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INTRODUCTION

This manual is intended to provide ambulance agencies with guidance to ensure that all EMS agencies and ambulances are properly licensed and inspected as required by the Kentucky Board of Emergency Medical Services, and the Kentucky Administrative Ground Ambulance Regulations (202 KAR 7:501, 545, 550, 555, and 560). The Kentucky Board of Emergency Medical Services, herein referred to as KBEMS, is the agency charged with regulating and coordinating emergency medical services within the Commonwealth of Kentucky. All information provided in this document is intended to supplement the Ground Ambulance Regulations.

Please note that any and all interpretive information herein is operational in nature only and does not constitute legal advice. Please consult your agency or personal legal counsel for legal advice.

As established by 202 KAR 7:501, Section 4 (1), "Compliance with licensing pursuant to this administrative regulation shall be validated through on-site inspections of the agency by representatives or employees of the KBEMS Office."

A licensed ambulance must be fully stocked and equipped in accordance with the minimum equipment standards defined in this document, as applicable to the ambulance and agency's license classification.

For clarity, the following definitions shall apply throughout this document:

- **Annual Inspection:** Refers to the annual inspection of the EMS agency, to include inspection of the vehicles associated with the license and the documents required by the Ground Ambulance Regulations.
- **Agency License:** refers to the annually-renewable license issued by the Kentucky Board of EMS that permits the agency to provide service in accordance with their specified classification.

AGENCY INSPECTION

KBEMS ANNUAL AGENCY INSPECTION TIMELINE

Schedule Inspection

November -December of Year Preceding Inspection

Your assigned KBEMS Inspector will contact you at the end of the year to schedule your annual inspection for the following year.

Inspection & Renewal App Completed

30 Days Prior to On-site Inspection

You are required to have the Inspection/Renewal Application completed at least 30 days before your scheduled on-site inspection to allow your KBEMS inspector time to review your documents. Failure to complete the application at least 30 days before will result in a "FAILED" inspection.

On-Site Inspection

Day of Inspection

On the day of your Annual KBEMS Inspection your assigned KBEMS Inspector will review your on-site documents as noted in the KBEMS Agency Licensure & Vehicle Inspection Manual, and will also inspect your ambulances, if applicable.

Inspection & Renewal App Opens

January 1

The Inspection/Renewal Application opens on January 1 of each year. At this time you can upload the required documentation and pay your annual renewal fee. This application will be processed by KBEMS upon satisfactory completion of your annual inspection (including inspection of ALL ambulances).

Inspector Reviews App

14 Days Prior to On-site Inspection

Your KBEMS Inspector will contact you at least 14 days before your scheduled inspection to let you know if further documents or information is needed. Any requested document must be uploaded within one (1) week to allow for review by your KBEMS Inspector.

Your annual agency inspection will consist of a desk review, in which your assigned KBEMS inspector will review your agency policies and ensure compliance with the applicable regulation; and an on-site inspection, at which time your KBEMS inspector will evaluate the items noted in the "On-Site Agency Inspection Section of this manual, and will also inspect your facilities and all agency fleet vehicles, as listed in the agency KEMSIS account. Please insure that your KEMSIS account is up to date at the time of your inspection, as your KBEMS inspector will review your fleet and employee roster at that time.

The annual inspection will be scheduled during the year prior, subject to the discretion and availability of the KBEMS representative; generally this will be during normal business hours, Monday through Friday. The KBEMS Inspector/Liaison will make every attempt to schedule all vehicle inspections for an agency in concurrence with the on-site agency inspection.

The agency director, or designee, will be contacted at the e-mail on file in the agency KEMSIS account to schedule the date, time, and location of the annual inspection. The Inspector/Liaison will generally attempt to inspect all vehicles from a given agency during one visit, except for agencies with multiple locations across the state. Agencies with a large number of ambulances may also necessitate splitting the inspection into multiple days.

An agency representative shall be available to meet and assist the Inspector/Liaison during the inspection. This individual must be familiar with the vehicle or vehicles being inspected. It is not required that the representative be the agency director.

It is the sole responsibility of the EMS agency to maintain licensure with the Kentucky Board of Emergency Medical Services.

Desk Review

An annual review of agency documentation will be conducted prior to your inspection. You will gain access to *the Agency Inspection & Renewal Application* at the beginning of each calendar year that will allow payment of agency renewal fee and attachment of all required documentation per the KBEMS Ground Ambulance Regulations. **Payment of your agency renewal fee will be required prior to review of your inspection documents.**

Payment of the appropriate fee and completion of the *Agency Inspection & Renewal Application* will be required at least thirty days prior to your on-site agency inspection. A KBEMS inspector will review your documents at least 30 days prior to your on-site agency inspection. Failure to submit an *Agency Inspection & Renewal Application*, or upload documents prior to the desk

review will be considered as a failed inspection, and the maximum re-inspection fee of \$500 being assessed due to greater than five (5) violations. Your agency inspection will be re-scheduled at that time and the necessary documentation shall still be required. Failure to provide/upload documents upon re-inspection will result in discipline per KRS Chapter 311A.

