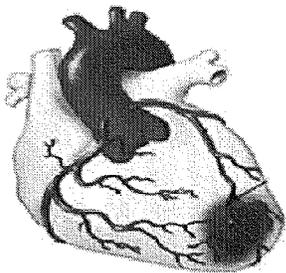
What is the volume requirement for EMS Recognition?

- BRONZE eligibility = At least 2 STEMI patients in the reporting quarter with a minimum of 4 total for the year



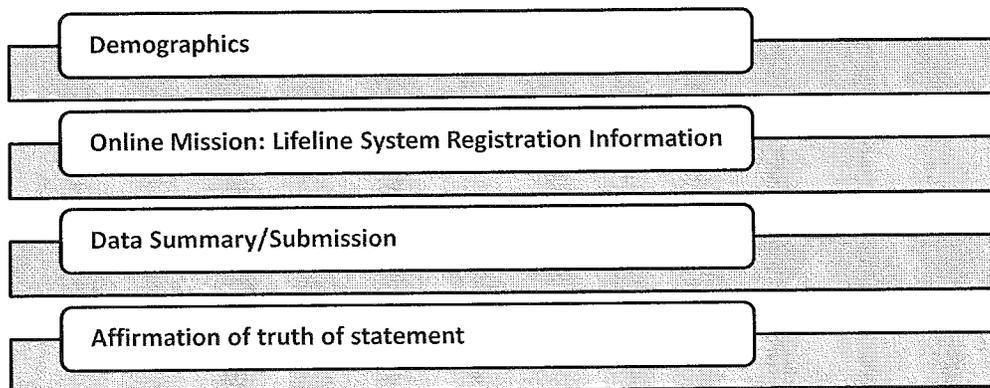
What is the volume requirement for EMS Recognition?

- SILVER eligibility = At least 8 STEMI patients total for the year. Each reporting quarter (quarter with patients in the denominator) must meet achievement criteria.



How will AHA collect the Pre-Hospital Data?

- Self reported summary
- Web based submission



Will the validity of the Data be verified?

- No (*AHA Staff will not validate, but all applications will be subject to audit*)
- Person submitting data is requested to be
 - Qualified and appropriately designated staff person of the EMS Agency
 - Training Officer
 - Administrative Leadership

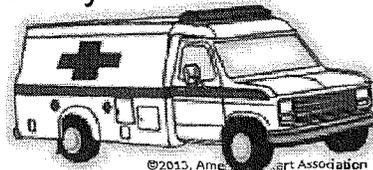
What is the cost for EMS Agencies participating in the M:L EMS Recognition Program?

\$\$ NO COST \$\$



How will the EMS recognition program be structured?

- Achievement levels of
 - Bronze – 1 Calendar Quarter
 - Silver – 1 Calendar Year
 - Gold – 2 Calendar Years (Start in 2015)
- Submit recognition application annually for the previous calendar year of data using a web based self entry portal.
- Submitted data summary will be reviewed by AHA Staff
- Awards issued in Spring

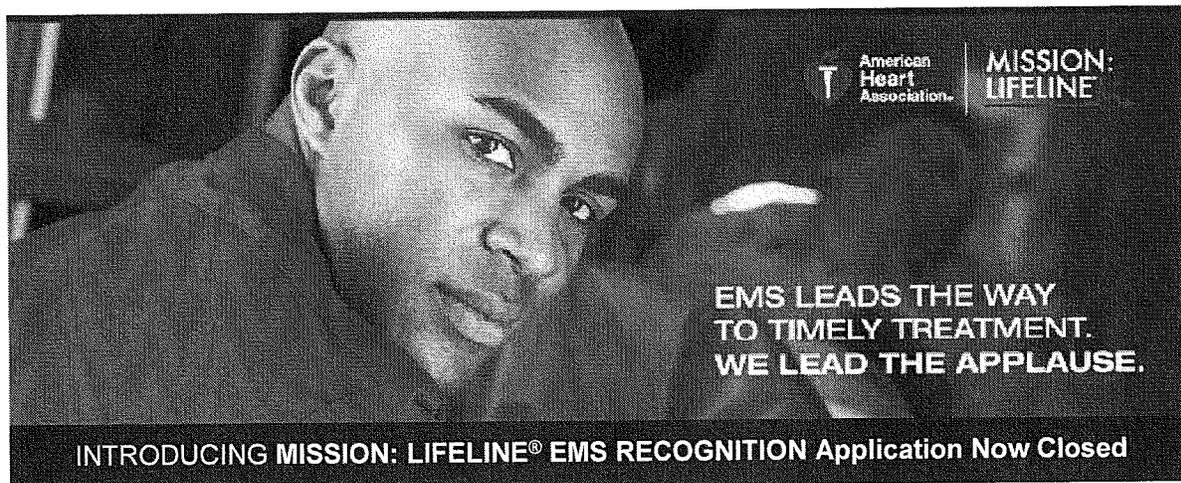


©2013, American Heart Association 11

What is the Timeline for the EMS Recognition Program?



www.heart.org



A black and white advertisement featuring a close-up of a man's face on the left. On the right, there is a dark rectangular area containing the American Heart Association logo (a stylized 'T' with 'American Heart Association' text) and the 'MISSION: LIFELINE' logo. Below these logos, the text reads: 'EMS LEADS THE WAY TO TIMELY TREATMENT. WE LEAD THE APPLAUSE.' At the bottom of the advertisement, a dark banner contains the text: 'INTRODUCING MISSION: LIFELINE® EMS RECOGNITION Application Now Closed'.

2014 Award Recipients Silver Award

- American Medical Response (Evansville)
- Fishers Fire and Emergency Services (Fishers)
- Indianapolis EMS (Indianapolis)

Thank you.
Questions?

Attachment #8



EMS Branch

Field Division Report

EMS Forums: Several forums have taken place. We have had around a total of 50 personnel in attendance. The power point presentation will be placed on our webpage for review.

Provider report: 2 new provider organizations since last meeting.

Vehicles processed since last Commission meeting: 22

Complaints and investigation currently open: 4

Audit completed since last meeting: 3

Attachment #9



April 16, 2014

Re: Second Review of the Indiana Data in NEMSIS – *A NEMSIS Technical Assistance Center (TAC) Review*

Marshal Jim L. Greeson
State Fire Marshal

Indiana Department of Homeland Security
Division of Fire and Building Safety
Emergency Medical Services
302 W. Washington Street
Indianapolis, IN 46204

Marshal Greeson and the Indiana DHS EMS Team

I wanted to provide you with a review of the Indiana data submitted to populate the NEMSIS national EMS database received in the last two months. Initial submissions began on March 20th and are ongoing.

The NEMSIS TAC updates its warehouse every Friday; therefore any data submitted from approximately 1000 Mountain Time on a Friday until 0700 the next Friday are not immediately available.

The initial NEMSIS TAC review of the Indiana data identified 124,962 EMS records in the national EMS database (NEMSIS). Since then the Indiana DHS team have worked to submit additional individual EMS Agency XML files. With the most recent update to the NEMSIS warehouse on Friday, April 11th Indiana submitted an additional 15,500 EMS records, with the total 140,319 in the National EMS Database.

This number will continue to grow as more records have been submitted the week of April 14th. With the submissions of 44 additional files the number of EMS records is now at 155,040 and will be reflected in the next NEMSIS warehouse updated scheduled for Friday, April 18th 2014.

In addition to this summary report, please review the excel documents which list the number of records submitted for each calendar year by EMS Agency ID as well as by Quarter and Year.. The documents are titled:

- 1) IN EMS agencies by Year in NEMSIS (as of 04-11-2014)
- 2) IN EMS agencies by Qtr_Year in NEMSIS (as of 04-11-2014)

Note: Please note, when exporting data from the NEMSIS cube excel drops any leading zeroes. For example, EMS agency ID 0004 appears as 4 in the excel spreadsheet.

N. Clay Mann, PhD, MS
Principal Investigator

Karen Jacobson, BA, NREMT-P
NEMSIS Director

Jorge Rojas, BS
IT Coordinator / Data Manager / Analyst

Keith Davis
Database Architect

Mengtao Dai, MS
Programmer

Kevin White, BS
BI Developer / Data Manager

Jianwen Lai, BS
Programmer

Monet Iheanacho, BA
Program Coordinator

Lana Moser, AA
Information Coordinator

Rene Enriquez, BS
IT Administration



I look forward to continuing to work with you as you utilize the NEMSiS reporting tools. Please don't hesitate to contact me with any questions you may have.

Sincerely,

Karen E Jacobson

Karen E. Jacobson, BA, NREMT-P
NEMSiS Director

801-585-1631

Karen.Jacobson@hsc.utah.edu

Indiana EMS Data Review #2 (April 16, 2014):

April 16, 2014 updates are indicated in blue font in the .

As of the April 11, 2014 NEMESIS warehouse update Indiana now has 140,319 (previously 124,962) EMS records in the NEMESIS Enhanced Analytical Cube and National Database. Previously there were 124,962 records. The NEMESIS TAC maintains a 2+ year rolling database of EMS responses. This means we currently have available data for 2012, 2013, and 2014.

Indiana EMS Agencies

- 84 distinct EMS agencies are represented in the NEMESIS national database as having records submitted to NEMESIS over the 2+ years (2012-2014).
- April 16th update: 91 EMS agencies have data within NEMESIS.
- The breakdown by Year and Quarter and Year is shown below

2012 Qtr 1	2012 Qtr 2	2012 Qtr 3	2012 Qtr 4	2012 Total
5,572	5,846	6,728	6,571	24,717
6,814	6,407	8,698	6,798	28,717
EMS Agencies: 14	EMS Agencies: 15	EMS Agencies: 17	EMS Agencies: 18	EMS Agencies: 24
18	20	21	21	25

2013 Qtr 1	2013 Qtr 2	2013 Qtr 3	2013 Qtr 4	2013 Total
9,518	14,814	19,784	30,799	74,915
9,886	14,814	19,784	30,799	75,283
EMS Agencies: 26	EMS Agencies: 53	EMS Agencies: 59	EMS Agencies: 62	EMS Agencies: 74
31	53	59	62	77

2014 Qtr 1	2014 Qtr 2	2014 Qtr 3	2014 Qtr 4	2014 Total
25,330	--			25,330
36,303	16			36,319
EMS Agencies: 35	EMS Agencies: --			EMS Agencies: 47
54	2			53

EMS Agency Configuration in Indiana (according to data submitted to NEMSIS):

1) Level of Service (D01_07)

	LEVEL OF SERVICE						Other Agency Value [This is a transformed value]
84 EMS Agencies	EMT-Basic	EMT-Intermediate	EMT-Paramedic	First Responder	Nurse		
# of EMS Agencies	20	6	50	2	4		3
	22	6	55	2	4		4
Total Records Represented	4,268	2,107	91,386	23,326	3,585		290
	4,747	2,107	103,047	23,421	6,301		696

2) Organizational Type (D01_08)

	ORGANIZATION TYPE					Private, Non-Hospital
84 EMS Agencies	Community, Non-Profit	Fire Department	Governmental, Non-fire	Hospital		
# of EMS Agencies	13	35	15	11		10
	13	39	16	11		12
Total Records Represented	5,081	46,757	10,382	20,777		41,965
	5,176	49,306	10,527	21,192		54,118

3) Organization Status (D01_09)

	ORGANIZATION STATUS		
84 EMS Agencies	Mixed	Non-Volunteer [Paid]	Volunteer
# of EMS Agencies	41	34	9
	42	39	10
Total Records Represented	50,226	73,678	1,058
	51,322	87,815	1,182

4) EMS Agencies by Level of Service and Organization Status

[84] 91 EMS Agencies	EMT-Basic	EMT-Intermediate	EMT-Paramedic	First Responder	Nurse	Other Agency Value
Mixed	10	4	23	2	0	3
	10	4	23	2	0	4
Non-Volunteer [Paid]	3	1	27	0	3	0
	3	1	32	0	0	0
Volunteer	7	1	0	0	1	0
	8	1	0	0	1	0

Busiest Incident Zip Code (E08_15) by Type of Service Requested (E02_04)

1) Ordered by the 3-digit Incident Zip Code where Type of Service Requested = 911 Response (Scene) (Top 15):

Incident Zip Codes (3-digit)	All	911 Response (Scene)	Intercept	Interfacility Transfer	Medical Transport	Mutual Aid	Standby
ALL Zip Codes:	140,319	83,433	333	32,576	23,548	89	340
465	28,771	17,705	55	1,557	9,406	16	32
478	10,631	10,588	10	15	16		2
467	9,540	7,338	8	2,056	45	4	89
460	8,810	7,135	37	1,132	492	5	9
479	11,872	6,152	37	1,269	4,391	6	17
473	7,433	6,052	9	932	421	10	9
476	5,725	5,027		271	396		31
463	18,579	4,331	7	9,277	4,947	14	3
461	4,762	3,361	16	905	470	4	6
466	5,584	3,174	5	980	1,418	2	5
477	2,661	2,418		170	69	4	
475	3,002	2,402	9	515	20	2	54
470	2,700	2,209	79	376	26	1	9
468	1,711	1,285	2	385	36	2	1
469	1,684	1,170	24	394	40	2	54

2) Ordered by the 3-digit Incident Zip Code, ordered by "All" EMS Responses (Top 15):

Incident Zip Codes (3-digit)	All	911 Response (Scene)	Intercept	Interfacility Transfer	Medical Transport	Mutual Aid	Standby
ALL Zip Codes:	140,319	83,433	333	32,576	23,548	89	340
465	28,771	17,705	55	1,557	9,406	16	32
463	18,579	4,331	7	9,277	4,947	14	3
479	11,872	6,152	37	1,269	4,391	6	17
478	10,631	10,588	10	15	16		2
467	9,540	7,338	8	2,056	45	4	89
464	8,934	833	8	7,581	499	13	
460	8,810	7,135	37	1,132	492	5	9
473	7,433	6,052	9	932	421	10	9
476	5,725	5,027		271	396		31
466	5,584	3,174	5	980	1,418	2	5
461	4,762	3,361	16	905	470	4	6
462	4,531	471	5	3,349	703		3
475	3,002	2,402	9	515	20	2	54
470	2,700	2,209	79	376	26	1	9
477	2,661	2,418		170	69	4	

3) Detailed view by 5-digit Incident Zip Code, ordered by Type of Service Requested = 911 Response (Scene) (Top 15):

Incident Zip Codes (5-digit)	All	911 Response (Scene)	Intercept	Interfacility Transfer	Medical Transport	Mutual Aid	Standby
All	140,319	83,433	333	32,576	23,548	89	340
46545	7,186	4,987	2	1,077	1,114	2	4
46544	4,707	4,412		168	125	2	
47807	3,460	3,454	3		3		
47802	3,117	3,105	2	3	7		
47362	3,117	3,098		9	6	1	3
46112	2,160	2,148		1	4	3	4
46036	2,124	2,120		3	1		
46725	3,047	2,075	4	957	3		8
46038	2,051	2,043		6	1		1
47630	2,083	2,041		21	12		9
47804	2,040	2,031	2	5	2		
46526	3,856	1,978	2	14	1,856	4	2
47601	2,138	1,873		237	19		9
46312	3,787	1,798	3	1,804	179	3	
46637	1,839	1,742	2	75	19		1

4) Detailed view by 5-digit Incident Zip Code, ordered by "All" EMS Responses (Top 15):