The documents listed below MUST be uploaded to the *Agency Inspection & Renewal Application*:

<p>Organizational chart that establishes lines of authority, including the designation of:</p> <ul style="list-style-type: none"> • an administrator • a designee who shall serve in the absence of the administrator
<p>A policy for the provision of a pre-employment and annual health assessment of employees of the agency, which shall include reporting mechanisms for work-related illness or injury</p>
<p>A written plan for providers to consult with online adult and pediatric medical direction. This plan shall address as a minimum:</p> <ul style="list-style-type: none"> • The availability of medical direction twenty-four (24) hours a day, seven (7) days a week • The availability of medical direction during an emergency event • The provision of medical direction by a medical professional with a higher level of training or expertise • Recommended actions if: a. There is an equipment failure, a communication barrier, or other unusual circumstance; and b. It is not possible to contact online medical direction.
<p>A plan and records for the provision of continuing education for staff and volunteers, including:</p> <ul style="list-style-type: none"> • A written plan for the method of assessment of staff continuing education needs • A coordinated plan to meet those needs, including a provision that all continuing education shall be provided either by a licensed TEI or in accordance with 202 KAR 7:601
<p>An infection control plan in accordance with 29 C.F.R. 1910.1030</p>
<p>A written plan for training or educating personnel for responding to hazardous materials, criminal, and potential terrorist incidents, including plans for the protection and decontamination of patients, ambulances, equipment, and staff</p>

A written policy regarding the appropriate destination of a patient who expires during transport if a valid Kentucky EMS DNR, or MOST form is present

A written plan for the quality assessment of patient care and provider quality improvement, including a monthly review of patient care reports and evaluation of staff performance related to patient care. This plan shall address as a minimum:

- Employee health and safety
- Compliance with protocols and operating procedures
- Assessment of dispatch protocols
- Vehicle operations and vehicle safety
- Additional training necessary for the patient care provider or providers
- Equipment preventive maintenance programs
- A process for the resolution of customer complaints

A written plan for training personnel and responding to mass casualty incidents and disasters

A written orientation program for all personnel, including at a minimum:

- Validation of certification or license with KBEMS
- Validation of NIMS ICS 100, 200, 700, and 800 within sixty (60) days of employment for any employee who staffs a licensed vehicle
- Validation of Driver's License if applicable
- A review of all agency policies, procedures, and protocols
- Communication equipment at the base station and on each vehicle
- Operational aspects of the agency fleet and equipment
- Inspection and routine maintenance of agency fleet, facilities, and equipment
- Appropriate processes for disinfection of agency fleet, facilities, and equipment
- Local navigation and geographic orientation
- Completion of Patient Care Reports and other documentation as established by the agency

Proof of professional liability malpractice insurance of a minimum of \$1,000,000

Proof of vehicular liability insurance

Policy regarding which employees are approved to provide medical services off duty by the agency's medical director and the manner in which worker's compensation and general liability insurance covers employees off duty. The policy shall be signed by both the agency's administrator and medical director, shall be reviewed annually, and shall include:

<ul style="list-style-type: none"> • Direction on which employees may remove medical equipment from the agency's premises for the purpose of providing care off duty • Direction on which equipment may be removed from the agency's premises for the purpose of providing care off duty • A provision that controlled substances shall not be removed from the agency's premises for the purposes of providing care off duty.
<p>Each agency shall in the county in which the agency's base station or a satellite is located:</p> <ul style="list-style-type: none"> • Document evidence of participation in a local, county, regional, or state disaster or preparedness exercise within the preceding twelve (12) months • Coordinate with the county emergency management director plans for the possible use of agency personnel for use in the emergency operations center in a disaster • Maintain a hard copy or electronic equivalent of the most current adopted city, county, or urban county government emergency management agency's emergency operations plan at the ambulance base station.
<p>A licensed agency shall have a written plan to assure all requests for service shall be promptly answered</p>
<p>Written scope of care policy to include:</p> <ul style="list-style-type: none"> • the types of services performed • limitations of response • and the types of medical teams provided
<p>An agency shall enter into a mutual aid agreement with another Kentucky licensed ambulance agency operating within the same or contiguous counties that provide response to medical emergencies. These agreements shall be in writing and address:</p> <ul style="list-style-type: none"> • The type of mutual aid assistance to be provided, including ALS or BLS medical care and transport and ALS or BLS medical first response • Response personnel, including levels of training or education and provisions for joint in-service training or education if appropriate • Response vehicles, including unit identifiers and the station or location from which the vehicles shall be operated • A plan of action for the mutual aid agreement, including dispatch and notification procedures • Radio and other communications procedures between the ambulance agency and other response agencies with which the agency has mutual aid agreements

- On-scene coordination and scene control including medical direction if several agencies respond to the same incident
- Exchange of patient information, records, and reports as allowed by law
- The effective dates and process for amendment or termination

– OR –

IF UNABLE TO PROCURE A MUTUAL AID AGREEMENT WITH ANOTHER KENTUCKY LICENSED AMBULANCE OPERATING WITHIN THE SAME OR CONTIGUOUS COUNTIES:

A ground agency shall send a written request for a mutual aid agreement to at least two (2) contiguous counties and retain a copy of each request and each county's response

Each agency shall maintain a policy or affiliation agreement with the primary call-taking center that provides dispatch services for all or part of the service area of the ground agency. The agreement shall state at a minimum that

- Requests for emergency ambulance service shall be dispatched or notified within two (2) minutes from determining that the caller is requesting ambulance response
- The closest licensed agency for that geographic service area is unable to have a vehicle responding to an emergency call within ten (10) minutes from the time the call is dispatched, the agency shall notify the next closest appropriate licensed agency to respond
- The agreement shall specify which patient information shall be collected by the call-taking center during a call for service

– OR –

If a ground agency is unable to secure a written affiliation agreement with the dispatch center, the ground agency shall retain all written correspondence to the dispatch center requesting an affiliation agreement and the dispatch center's denial of the agency's request

Master medication list consistent with the agency's medical protocols.

Policy

FCC License with current expiration date

Medical Director Documents:

All agencies MUST upload the following documents:

- A copy of their agreement with their medical director
- A copy of a current KBML license

ALS Agencies MUST also upload the following documents:

- A copy of a current Board Certification in Emergency Medicine from the American Board of Medical Specialties or the American Association of Physician Specialists

-OR-

- Current ATLS
- Current ACLS through AHA or ASHI
- Current PALS or PEPP

BLS Agencies MUST also upload the following documents:

- A copy of a current Board Certification in Emergency Medicine from the American Board of Medical Specialties or the American Association of Physician Specialists

-OR-

- Current ATLS, ITLS, or PHTLS
- Current ACLS through AHA or ASHI
- Current PALS or PEPP

On-site Agency Inspection

On-site Document Inspection

The following items will be evaluated during the on-site agency inspection:

Records and reports at the ambulance agency base station including:

- An original, electronic equivalent, or copy of all patient care records consistent with the U.S. Department of Transportation National Highway Traffic Safety Administration (NHTSA) National Emergency Medical Services Information System (NEMSIS) data dictionary found at www.nemsis.org/technical-resources/version-3
- An electronic copy of all completed patient care reports, which shall be maintained to ensure confidentiality and safekeeping for at least seven (7) years from the date on which the service was rendered, or in the case of a minor, at least three (3) years after the minor reaches the age of majority
- Copies of Patient Care Reports for the preceding twelve (12) months, which shall be accessible and be immediately available to the board, KBEMS office, or representatives upon request

Personnel files for each employee or volunteer who staffs a vehicle of a licensed agency.

Personnel files shall be maintained for at least one (1) year following separation from employment.

As a minimum, all personnel files shall contain:

- A pre-employment and annual criminal background check administered by the Kentucky Administrative Office of the Courts
- A copy of the employee's valid KBEMS certification or licensure card
- A copy of each employee's completion of NIMS ICS 100, 200, 700, and 800

For any employee who operates a vehicle:

- A copy of a valid driver's license
- Verification of completion of at least four (4) hours of driver training and education every two (2) years consistent with requirements of 202 KAR 7:560, Section 2.

Staffing schedules for the previous twelve (12) months.

On-Site Vehicle Inspection

During inspection, **an ambulance being inspected is expected to be in "run last" status**, meaning that it will not be dispatched to an emergency or non-emergency call unless no other unit is readily available within the service area. Ambulances that have completed their inspection should be utilized so that other vehicle inspections can be completed without interruption. *Agencies should plan accordingly to ensure coverage of their geographical service area during inspection.*

A Class 1 ground agency ambulance may be inspected at the BLS or ALS level. A minimum of 25% of a Class I agency vehicles staffed at the time of inspection are required to be inspected at an ALS level. The level of inspection (ALS/BLS) shall be made prior to the vehicle inspection beginning.

CONDITIONS OF LICENSURE

Renewal of License

The *Agency Inspection & Renewal Application* will include the agency renewal, and will be available at the beginning of the calendar year. It is the sole responsibility of the agency to maintain a current agency license.

Non-Renewal of License

Should an Agency License lapse due to non-renewal, the Agency License become null and void, and ambulance operations should cease immediately. It will then be necessary for the EMS Agency to apply for a new Kentucky Certificate of Need with the Kentucky Cabinet for Health and Family Services. There is no grace period or reinstatement for expired EMS agency licenses.

Lapse of Operations

Each licensed agency, with the exception of Class IV & Class VIII, is required to provide service twenty-four (24) hours a day, seven (7) days a week. Failure to maintain service twenty-four hours a day, seven days a week is considered a lapse of operations and the agency will be subject to discipline, up to and including expiration of the agency license.

Class IV and VIII agencies are required to operate during the hours of operation for their geographical service area or designated event, respectively.

Cease of Operations

If an agency wishes to surrender their Agency License and cease operations, they should notify KBEMS within twenty-four (24) hours of ceasing to provide service, and submit a completed "Cease Operations Notice" (KBEMS-A2). Upon completion of the KBEMS "Cease Operations Notice" the license for that agency becomes null and void, and cannot be sold to another entity.