Incident Zip Codes (5-digit)	All	911 Response (Scene)	Intercept	Interfacility Transfer	Medical Transport	Mutual Aid	Standby
All Zip Codes	140,319	83,433	333	32,576	23,548	89	340
46545	7,186	4,987	2	1,077	1,114	2	4
46544	4,707	4,412		168	125	2	
47905	3,950	1,231	4	485	2,224		6
46526	3,856	1,978	2	14	1,856	4	2
46312	3,787	1,798	3	1,804	179	3	
47807	3,460	3,454	3		3		
47802	3,117	3,105	2	3	7		
47362	3,117	3,098		9	6	1	3
46725	3,047	2,075	4	957	3		8
46514	2,923	856	6	24	2,033		4
46410	2,840	268	1	2,216	352	3	
46321	2,197	106	1	1,809	281		
46112	2,160	2,148		1	4	3	4
47601	2,138	1,873		237	19		9
46036	2,124	2,120		3	1		

Trauma Patients by Cause of Injury and Incident Disposition:

Criteria:

Submitting State:	IN	140,319
Type Of Service Requested:	911 Response (Scene)	83,433
EMS Unit Role:	Transport	81,923
Possible Injury:	Yes	15,214
Cause of Injury:	All	13,850
Incident / Patient Disposition	All	13,850

Possible Injury	Cause Of Injury	All	Cancelled	Dead at Scene	No Treatment Required	Patient Refused Care	Treated and Released	Treated, Transferred Care	Treated, Transported by EMS	Treated, Transported by Law Enforcement	Treated, Transported by Private Vehicle
Yes	All	15,214	2	55	59	1,003	244	200	13,638	7	6

Of the 15,214 EMS responses that meet the criteria listed above, the majority of the patients are Treated, Transported by EMS (89.64%).

In the next table based on the criteria listed above, trying to identify a Cause of Injury when a Possible Injury = "Yes". The first two columns indicate the total number of records by Cause of Injury for All 911 EMS Responses and the percentage of each. There are four additional Dispositions of the "Patient" with the totals listed for each

The documentation of NOT values represents 37.65%. This might mean the documentation of Possible Injury = Yes is not correct or EMS professionals are not documenting a Cause of Injury.

Cause Of Injury	All	% - Cause of Injury for ALL Injury Present = Yes 911 Responses	Patient Refused Care	Treated and Released	Treated, Transferred Care	Treated, Transported by EMS
All	15,214	100.00%	1,003	244	200	13,638
Aircraft related accident (E84X.0)	6	0.04%	1		1	4
Bicycle Accident (E826.0)	89	0.58%	1	1		87
Bites (E906.0)	76	0.50%	5	12	1	56
Chemical poisoning (E86X.0)	33	0.22%		1		32
Child battering (E967.0)	19	0.12%	3	2		14
Drowning (E910.0)	5	0.03%				5
Drug poisoning (E85X.0)	31	0.20%	1	2		28
Electrocution (non-lightning) (E925.0)	12	0.08%	1		1	9
Excessive Cold (E901.0)	8	0.05%	1			6
Excessive Heat (E900.0)	21	0.14%				21
Falls (E88X.0)	4,645	30.53%	182	59	30	4,350
Fire and Flames (E89X.0)	52	0.34%	4	1	3	43

Cause Of Injury	All	% - Cause of Injury	Patient Refused Care	Treated and Released	Treated, Transferred Care	Treated, Transported by EMS
Firearm assault (E965.0)	27	0.18%	1		1	24
Firearm injury (accidental) (E985.0)	19	0.12%	1			14
Firearm self inflicted (E955.0)	24	0.16%		1	1	13
Lightning (E907.0)	1	0.01%				1
Machinery accidents (E919.0)	111	0.73%	7	2	1	98
Mechanical Suffocation (E913.0)	15	0.10%				12
Motor Vehicle non-traffic accident (E82X.0)	388	2.55%	80	23	19	256
Motor Vehicle traffic accident (E81X.0)	2,602	17.10%	273	50	59	2,191
Motorcycle Accident (E81X.1)	223	1.47%	16	6	7	191
Non-Motorized Vehicle Accident (E848.0)	27	0.18%	1	1	2	21
Not Applicable	4,761	31.29%	238	55	47	4,403
Not Available	209	1.37%	3	1		205
Not Known	224	1.47%	19	9	3	192
Not Recorded	522	3.43%	87		19	408
Not Reporting	14	0.09%				14
Pedestrian traffic accident (E814.0)	98	0.64%	3	1	3	91
Rape (E960.1)	28	0.18%	5			23
Smoke Inhalation (E89X.2)	5	0.03%				5
Stabbing/Cutting Accidental (E986.0)	101	0.66%				101
Stabbing/Cutting Assault (E966.0)	199	1.31%	7	6		185
Struck by Blunt/Thrown Object (E968.2)	600	3.94%	61	11	2	519
Venomous stings (plants, animals) (E905.0)	5	0.03%				5
Water Transport accident (E83X.0)	14	0.09%	2			11

Cardiac Arrest Data

Patients identified as in Cardiac Arrest by EMS professionals in Indiana for a 911 Response are at 0.84%, which is consistent with the national trend of 1-2% of all 911 responses.

Criteria:

Submitting State:	IN	140,319
Type Of Service Requested:	911 Response (Scene)	83,433
EMS Unit Role:	Transport	81,923
Cardiac Arrest:		
	Yes, After EMS Arrival	84
	Yes, Before EMS Arrival	586

Using the two Cardiac Arrest “Yes” values it’s important to have EMS also document the Etiology of the arrest. This is not well documented at this time as noted in the table and graphic:

Cardiac Arrest Etiology	Cardiac Arrest = Yes, After EMS Arrival	% Cardiac Arrest Etiology for Yes, After EMS Arrival	Cardiac Arrest = Yes, Prior to EMS Arrival	% Cardiac Arrest Etiology for Yes, Prior to EMS Arrival
ALL	84	100.00%	586	100.00%
Drowning	0	0.00%	1	0.17%
Presumed Cardiac	13	15.48%	118	20.14%
Respiratory	8	9.52%	16	2.73%
Trauma	3	3.57%	12	2.05%
Other	0	0.00%	8	1.37%
Not Applicable	0	0.00%	6	1.02%
Not Known	5	5.95%	68	11.60%
Not Recorded	55	65.48%	357	60.92%

Provider’s Primary Impressions submitted to NEMESIS:

Criteria:

Submitting State:	IN	140,319
Type Of Service Requested:	911 Response (Scene)	83,433
EMS Unit Role:	Transport	81,923

The documentation of the Provider’s Primary Impression of the patient condition, regardless of the Incident / Patient Disposition [first two columns shown below] could be improved. The NOT values total 50.95% of all EMS responses. When adding additional criteria to include the patient being treated and transported by EMS to a hospital the documentation does not improve dramatically. The use of NOT values remains high at 47.29% Please review the columns on the right in blue font in the table below for specifics.

Incident/Patient Disposition:	Treated, Transported by EMS	70,408
Destination Type:	Transport	69,338

Please note the Provider's Primary Impressions with the orange background are the highest documentation of "real" values.

EMS Primary Impression	Count of Events - All Dispositions	%	Count of Events - Transported by EMS to a Hospital	%
All	81,923	100.00%	69,338	100.00%
250.90- Diabetic symptoms (hypoglycemia)	1,347	1.64%	920	1.33%
312.90- Behavioral / psychiatric disorder	2,430	2.97%	2,229	3.21%
427.50- Cardiac arrest	884	1.08%	613	0.88%
427.90- Cardiac rhythm disturbance	1,068	1.30%	1,017	1.47%
436.00- Stroke / CVA	1,199	1.46%	1,175	1.69%
519.80- Airway obstruction	252	0.31%	220	0.32%
623.80- Vaginal hemorrhage	90	0.11%	86	0.12%
659.90- Pregnancy / OB delivery	255	0.31%	252	0.36%
780.09- Altered level of consciousness	3,016	3.68%	2,871	4.14%
780.20- Syncope / fainting	1,692	2.07%	1,503	2.17%
780.30- Seizure	2,600	3.17%	2,414	3.48%
780.60- Hyperthermia	122	0.15%	101	0.15%
780.90- Hypothermia	57	0.07%	51	0.07%
785.59- Hypovolemia / shock	177	0.22%	166	0.24%
786.09- Respiratory distress	5,120	6.25%	4,934	7.12%
786.50- Chest pain / discomfort	5,222	6.37%	5,015	7.23%
789.00- Abdominal pain / problems	4,200	5.13%	4,047	5.84%
798.99- Obvious death	214	0.26%	12	0.02%
799.10- Respiratory arrest	127	0.16%	119	0.17%
959.90- Sexual assault / rape	21	0.03%	21	0.03%
959.90- Traumatic injury	8,027	9.80%	6,851	9.88%
977.90- Poisoning / drug ingestion	1,461	1.78%	1,390	2.00%
987.90- Inhalation injury (toxic gas)	57	0.07%	50	0.07%
987.90- Smoke inhalation	43	0.05%	34	0.05%
989.50- Stings / venomous bites	35	0.04%	28	0.04%
994.80- Electrocution	11	0.01%	10	0.01%
995.30- Allergic reaction	454	0.55%	419	0.60%
Not Applicable	8,740	10.67%	4,140	5.97%
Not Available	11,847	14.46%	9,003	12.98%
Not Known	1,269	1.55%	1,053	1.52%
Not Recorded	19,254	23.50%	17,977	25.93%
Not Reporting	632	0.77%	617	0.89%

Indiana EMS Responses by Age Group and Gender based on "Patient Contact".

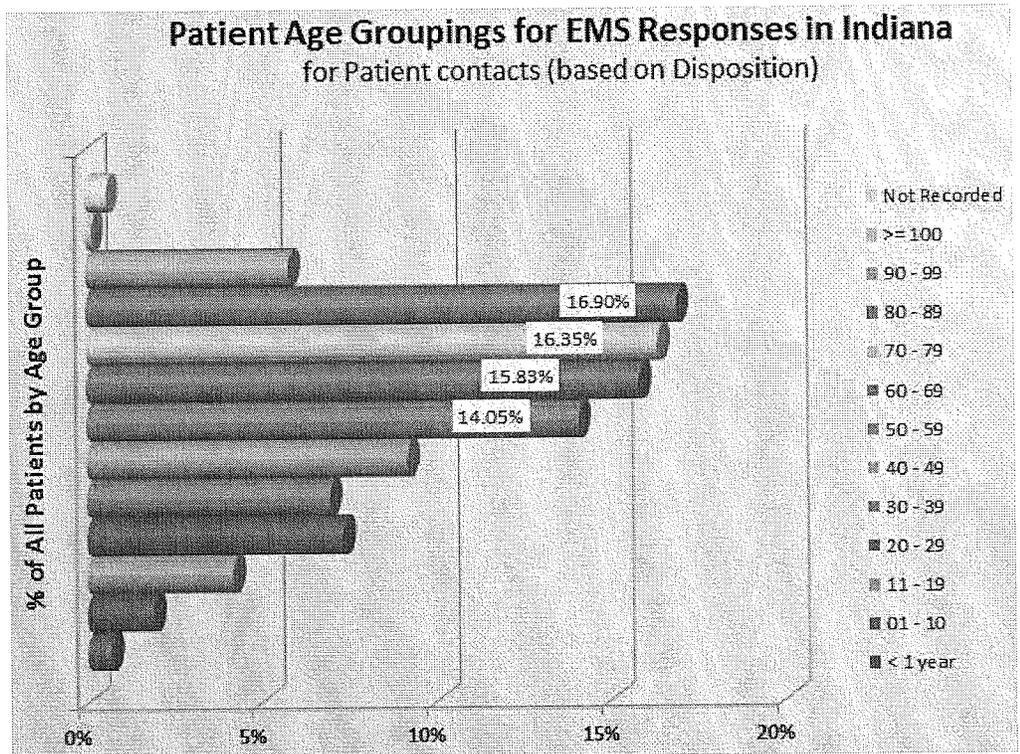
Females comprise the majority of EMS responses regardless of Age Group.

Criteria used:

Submitting State:	IN	140,319
Type Of Service Requested:	All	140,319
Incident Patient Disposition: - To identify a Patient Contact, Cancelled and No Patient Found were excluded.	Dead at Scene	608
	No Treatment Required	738
	Patient Refused Care	6,313
	Treated and Released	2,098
	Treated, Transferred Care	1,758
	Treated, Transported by EMS	124,258
	Treated, Transported by Law Enforcement	42
	Treated, Transported by Private Vehicle	27
Patient Gender:	All (Total from Above)	135,842
	- Restricting to the two Genders Only: 133,920	
	Female	72,783
	Male	61,137

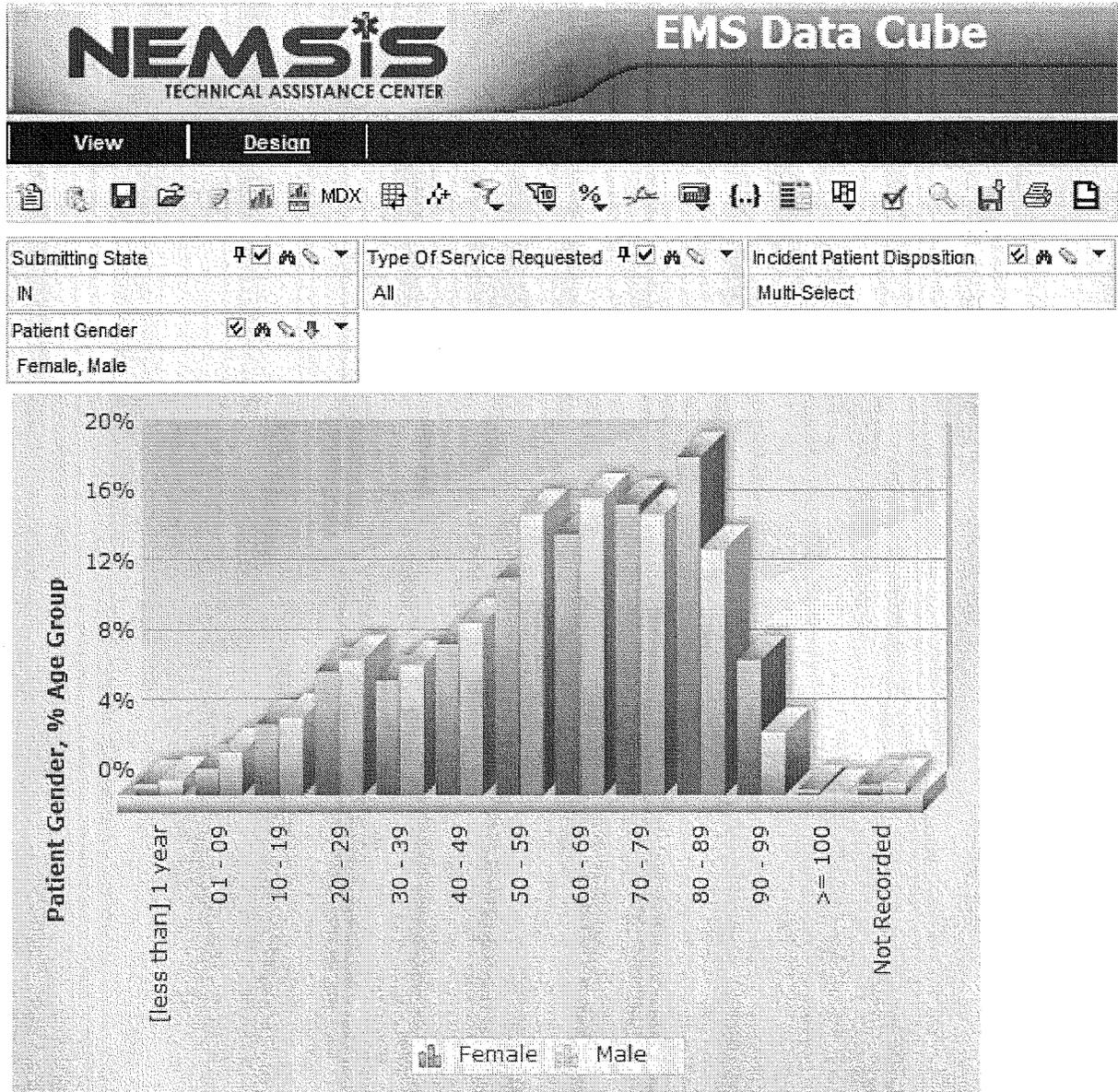
The 50-89 age groups comprise the largest response by EMS in Indiana. With the largest age group the 80-89 year olds, this is consistent with the rest of the Nation.