Sale or Transfer of License

Agencies are required to submit a license transfer application if a change of ownership; of greater than 50% of the assets, capital stock, or voting rights of the direct owner of a licensed EMS agency; occurs as stated in 202 KAR 7:501, Section 3. This is applicable to changes in direct ownership only.

For example, if a holding company owns a corporation which owns an EMS agency, only the sale of the corporation will require an application submission.

A new license application filed due to a change of ownership shall be filed, at minimum, ten (10) days PRIOR to the change of ownership. The new license shall be issued for the remainder of the present year.

There shall be no lapse in service during the sale of the Agency License.

An agency that is currently under disciplinary action or review may not sell their license until the legal action has been resolved, and all associated fees have been paid.

Ambulance Purchasing Specification Requirements

Below you will find the specification requirements for purchasing an ambulance.

	Purchased Before Jan 1, 2019	Purchased After Jan 1, 2019
New Production Ambulance	Must be compliant with GSA KKK-A-1822 at time of purchase	Must be compliant with CAAS GVS at time of purchase*
Verified By:	Star of Life Decal	CAAS GVS Decal
Remounted Ambulance	Must be compliant with GSA KKK-A-1822 on original manufacture date	Must be complaint with CAAS GVS on original manufacture date
Verified By:	Star of Life Decal or letter from remounter/manufacture	CAAS GVS Decal or letter from remounter/manufacture

*CAAS certification require that a Final Stage Ambulance Manufacturer (FSAM) be registered with CAAS with the intention of producing CAAS GVS certified vehicles. It is the responsibility of the purchasing agency to ensure that an ambulance they are purchasing is eligible for GVS certification. Go to <http://www.groundvehiclestandard.org/registered-fsams/> for a complete list of FSAM's.

INITIAL VEHICLE INSPECTIONS

New Vehicle Inspection

A new ambulance is one that is not currently attached to your agency roster in KEMSIS.

Prior to being placed into service, all new vehicles must pass a physical inspection. Inspections for new ambulances are scheduled subject to the availability of the KBEMS Inspector/Liaison and may be performed either at the location of the agency, or at a location agreed upon by the Inspector/Liaison and the EMS agency representative, but will be conducted in a timely manner.

The agency will be assessed the appropriate fee for inspection of a new vehicle, regardless of the time of the inspection. If a new vehicle is inspected during the agency's scheduled annual inspection, the "New Vehicle Inspection (at agency location)" fee will be assessed in addition to normal and customary annual licensure and inspection fees.

If a vehicle is inspected at any other location than the office location of the KBEMS inspector the "at agency location" fee is applicable.

If the vehicle passes inspection, the vehicle may be used pending processing of the EMS Agency License; said license will be issued by KBEMS in a timely manner.

If the vehicle does not meet the minimum standards the violations(s) must be corrected prior to use as an ambulance. If violations(s) are unable to be corrected at the time of the inspection, an additional inspection shall be required to verify correction of the violation(s) and the agency will be required to submit an additional "Vehicle Add" application with the appropriate fee.

Temporary Vehicle

Agencies are permitted to use a "temporary vehicle", which is not on their agency vehicle roster in KEMSIS in an emergency situation. Temporary vehicles will only be allowed in an emergency situation which would result in a reduction of staffing coverage for the agency. The agency shall complete a Vehicle Change Form within 24 hours, or by the next business day, of the temporary vehicle being placed into service.

Temporary vehicles are allowed for use no more than thirty (30) days ANNUALLY without a physical inspection by KBEMS. If a vehicle deemed for temporary use is not removed after thirty (30) days of use the agency will be assessed a fine of \$500 for each day or partial day the vehicle is in service beyond 30 days.

Temporary vehicles are required to meet all KBEMS regulations while in service.

If an agency is found to be operating a vehicle for which proper notification has not been made, the agency will be required to immediately remove the vehicle from service until the appropriate vehicle application has been submitted.

AMBULANCE EQUIPMENT LISTS

(By license classification)

Class I ALS

Class I ALS Equipment List	
Ambulance Operations	
Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.	
(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.	
Be designed to provide for the medical care or transportation of patients.	
Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.	
Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires	
A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.	

<p>An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- Legislative Research Commission PDF Version Page: 2 of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture</p>	
<p>The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.</p>	
<p>The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.</p>	
<p>The patient care area lighting shall be fully functional.</p>	
<p>A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.</p>	
<p>Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.</p>	
<p>all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.</p>	
<p>Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies</p>	
<p>Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio</p>	

Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Each BLS agency shall maintain evidence in the form of a letter that adult and pediatric medical protocols have been reviewed and approved by the board pursuant to KRS 311A.180. A hard copy or electronic equivalent of approved protocols shall be accessible to each provider throughout each call.	
Suction, ventilation, and blood pressure equipment	
Two (2) sources of suction apparatus, one (1) of which shall be mechanically operated	
Rigid catheters	
Flexible catheters in adult, pediatric, and infant sizes	
Bulb syringe for infant and neonate suction	
Disposable adult and pediatric bag-valve-mask with a pediatric pop-off valve with oxygen reservoir, oxygen tubing, and adult, pediatric, infant, and neonate masks	
Nasopharyngeal airways (16F-34F; adult and child sizes) with water-soluble lubricant	
Oropharyngeal airways (sizes 0-5; adult, child, and infant sizes)	
Blind-Insertion Airway Device (BIAD) (adult and pediatric)	
Manual pediatric and adult regular and large sphygmomanometer cuffs with stethoscope.	
Oxygen equipment	
A fixed oxygen system for each ambulance	
Two (2) portable, adequately filled, secured oxygen tanks that are minimally size D	
Pressure gauge and flow rate regulator for fixed and portable units with a range of zero to fifteen (15) liters per minute	
Transparent non-rebreather oxygen masks and nasal cannulas for adults and pediatrics.	
Bandages, bandaging supplies and tape, including:	
Commercially packaged or sterile burn sheets	
Triangular bandages	
Dressings of the following types:	
Sterile dressings, including gauze sponges of suitable size	
Abdominal dressings	
Gauze rolls, various sizes	
Occlusive dressing, or equivalent	
Adhesive tape of various sizes (include one (1) inch and two (2) inch)	
Arterial tourniquet	
Shears for bandages.	
Obstetrical supplies that shall include at a minimum:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	

Thermal absorbent blanket and head cover, aluminum foil roll, or appropriate heat reflective material, e.g., enough to cover newborn infant	
BLS Supplies	
Sterile irrigation fluids	
Glucometer or blood glucose measuring device with reagent strips and lancets for obtaining a blood glucose sample	
Oral glucose	
Cold packs	
Heat packs	
An AED with a minimum of two (2) complete sets of pads suitable for adult and pediatric populations for all non-ALS vehicles	
Pulse oximeter with pediatric and adult probes	
A length-based resuscitation tape or a reference material that provides appropriate guidance for pediatric drug dosing and equipment sizing based on length or weight	
Splints, including:	
Lower extremity mechanical traction splint in adult and pediatric sizes	
Upper and lower extremity rigid splint devices for adult and pediatric patients	
Immobilization devices, including:	
Short extrication and immobilization device	
Adult and pediatric impervious long spine boards or other full body immobilization devices with a minimum of three (3) appropriate restraint cross-straps	
Cervical collars in the following sizes:	
Cervical collars for pediatric patients ages two (2) years or older	
Cervical collars for adults in small, medium, large, and other available sizes	
Pediatric and adult adjustable cervical collars	
Towel rolls or other commercially available cervical immobilization devices for adults and pediatrics	
Two (2) currently certified five (5) pound size or larger, secured, ABC multipurpose fire extinguishers, approved by Underwriters Laboratory, Coast Guard, or Factory Mutual. One (1) shall be accessible to the driver and the other to the attendant or attendants in the patient compartment in the ambulance	
Multi-position stretcher with wheels and a minimum of three (3) cross-straps in addition to one (1) set of shoulder straps for securing the patient to the stretcher and a fixed mechanism to secure the stretcher while in transit	
A pediatric transport device with a minimum weight range of ten (10) to forty (40) pounds	
A stair chair for the movement of patients in a seated position.	
Personal protective equipment shall be available to each staff member responding on the vehicle, including:	
One (1) clean scrub gown (or substitute, such as disposable coveralls)	
Simple disposable face mask	
Clear protective goggles or safety glasses	

Disposable gloves	
One (1) particulate filter mask rated at N95 or better without an exhaust port for patient use	
One (1) particulate filter mask rated at N95 or better with or without an exhaust port for protection of crew members	
A means of cleansing the hands, such as disposable towelettes or other solutions.	
Cleaning materials shall be available including:	
Hospital grade disinfectants	
Trash bags for disposal of nonbiohazard waste materials	
Biohazard bags for the disposal of biohazard waste	
Puncture resistant containers for disposal of sharp objects that are secured to the vehicle.	
Patient comfort items shall be available including:	
Two (2) clean blankets, sheets, pillows, and pillowcases	
A disposable urinal	
A disposable bed pan	
An emesis container or similar substitute.	
All items with an expiration date shall not be expired.	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle with extra batteries, bulbs, or blades if applicable	
Laryngoscope blades in the following sizes:	
0-4, straight Miller	
2-4, curved Macintosh	
Endotracheal tubes in the following sizes:	
2.5, 3.0, 3.5, 4.0, 4.5, 5.0, and 5.5 cuffed or uncuffed	
6.0, 6.5, 7.0, 7.5 and 8.0 cuffed	
Stylettes in adult and pediatric sizes	
10-mL syringes	
Magill forceps in adult and pediatric sizes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
End-Tidal CO2 detection capability (adult and pediatric)	
One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Equipment necessary to perform emergency percutaneous cricothyrotomy	
Disposable nebulizer	
A portable, battery-operated monitor defibrillator that:	
Has a tape write-out or recorder, hands-free defibrillator pads, electrocardiogram monitoring leads, and electrodes for adults and pediatrics	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	
Has synchronized counter-shock capability for cardioversion	
Has a transcutaneous cardiac pacemaker, including adult and pediatric pads and cables	
Has 12-Lead ECG capability if the vehicle is staffed to provide ALS services	
Vascular Access supplies consisting of:	
Isotonic crystalloid solutions	