Patient Age Grouping	% of All Patients by Age Group
< 1 year	0.70%
01 - 10	1.91%
11 - 19	4.18%
20 - 29	7.34%
30 - 39	6.95%
40 - 49	9.17%
50 - 59	14.05%
60 - 69	15.83%
70 - 79	16.35%
80 - 89	16.90%
90 - 99	5.81%
>= 100	0.18%
Not Recorded	0.62%



The chart below is generated from the NEMSiS Enhanced Cube based on specified criteria. It's the same information has displayed above from the data exported from the NEMSiS Cube to an excel spreadsheet. The chart graphic above was created using excel charting tools.

EMS Responses by Gender and Age Group with a chart from the NEMSiS cube:





Submitting State: IN

Agency Number	All Count of Events	Calendar 2012 Count of Events	Calendar 2013 Count of Events	Calendar 2014 Count of Events
All	140,319	28,717	75,283	36,319
4	339		269	70
7	3,965		2,543	1,422
8	118		118	
15	1,170		1,170	
21	145			145
22	21	21		
23	158	144	14	
24	45		30	15
30	344			344
34	456		292	164
45	282		282	
48	1,062		959	103
49	92			92
56	816	326	418	72
57	418		418	
59	285	158	108	19
61	30		3	27
64	10,534	5,381	4,262	891
67	1,304	567	655	82
69	5,422		4,282	1,140
70	56		56	
75	110		92	18
91	3,977	1,623	1,849	505
92	1,455		1,138	317
93	8			8
97	3,518	2,175	1,343	
100	3,444		2,766	678
105	1,228	622	523	83
107	420		420	
110	36	2	13	21
116	209		209	
125	8,932	4,016	4,151	765
139	252		252	
148	2,119	952	994	173
150	6,372		4,692	1,680
161	83		83	
164	500		366	134
166	716		558	158

170	37			37
181	151		151	
182	7,084			7,084
186	1,051		1,051	
191	2,469	712	1,465	292
204	3,041		2,434	607
205	36			36
212	3,761		3,761	
215	2,370	1,737	200	433
226	15			15
228	24			24
229	1,416	1,416		
239	29		21	8
256	516		408	108
270	114		75	39
272	3	1	2	
276	386	294	63	29
281	47		47	
283	284	197	59	28
284	1		1	
287	285		285	
302	313			313
303	568		460	108
319	554	288	217	49
321	14		14	
328	555		555	
330	3			3
368	366		165	201
388	1,092	140	816	136
394	4,210	2,232	1,790	188
403	337		337	
435	138		106	32
514	626	307	293	26
583	21,142		10,021	11,121
618	9,719	5,015	4,317	387
650	5,354			5,354
677	1		1	
806	219	34	185	
808	197		197	
842	1,508		1,508	
867	23		23	
897	328		328	

898	465		465	
917	1,484		1,484	
964	1,040		1,040	
984	60		60	
1004	406	357	49	
1023	52		52	
1110	27		27	
1112	2,279		1,908	371
1187	1,392		1,392	
1188	2,150		1,986	164
2724	136		136	

Submitting State: IN

Agency Number	Quarter 1, 2012 Count of Events	Quarter 2, 2012 Count of Events	Quarter 3, 2012 Count of Events	Quarter 4, 2012 Count of Events	Quarter 1, 2013 Count of Events
All	6,814	6,407	8,698	6,798	9,886
4					
7					
8					28
15					296
21					
22	21				
23	32	38	41	33	14
24					
30					
34					
45					
48					
49					
56	88	87	84	67	120
57					
59	43	38	37	40	30
61					
64	1,297	1,392	1,415	1,277	1,252
67	140	143	140	144	170
69					1,204
70					
75					
91	277	275	568	503	1
92					
93					
97	462	597	576	540	498
100					
105	153	156	134	179	170
107					
110		1	1		3
116					
125	938	968	1,101	1,009	1,097
139					
148	257	201	252	242	248
150					
161					
164					
166					

170					
181					
182					
186					
191			287	425	393
204					
205					
212					1,227
215		3	1,734		200
226					
228					
229	1,056	360			
239					
256					
270					
272			1		1
276	89	75	64	66	48
281					
283		31	88	78	57
284					
287					
302					
303					
319	60	84	87	57	37
321					1
328					
330					
368					
388				140	198
394	509	515	611	597	570
403					
435					
514	31	111	94	71	75
583					
618	1,264	1,240	1,299	1,212	1,139
650					
677					
806				34	41
808					
842					
867					
897					

898					
917					
964					264
984					
1004	97	92	84	84	49
1023					
1110					
1112					
1187					
1188					382
2724					73

Quarter 2, 2013	Quarter 3, 2013	Quarter 4, 2013	Quarter 1, 2014	Quarter 2, 2014
Count of Events				
14,814	19,784	30,799	36,303	16
27	125	117	70	
		2,543	1,422	
65	25			
300	356	218		
			145	
	6	24	15	
			344	
	79	213	164	
97	134	51		
233	383	343	103	
			92	
130	73	95	72	
380	38			
25	21	32	19	
1		2	27	
808	961	1,241	891	
147	162	176	82	
827	1,139	1,112	1,135	5
	56			
22	34	36	18	
287	767	794	505	
131	524	483	317	
			8	
490	355			
711	1,111	944	678	
119	94	140	83	
70	224	126		
	2	8	21	
13	22	174		
1,099	788	1,167	765	
	72	180		
244	281	221	173	
6	2,370	2,316	1,680	
1		82		
		366	134	
54	302	202	158	

			37	
49	82	20		
			7,073	11
	528	523		
268	400	404	292	
909	675	850	607	
			36	
1,260	1,271	3		
			433	
			15	
			24	
5	9	7	8	
92	150	166	108	
	43	32	39	
1		15	29	
15	32			
		2	28	
		1		
283	2			
			313	
114	143	203	108	
53	85	42	49	
	13			
170	248	137		
			3	
		165	201	
201	213	204	136	
480	227	513	188	
92	166	79		
65	41		32	
86	62	70	26	
		10,021	11,121	
1,203	847	1,128	387	
			5,354	
		1		
33	88	23		
39	118	40		
413	697	398		
		23		
81	164	83		

86	317	62		
571	732	181		
776				
		60		
	52			
	16	11		
583	940	385	371	
	357	1,035		
536	562	506	164	
63				

Attachment #10



EMS COMMISSION CERTIFICATION REPORT

Compiled: April 21, 2014



CERTIFICATIONS (4/21/2014)	Total # of Certs	Highest Lvl. Cert
EMS - PARAMEDIC	4006	4006
EMT - INTERMEDIATE	145	125
EMS - ADVANCED EMT (new)	83	83
EMT - ADVANCED	1208	1098
EMS - EMT	19119	13807
EMS - EMR	5443	5162
EMT - PI	499	N/A
TOTAL:	30503	24281

Q1 - 2014		Q2 - 2014		Q3 - 2014		Q4 - 2014	
Count	Count	Count	Count	Count	Count	Count	Count
EMS - PARAMEDIC	68	EMS - PARAMEDIC	0	EMS - PARAMEDIC	0	EMS - PARAMEDIC	0
EMT - INTERMEDIATE	0						
EMS - ADVANCED EMT (new)	44	EMS - ADVANCED EMT (new)	0	EMS - ADVANCED EMT (new)	0	EMS - ADVANCED EMT (new)	0
EMT - BASIC ADVANCED	0						
EMS - EMT	171	EMS - EMT	0	EMS - EMT	0	EMS - EMT	0
EMS - EMR	88	EMS - EMR	0	EMS - EMR	0	EMS - EMR	0
EMT - PI	7	EMT - PI	0	EMT - PI	0	EMT - PI	0
TOTAL:	378	TOTAL:	0	TOTAL:	0	TOTAL:	0
Q1 - 2013		Q2 - 2013		Q3 - 2013		Q4 - 2013	
Count	Count	Count	Count	Count	Count	Count	Count
EMS - PARAMEDIC	97	EMS - PARAMEDIC	24	EMS - PARAMEDIC	76	EMS - PARAMEDIC	74
EMT - INTERMEDIATE	2	EMT - INTERMEDIATE	2	EMT - INTERMEDIATE	1	EMT - INTERMEDIATE	0
EMS - ADVANCED EMT (new)	0	EMS - ADVANCED EMT (new)	2	EMS - ADVANCED EMT (new)	11	EMS - ADVANCED EMT (new)	15
EMT - BASIC ADVANCED	18	EMT - BASIC ADVANCED	14	EMT - BASIC ADVANCED	1	EMT - BASIC ADVANCED	0
EMS - EMT	372	EMS - EMT	525	EMS - EMT	464	EMS - EMT	391
EMS - EMR	198	EMS - EMR	209	EMS - EMR	93	EMS - EMR	226
EMT - PI	8	EMT - PI	3	EMT - PI	15	EMT - PI	6
TOTAL:	695	TOTAL:	779	TOTAL:	661	TOTAL:	712
Q1 - 2012		Q2 - 2012		Q3 - 2012		Q4 - 2012	
Count	Count	Count	Count	Count	Count	Count	Count
EMS - PARAMEDIC	119	EMS - PARAMEDIC	92	EMS - PARAMEDIC	111	EMS - PARAMEDIC	79
EMT - INTERMEDIATE	0	EMT - INTERMEDIATE	7	EMT - INTERMEDIATE	0	EMT - INTERMEDIATE	0
EMS - ADVANCED EMT (new)	0						
EMT - BASIC ADVANCED	43	EMT - BASIC ADVANCED	58	EMT - BASIC ADVANCED	52	EMT - BASIC ADVANCED	13
EMS - EMT	574	EMS - EMT	523	EMS - EMT	492	EMS - EMT	268
EMS - EMR	158	EMS - EMR	199	EMS - EMR	144	EMS - EMR	124
EMT - PI	11	EMT - PI	12	EMT - PI	4	EMT - PI	13
TOTAL:	905	TOTAL:	891	TOTAL:	803	TOTAL:	497

Emergency Medical Services Provider Certification Report

Date : October 20, 2014

April 25, 2014

In compliance with the Rules and Regulations for the operation and administration of Emergency Medical Services, this report is respectfully submit to the Commission at the **April 25, 2014** Commission meeting, the following report of agencies who have meet the requirements for certification as Emergency Medical Service Providers and their vehicles.

<u>Provider Level</u>	<u>Counts</u>
Rescue Squad Organization	4
Basic Life Support Non-Transport	429
Ambulance Service Provider	98
EMT Basic-Advanced Organization	21
EMT Basic-Advanced Organization non-transport	19
EMT Intermediate Organization	13
EMT Intermediate Organization non-transport	0
Paramedic Organization	191
Paramedic Organization non-transport	11
Rotorcraft Air Ambulance	13
Fixed Wing Air Ambulance	3
Total Count:	802

New Providers Since 14-FEB-14

ABOITE TOWNSHIP VOLUNTEER FIRE DEPT.

**Intermediate Certification:
08/27/2014**

Attachment #11

State EMS Training Report → April 17, 2014

1. Paramedic pass/fail rates National Registry:

2012-2014 → 2.5 year report								
Program Name	Program Code	Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
Adams Memorial Hospital	IN-4201	21	62% (13 / 21)	86% (18 / 21)	90% (19 / 21)	0% (0 / 21)	10% (2 / 21)	0% (0 / 21)
Community Health Network EMS	IN-4063	49	73% (36 / 49)	88% (43 / 49)	88% (43 / 49)	0% (0 / 49)	10% (5 / 49)	2% (1 / 49)
Elkhart General Hospital	IN-4067	34	62% (21 / 34)	76% (26 / 34)	82% (28 / 34)	6% (2 / 34)	12% (4 / 34)	0% (0 / 34)
Franciscan Saint Anthony Health Crown Point	IN-4079	31	32% (10 / 31)	65% (20 / 31)	65% (20 / 31)	3% (1 / 31)	32% (10 / 31)	0% (0 / 31)
Franciscan St Elizabeth Health	IN-4068	3	100% (3 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Hendricks Regional Health	IN-4380	13	92% (12 / 13)	100% (13 / 13)	100% (13 / 13)	0% (0 / 13)	0% (0 / 13)	0% (0 / 13)
Indiana University Health	IN-4062	15	87% (13 / 15)	93% (14 / 15)	93% (14 / 15)	0% (0 / 15)	7% (1 / 15)	0% (0 / 15)
Indiana University Health Goshen Hospital	IN-4162	21	33% (7 / 21)	71% (15 / 21)	76% (16 / 21)	14% (3 / 21)	0% (0 / 21)	10% (2 / 21)
Ivy Tech Bloomington	IN-4071	14	21% (3 / 14)	36% (5 / 14)	43% (6 / 14)	7% (1 / 14)	50% (7 / 14)	0% (0 / 14)
Ivy Tech Community College - Madison	IN-4542	11	82% (9 / 11)	91% (10 / 11)	91% (10 / 11)	0% (0 / 11)	9% (1 / 11)	0% (0 / 11)
Ivy Tech Community College Columbus	IN-4073	20	75% (15 / 20)	90% (18 / 20)	90% (18 / 20)	0% (0 / 20)	5% (1 / 20)	5% (1 / 20)
Ivy Tech Community College Northeast	IN-4169	27	37% (10 / 27)	48% (13 / 27)	48% (13 / 27)	0% (0 / 27)	52% (14 / 27)	0% (0 / 27)
Ivy Tech Community College Richmond	IN-4501	2	50% (1 / 2)	50% (1 / 2)	50% (1 / 2)	0% (0 / 2)	50% (1 / 2)	0% (0 / 2)
Ivy Tech Community College Terre Haute	IN-4612	27	37% (10 / 27)	52% (14 / 27)	59% (16 / 27)	0% (0 / 27)	37% (10 / 27)	4% (1 / 27)
Ivy Tech Community College - Evansville	IN-4141	22	55% (12 / 22)	68% (15 / 22)	73% (16 / 22)	0% (0 / 22)	23% (5 / 22)	5% (1 / 22)

Ivy Tech Community College- Kokomo	IN-4362	21	67% (14 / 21)	81% (17 / 21)	86% (18 / 21)	0% (0 / 21)	14% (3 / 21)	0% (0 / 21)
Ivy Tech South Bend	IN-4070	20	40% (8 / 20)	60% (12 / 20)	60% (12 / 20)	0% (0 / 20)	35% (7 / 20)	5% (1 / 20)
Methodist Hospitals	IN-4072	21	76% (16 / 21)	95% (20 / 21)	95% (20 / 21)	0% (0 / 21)	5% (1 / 21)	0% (0 / 21)
Pelham Training	IN-4668	108	78% (84 / 108)	90% (97 / 108)	90% (97 / 108)	1% (1 / 108)	9% (10/108)	1% (1 / 108)
St Francis Hospital	IN-4080	11	91% (10 / 11)	100% (11 / 11)	100% (11 / 11)	0% (0 / 11)	0% (0 / 11)	0% (0 / 11)
St Mary Medical Center/Hoba rt	IN-4943	22	55% (12 / 22)	73% (16 / 22)	73% (16 / 22)	0% (0 / 22)	27% (6 / 22)	0% (0 / 22)
St Vincent Hospital	IN-4081	36	97% (35 / 36)	97% (35 / 36)	97% (35 / 36)	0% (0 / 36)	0% (0 / 36)	3% (1 / 36)
Vincennes University	IN-4153	19	58% (11 / 19)	74% (14 / 19)	79% (15 / 19)	5% (1 / 19)	16% (3 / 19)	0% (0 / 19)
Wishard Health Services	IN-4083	44	91% (40 / 44)	98% (43 / 44)	98% (43 / 44)	0% (0 / 44)	2% (1 / 44)	0% (0 / 44)