Antiseptic solution (alcohol wipes and providone-iodine wipes)	
Intravenous catheters, 14G-24G	
Long-large bore needles or angiocatheters (at least 3.25 inches in length for needle chest decompression in large patients)	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Latex-free tourniquet	
Needles of various sizes, including suitable sizes for intramuscular injections	
Intravenous macrodrip and microdrip administrations sets	
Intravenous arm boards, adult and pediatric, or appropriate substitute.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	
A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
An ALS agency shall stock and maintain drugs and medications as required by the master drug list contained in protocols established in accordance with this section.	
Controlled drugs shall be stored in a locked storage box in a locked compartment on the vehicle that is immediately accessible to personnel.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class I BLS Equipment List

Ambulance Operations

<p>Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.</p>	
<p>(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.</p>	
<p>Be designed to provide for the medical care or transportation of patients.</p>	
<p>Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.</p>	
<p>Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires</p>	
<p>A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.</p>	
<p>An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star-of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion</p>	

company shall supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Each BLS agency shall maintain evidence in the form of a letter that adult and pediatric medical protocols have been reviewed and approved by the board pursuant to KRS 311A.180. A hard copy or electronic equivalent of approved protocols shall be accessible to each provider throughout each call.	
Suction, ventilation, and blood pressure equipment	
Two (2) sources of suction apparatus, one (1) of which shall be mechanically operated	
Rigid catheters	
Flexible catheters in adult, pediatric, and infant sizes	
Bulb syringe for infant and neonate suction	
Disposable adult and pediatric bag-valve-mask with a pediatric pop-off valve with oxygen reservoir, oxygen tubing, and adult, pediatric, infant, and neonate masks	

Nasopharyngeal airways (16F-34F; adult and child sizes) with water-soluble lubricant	
Oropharyngeal airways (sizes 0-5; adult, child, and infant sizes)	
Blind-Insertion Airway Device (BIAD) (adult and pediatric)	
Manual pediatric and adult regular and large sphygmomanometer cuffs with stethoscope.	
Oxygen equipment	
A fixed oxygen system for each ambulance	
Two (2) portable, adequately filled, secured oxygen tanks that are minimally size D	
Pressure gauge and flow rate regulator for fixed and portable units with a range of zero to fifteen (15) liters per minute	
Transparent non-rebreather oxygen masks and nasal cannulas for adults and pediatrics.	
Bandages, bandaging supplies and tape, including:	
Commercially packaged or sterile burn sheets	
Triangular bandages	
Dressings of the following types:	
Sterile dressings, including gauze sponges of suitable size	
Abdominal dressings	
Gauze rolls, various sizes	
Occlusive dressing, or equivalent	
Adhesive tape of various sizes (include one (1) inch and two (2) inch)	
Arterial tourniquet	
Shears for bandages.	
Obstetrical supplies that shall include at a minimum:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
Thermal absorbent blanket and head cover, aluminum foil roll, or appropriate heat reflective material, e.g., enough to cover newborn infant	
BLS Supplies	
Sterile irrigation fluids	
Glucometer or blood glucose measuring device with reagent strips and lancets for obtaining a blood glucose sample	
Oral glucose	
Cold packs	
Heat packs	
An AED with a minimum of two (2) complete sets of pads suitable for adult and pediatric populations for all non-ALS vehicles	
Pulse oximeter with pediatric and adult probes	

A length-based resuscitation tape or a reference material that provides appropriate guidance for pediatric drug dosing and equipment sizing based on length or weight	
Splints, including:	
Lower extremity mechanical traction splint in adult and pediatric sizes	
Upper and lower extremity rigid splint devices for adult and pediatric patients	
Immobilization devices, including:	
Short extrication and immobilization device	
Adult and pediatric impervious long spine boards or other full body immobilization devices	
with a minimum of three (3) appropriate restraint cross-straps	
Cervical collars in the following sizes:	
Cervical collars for pediatric patients ages two (2) years or older	
Cervical collars for adults in small, medium, large, and other available sizes	
Pediatric and adult adjustable cervical collars	
Towel rolls or other commercially available cervical immobilization devices for adults and pediatrics	
Two (2) currently certified five (5) pound size or larger, secured, ABC multipurpose fire extinguishers, approved by Underwriters Laboratory, Coast Guard, or Factory Mutual. One (1) shall be accessible to the driver and the other to the attendant or attendants in the patient compartment in the ambulance	
Multi-position stretcher with wheels and a minimum of three (3) cross-straps in addition to one (1) set of shoulder straps for securing the patient to the stretcher and a fixed mechanism to secure the stretcher while in transit	
A pediatric transport device with a minimum weight range of ten (10) to forty (40) pounds	
A stair chair for the movement of patients in a seated position.	
Personal protective equipment shall be available to each staff member responding on the vehicle, including:	
One (1) clean scrub gown (or substitute, such as disposable coveralls)	
Simple disposable face mask	
Clear protective goggles or safety glasses	
Disposable gloves	
One (1) particulate filter mask rated at N95 or better without an exhaust port for patient use	
One (1) particulate filter mask rated at N95 or better with or without an exhaust port for protection of crew members	
A means of cleansing the hands, such disposable towelettes or other solutions.	
Cleaning materials shall be available including:	
Hospital grade disinfectants	
Trash bags for disposal of nonbiohazard waste materials	
Biohazard bags for the disposal of biohazard waste	
Puncture resistant containers for disposal of sharp objects that are secured to the vehicle.	
Patient comfort items shall be available including:	
Two (2) clean blankets, sheets, pillows, and pillowcases	