2011-2014 → 3.5 year report

Program Name	Program Code	Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
Adams Memorial Hospital	IN-4201	31	65% (20 / 31)	90% (28 / 31)	94% (29 / 31)	0% (0 / 31)	6% (2 / 31)	0% (0 / 31)
Community Health Network EMS	IN-4063	61	67% (41 / 61)	87% (53 / 61)	89% (54 / 61)	0% (0 / 61)	8% (5 / 61)	3% (2 / 61)
Elkhart General Hospital	IN-4067	56	63% (35 / 56)	82% (46 / 56)	88% (49 / 56)	4% (2 / 56)	7% (4 / 56)	2% (1 / 56)
Franciscan Saint Anthony Health Crown Point	IN-4079	43	37% (16 / 43)	67% (29 / 43)	72% (31 / 43)	2% (1 / 43)	23% (10 / 43)	2% (1 / 43)
Franciscan St Elizabeth Health	IN-4068	3	100% (3 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Harrison County Hospital EMS	IN-4336	4	50% (2 / 4)	50% (2 / 4)	75% (3 / 4)	0% (0 / 4)	0% (0 / 4)	25% (1 / 4)
Hendricks Regional Health	IN-4380	13	92% (12 / 13)	100% (13 / 13)	100% (13 / 13)	0% (0 / 13)	0% (0 / 13)	0% (0 / 13)
Howard Regional Health System	IN-4069	4	50% (2 / 4)	75% (3 / 4)	75% (3 / 4)	0% (0 / 4)	0% (0 / 4)	25% (1 / 4)
Indiana University Health	IN-4062	28	79% (22 / 28)	89% (25 / 28)	93% (26 / 28)	0% (0 / 28)	4% (1 / 28)	4% (1 / 28)

Indiana University Health Goshen Hospital	IN-4162	21	33% (7 / 21)	71% (15 / 21)	76% (16 / 21)	14% (3 / 21)	0% (0 / 21)	10% (2 / 21)
Ivy Tech Bloomington	IN-4071	19	37% (7 / 19)	47% (9 / 19)	58% (11 / 19)	5% (1 / 19)	37% (7 / 19)	0% (0 / 19)
Ivy Tech Community College	IN-4864	6	33% (2 / 6)	83% (5 / 6)	83% (5 / 6)	0% (0 / 6)	0% (0 / 6)	17% (1 / 6)
Ivy Tech Community College - Madison	IN-4542	24	75% (18 / 24)	88% (21 / 24)	88% (21 / 24)	0% (0 / 24)	4% (1 / 24)	8% (2 / 24)
Ivy Tech Community College Columbus	IN-4073	28	79% (22 / 28)	93% (26 / 28)	93% (26 / 28)	0% (0 / 28)	4% (1 / 28)	4% (1 / 28)
Ivy Tech Community College Northeast	IN-4169	46	50% (23 / 46)	61% (28 / 46)	63% (29 / 46)	0% (0 / 46)	30% (14 / 46)	7% (3 / 46)
Ivy Tech Community College Richmond	IN-4501	2	50% (1 / 2)	50% (1 / 2)	50% (1 / 2)	0% (0 / 2)	50% (1 / 2)	0% (0 / 2)
Ivy Tech Community College Terre Haute	IN-4612	45	51% (23 / 45)	67% (30 / 45)	73% (33 / 45)	0% (0 / 45)	22% (10 / 45)	4% (2 / 45)
Ivy Tech Community College - Evansville	IN-4141	43	58% (25 / 43)	70% (30 / 43)	77% (33 / 43)	2% (1 / 43)	12% (5 / 43)	9% (4 / 43)
Ivy Tech Community College - Kokomo	IN-4362	32	66% (21 / 32)	78% (25 / 32)	81% (26 / 32)	0% (0 / 32)	9% (3 / 32)	9% (3 / 32)
Ivy Tech South Bend	IN-4070	36	42% (15 / 36)	61% (22 / 36)	64% (23 / 36)	0% (0 / 36)	19% (7 / 36)	17% (6 / 36)
Methodist Hospitals	IN-4072	33	70% (23 / 33)	94% (31 / 33)	94% (31 / 33)	0% (0 / 33)	3% (1 / 33)	3% (1 / 33)
Pelham Training	IN-4668	163	77% (125 / 163)	89% (145 / 163)	91% (148 / 163)	1% (2 / 163)	6% (10 / 163)	2% (4 / 163)
St Francis Hospital	IN-4080	17	88% (15 / 17)	94% (16 / 17)	94% (16 / 17)	0% (0 / 17)	0% (0 / 17)	6% (1 / 17)
St Mary Medical Center/Hobart	IN-4943	22	55% (12 / 22)	73% (16 / 22)	73% (16 / 22)	0% (0 / 22)	27% (6 / 22)	0% (0 / 22)
St Vincent Hospital	IN-4081	50	96% (48 / 50)	98% (49 / 50)	98% (49 / 50)	0% (0 / 50)	0% (0 / 50)	2% (1 / 50)
Vincennes University	IN-4153	27	52% (14 / 27)	67% (18 / 27)	74% (20 / 27)	4% (1 / 27)	11% (3 / 27)	11% (3 / 27)
Wishard Health Services	IN-4083	79	89% (70 / 79)	97% (77 / 79)	99% (78 / 79)	0% (0 / 79)	1% (1 / 79)	0% (0 / 79)

2010-2014 → 4.5 year report

Program Name	Program Code	Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
Adams Memorial Hospital	IN-4201	46	72% (33 / 46)	93% (43 / 46)	96% (44 / 46)	0% (0 / 46)	4% (2 / 46)	0% (0 / 46)
Community Health Network EMS	IN-4063	75	68% (51 / 75)	88% (66 / 75)	89% (67 / 75)	0% (0 / 75)	7% (5 / 75)	4% (3 / 75)
Elkhart General Hospital	IN-4067	85	61% (52 / 85)	78% (66 / 85)	86% (73 / 85)	2% (2 / 85)	5% (4 / 85)	7% (6 / 85)
Franciscan Saint Anthony Health Crown Point	IN-4079	56	41% (23 / 56)	70% (39 / 56)	75% (42 / 56)	4% (2 / 56)	18% (10 / 56)	4% (2 / 56)
Franciscan St Elizabeth Health	IN-4068	3	100% (3 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Harrison County Hospital EMS	IN-4336	15	60% (9 / 15)	67% (10 / 15)	73% (11 / 15)	7% (1 / 15)	0% (0 / 15)	20% (3 / 15)
Hendricks Regional Health	IN-4380	13	92% (12 / 13)	100% (13 / 13)	100% (13 / 13)	0% (0 / 13)	0% (0 / 13)	0% (0 / 13)
Howard Regional Health System	IN-4069	4	50% (2 / 4)	75% (3 / 4)	75% (3 / 4)	0% (0 / 4)	0% (0 / 4)	25% (1 / 4)
Indiana University Health	IN-4062	40	80% (32 / 40)	90% (36 / 40)	95% (38 / 40)	0% (0 / 40)	3% (1 / 40)	3% (1 / 40)
Indiana University Health Goshen Hospital	IN-4162	28	36% (10 / 28)	75% (21 / 28)	79% (22 / 28)	11% (3 / 28)	0% (0 / 28)	11% (3 / 28)
Ivy Tech Bloomington	IN-4071	26	38% (10 / 26)	50% (13 / 26)	58% (15 / 26)	4% (1 / 26)	27% (7 / 26)	12% (3 / 26)
Ivy Tech Community College	IN-4864	6	33% (2 / 6)	83% (5 / 6)	83% (5 / 6)	0% (0 / 6)	0% (0 / 6)	17% (1 / 6)
Ivy Tech Community College - Madison	IN-4542	24	75% (18 / 24)	88% (21 / 24)	88% (21 / 24)	0% (0 / 24)	4% (1 / 24)	8% (2 / 24)
Ivy Tech Community College Columbus	IN-4073	38	68% (26 / 38)	82% (31 / 38)	82% (31 / 38)	0% (0 / 38)	3% (1 / 38)	16% (6 / 38)
Ivy Tech Community College Northeast	IN-4169	64	50% (32 / 64)	63% (40 / 64)	64% (41 / 64)	0% (0 / 64)	22% (14 / 64)	14% (9 / 64)
Ivy Tech Community	IN-4501	2	50% (1 / 2)	50% (1 / 2)	50% (1 / 2)	0% (0 / 2)	50% (1 / 2)	0% (0 / 2)

College Richmond								
Ivy Tech Community College Terre Haute	IN-4612	59	56% (33 / 59)	69% (41 / 59)	76% (45 / 59)	0% (0 / 59)	17% (10 / 59)	7% (4 / 59)
Ivy Tech Community College-Evansville	IN-4141	50	56% (28 / 50)	72% (36 / 50)	78% (39 / 50)	2% (1 / 50)	10% (5 / 50)	10% (5 / 50)
Ivy Tech Community College-Kokomo	IN-4362	52	65% (34 / 52)	83% (43 / 52)	85% (44 / 52)	0% (0 / 52)	6% (3 / 52)	10% (5 / 52)
Ivy Tech South Bend	IN-4070	46	43% (20 / 46)	61% (28 / 46)	63% (29 / 46)	0% (0 / 46)	15% (7 / 46)	22% (10 / 46)
Methodist Hospitals	IN-4072	41	66% (27 / 41)	90% (37 / 41)	93% (38 / 41)	0% (0 / 41)	2% (1 / 41)	5% (2 / 41)
Pelham Training	IN-4668	206	74% (152 / 206)	89% (184 / 206)	91% (188 / 206)	1% (3 / 206)	5% (10 / 206)	3% (6 / 206)
St Francis Hospital	IN-4080	21	90% (19 / 21)	95% (20 / 21)	95% (20 / 21)	0% (0 / 21)	0% (0 / 21)	5% (1 / 21)
St Mary Medical Center/Hobart	IN-4943	22	55% (12 / 22)	73% (16 / 22)	73% (16 / 22)	0% (0 / 22)	27% (6 / 22)	0% (0 / 22)
St Vincent Hospital	IN-4081	62	95% (59 / 62)	98% (61 / 62)	98% (61 / 62)	0% (0 / 62)	0% (0 / 62)	2% (1 / 62)
Vincennes University	IN-4153	28	54% (15 / 28)	68% (19 / 28)	75% (21 / 28)	4% (1 / 28)	11% (3 / 28)	11% (3 / 28)
Wishard Health Services	IN-4083	97	88% (85 / 97)	95% (92 / 97)	98% (95 / 97)	0% (0 / 97)	1% (1 / 97)	1% (1 / 97)

2. AEMT Pass/fail rates

Indiana Report								
Program Name	Program Code	Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
Adams Memorial Hospital	IN-4201	3	100% (3 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Alliance EMS	IN-5293	6	67% (4 / 6)	67% (4 / 6)	67% (4 / 6)	0% (0 / 6)	33% (2 / 6)	0% (0 / 6)
Ball Memorial Hospital	IN-4369	13	46% (6 / 13)	62% (8 / 13)	62% (8 / 13)	0% (0 / 13)	38% (5 / 13)	0% (0 / 13)
Deaconess Hospital	IN-4516	5	80% (4 / 5)	100% (5 / 5)	100% (5 / 5)	0% (0 / 5)	0% (0 / 5)	0% (0 / 5)
Harrison County Hospital EMS	IN-4336	8	88% (7 / 8)	88% (7 / 8)	88% (7 / 8)	0% (0 / 8)	13% (1 / 8)	0% (0 / 8)
Indiana University Health Goshen Hospital	IN-4162	8	25% (2 / 8)	25% (2 / 8)	25% (2 / 8)	0% (0 / 8)	75% (6 / 8)	0% (0 / 8)
Ivy Tech Community College	IN-4864	1	0% (0 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Ivy Tech South Bend	IN-4070	16	44% (7 / 16)	56% (9 / 16)	56% (9 / 16)	0% (0 / 16)	44% (7 / 16)	0% (0 / 16)

Jennings County Training Institution	IN-5281	3	67% (2 / 3)	100% (3 / 3)	100% (3 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)
Margaret Mary Community Hospital	IN-4084	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Memorial Hospital	IN-4157	32	56% (18 / 32)	63% (20 / 32)	63% (20 / 32)	0% (0 / 32)	38% (12 / 32)	0% (0 / 32)
Memorial Hospital/Jasper	IN-5271	5	40% (2 / 5)	40% (2 / 5)	40% (2 / 5)	0% (0 / 5)	60% (3 / 5)	0% (0 / 5)
North Webster Township EMS Ed	IN-5311	1	100% (1 / 1)	100% (1 / 1)	100% (1 / 1)	0% (0 / 1)	0% (0 / 1)	0% (0 / 1)
Parkview Huntington Hospital EMS	IN-5269	40	60% (24 / 40)	68% (27 / 40)	68% (27 / 40)	0% (0 / 40)	33% (13 / 40)	0% (0 / 40)
Parkview Regional Medical Center	IN-5296	16	63% (10 / 16)	88% (14 / 16)	88% (14 / 16)	0% (0 / 16)	13% (2 / 16)	0% (0 / 16)
Pelham Training	IN-4668	3	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)	0% (0 / 3)	100% (3 / 3)	0% (0 / 3)
Scott County EMS	IN-4078	5	40% (2 / 5)	60% (3 / 5)	60% (3 / 5)	0% (0 / 5)	40% (2 / 5)	0% (0 / 5)
St Mary Medical Center/Hobart	IN-4943	15	40% (6 / 15)	47% (7 / 15)	47% (7 / 15)	0% (0 / 15)	53% (8 / 15)	0% (0 / 15)
Sullivan County Community Hospital	IN-5193	3	33% (1 / 3)	33% (1 / 3)	33% (1 / 3)	0% (0 / 3)	67% (2 / 3)	0% (0 / 3)
Switzerland County EMS Inc.	IN-4145	8	25% (2 / 8)	38% (3 / 8)	38% (3 / 8)	0% (0 / 8)	63% (5 / 8)	0% (0 / 8)
Terre Haute Regional Hospital	IN-4152	2	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)	0% (0 / 2)	100% (2 / 2)	0% (0 / 2)
Tri County Ambulance	IN-4644	9	44% (4 / 9)	44% (4 / 9)	56% (5 / 9)	0% (0 / 9)	44% (4 / 9)	0% (0 / 9)
Vincennes University	IN-4153	4	0% (0 / 4)	25% (1 / 4)	25% (1 / 4)	0% (0 / 4)	75% (3 / 4)	0% (0 / 4)

State Report

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
207	51% (106 / 207)	61% (126 / 207)	61% (127 / 207)	0% (0 / 207)	39% (80 / 207)	0% (0 / 207)

	Indiana AEMT Cognitive Exam Passing Rates		
	December	February	April
First Attempt	50%	52%	51%
3 rd Attempt	52%	59%	61%
6 th Attempt	54%	60%	61%

National Report

Attempted The Exam	First Attempt Pass	Cumulative Pass Within 3 Attempts	Cumulative Pass Within 6 Attempts	Failed All 6 Attempts	Eligible For Retest	Did Not Complete Within 2 Years
6243	56% (3477 / 6243)	72% (4485 / 6243)	73% (4553 / 6243)	0% (9 / 6243)	26% (1653 / 6243)	0% (28 / 6243)

3. AEMT Hybrid Course

- 102 survey results
 - 71 interested in taking a hybrid course
 - 70% of respondents would take a hybrid course
- Next Step
 - Host meeting/conference call with interested Certified Training Institutions

4. Other

- TBD