A disposable urinal	
A disposable bed pan	
An emesis container or similar substitute.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	
A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
All items with an expiration date shall not be expired.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class II BLS Equipment List

Ambulance Operations

Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.

(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.

Be designed to provide for the medical care or transportation of patients.

Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.

Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires

A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.

An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall

supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Each BLS agency shall maintain evidence in the form of a letter that adult and pediatric medical protocols have been reviewed and approved by the board pursuant to KRS 311A.180. A hard copy or electronic equivalent of approved protocols shall be accessible to each provider throughout each call.	
Suction, ventilation, and blood pressure equipment	
Two (2) sources of suction apparatus, one (1) of which shall be mechanically operated	
Rigid catheters	
Flexible catheters in adult, pediatric, and infant sizes	
Bulb syringe for infant and neonate suction	
Disposable adult and pediatric bag-valve-mask with a pediatric pop-off valve with oxygen reservoir, oxygen tubing, and adult, pediatric, infant, and neonate masks	

Nasopharyngeal airways (16F-34F; adult and child sizes) with water-soluble lubricant	
Oropharyngeal airways (sizes 0-5; adult, child, and infant sizes)	
Blind-Insertion Airway Device (BIAD) (adult and pediatric)	
Manual pediatric and adult regular and large sphygmomanometer cuffs with stethoscope.	
Oxygen equipment	
A fixed oxygen system for each ambulance	
Two (2) portable, adequately filled, secured oxygen tanks that are minimally size D	
Pressure gauge and flow rate regulator for fixed and portable units with a range of zero to fifteen (15) liters per minute	
Transparent non-rebreather oxygen masks and nasal cannulas for adults and pediatrics.	
Bandages, bandaging supplies and tape, including:	
Commercially packaged or sterile burn sheets	
Triangular bandages	
Dressings of the following types:	
Sterile dressings, including gauze sponges of suitable size	
Abdominal dressings	
Gauze rolls, various sizes	
Occlusive dressing, or equivalent	
Adhesive tape of various sizes (include one (1) inch and two (2) inch)	
Arterial tourniquet	
Shears for bandages.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	
A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
Obstetrical supplies that shall include at a minimum:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
Thermal absorbent blanket and head cover, aluminum foil roll, or appropriate heat reflective material, e.g., enough to cover newborn infant	
BLS Supplies	
Sterile irrigation fluids	
Glucometer or blood glucose measuring device with reagent strips and lancets for obtaining a blood glucose sample	

Oral glucose	
Cold packs	
Heat packs	
An AED with a minimum of two (2) complete sets of pads suitable for adult and pediatric populations for all non-ALS vehicles	
Pulse oximeter with pediatric and adult probes	
A length-based resuscitation tape or a reference material that provides appropriate guidance for pediatric drug dosing and equipment sizing based on length or weight	
Splints, including:	
Lower extremity mechanical traction splint in adult and pediatric sizes	
Upper and lower extremity rigid splint devices for adult and pediatric patients	
Immobilization devices, including:	
Short extrication and immobilization device	
Adult and pediatric impervious long spine boards or other full body immobilization devices	
with a minimum of three (3) appropriate restraint cross-straps	
Cervical collars in the following sizes:	
Cervical collars for pediatric patients ages two (2) years or older	
Cervical collars for adults in small, medium, large, and other available sizes	
Pediatric and adult adjustable cervical collars	
Towel rolls or other commercially available cervical immobilization devices for adults and pediatrics	
Two (2) currently certified five (5) pound size or larger, secured, ABC multipurpose fire extinguishers, approved by Underwriters Laboratory, Coast Guard, or Factory Mutual. One (1) shall be accessible to the driver and the other to the attendant or attendants in the patient compartment in the ambulance	
Multi-position stretcher with wheels and a minimum of three (3) cross-straps in addition to one (1) set of shoulder straps for securing the patient to the stretcher and a fixed mechanism to secure the stretcher while in transit	
A pediatric transport device with a minimum weight range of ten (10) to forty (40) pounds	
A stair chair for the movement of patients in a seated position.	
Personal protective equipment shall be available to each staff member responding on the vehicle, including:	
One (1) clean scrub gown (or substitute, such as disposable coveralls)	
Simple disposable face mask	
Clear protective goggles or safety glasses	
Disposable gloves	
One (1) particulate filter mask rated at N95 or better without an exhaust port for patient use	
One (1) particulate filter mask rated at N95 or better with or without an exhaust port for protection of crew members	
A means of cleansing the hands, such disposable towelettes or other solutions.	
Cleaning materials shall be available including:	
Hospital grade disinfectants	

Trash bags for disposal of nonbiohazard waste materials	
Biohazard bags for the disposal of biohazard waste	
Puncture resistant containers for disposal of sharp objects that are secured to the vehicle.	
Patient comfort items shall be available including:	
Two (2) clean blankets, sheets, pillows, and pillowcases	
A disposable urinal	
A disposable bed pan	
An emesis container or similar substitute.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	
A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
All items with an expiration date shall not be expired.	

Class III Neonatal Specialty Care Equipment List

Ambulance Operations

Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.

(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.

Be designed to provide for the medical care or transportation of patients.

Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.

Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires

A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.

An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- Legislative Research Commission PDF Version Page: 2 of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon

inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Direct two-way communications with the designated neonatologist, attending physician, or receiving NICU	
A standby or backup power source other than the one (1) contained in the isolette	
A source of electrical power sufficient to operate the isolette and ancillary electrically powered equipment	
A transport incubator with portable power supply, portable oxygen tanks, or liquid oxygen, and a source of compressed air, including appropriate valves, meters, and fittings. The transport incubator shall be secured in the vehicle using a manufacturer-approved vehicle mounting device	
One (1) portable heart rate monitor with visual or audible display and alarm system per patient	

One (1) portable blood pressure monitor with an assortment of cuff sizes suitable for infants	
Three (3) battery powered mechanical IV pumps capable of delivering as low as 1cc increments for IV fluids	
A battery or self-powered oxygen sensor and transcutaneous oxygen monitor or oxygen Saturation monitor	
Oxygen delivery devices and tubing capable of administering high concentrations of oxygen	
A temperature-monitoring device	
A portable ventilator appropriate for neonatal patients	
An anesthesia or self-inflating bag with an oxygen reservoir of less than 750 ml, a manometer pressure gauge, and premature newborn and infant size clear masks	
A laryngoscope handle	
Laryngoscope Blades in Miller sizes 00, 0, 1, 2, 3	
Two (2) bulbs	
Two (2) batteries	
Endotracheal tubes in various sizes	
Two (2) stylets	
Two (2) meconium aspirators	
Oral airways in various sizes	
Suction equipment with low suction capabilities of less than eighty (80) mmHg	
Two (2) suction catheters in sizes 5.0, 6, 6.5, 8, and 10 each	
Syringes sizes 1 cc through 60 cc in various sizes	
Two (2) medication access devices	
23-27 gauge vascular access devices in various sizes	
Sterile gloves in various sizes and sufficient quantity for all crewmembers	
Medications as required by the master drug list contained in protocols established in accordance with this section	
IV extension tubing in sufficient length to administer IV fluids or medications	
IV securing devices in various sizes	
Two (2) IV filters	
Two (2) umbilical catheters, sizes 3.5 and 5	
Ten (10) antiseptic solution wipes	
One (1) blood glucose-monitoring device	
Five (5) lancets for obtaining a blood glucose sample	
One (1) neonatal stethoscope	
One (1) flashlight	
Gauze pads	
One (1) No. 5 and one (1) No. 8 French feeding tube	
One (1) high intensity light capable of transillumination	
A biomedical waste plastic bag or impervious container	
Puncture resistant containers for disposal of sharp objects that shall be secured to the vehicle	
Gloves made of nitrile or other suitable materials in sufficient quantity for all crew members	
Respiratory face masks in sufficient quantity for all crew members	

Special procedure trays or instruments capable of performing umbilical catheterization, venous cutdown, and thoracostomy in accordance with established protocol	
One (1) bulb syringe	
One (1) cord clamp	
One (1) age appropriate chest tube evacuation device	
Needle aspiration device or chest tubes in appropriate sizes for a neonate patient	

Class III Peds Specialty Care Equipment List

Ambulance Operations

<p>Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.</p>	
<p>(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.</p>	
<p>Be designed to provide for the medical care or transportation of patients.</p>	
<p>Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.</p>	
<p>Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires</p>	
<p>A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.</p>	
<p>An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- Legislative Research Commission PDF Version Page: 2 of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall</p>	

supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle with extra batteries, bulbs, or blades if applicable	
Laryngoscope blades in the following sizes:	
0-4, straight Miller	
2-4, curved Macintosh	
Endotracheal tubes in the following sizes:	
2.5, 3.0, 3.5, 4.0, 4.5, 5.0, and 5.5 cuffed or uncuffed	
6.0, 6.5, 7.0, 7.5 and 8.0 cuffed	
Stylettes in adult and pediatric sizes	
10-mL syringes	
Magill forceps in adult and pediatric sizes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
End-Tidal CO2 detection capability (adult and pediatric)	

One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Equipment necessary to perform emergency percutaneous cricothyrotomy	
Disposable nebulizer	
A portable, battery-operated monitor defibrillator that:	
Has a tape write-out or recorder, hands-free defibrillator pads, electrocardiogram monitoring leads, and electrodes for adults and pediatrics	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	
Has synchronized counter-shock capability for cardioversion	
Has a transcutaneous cardiac pacemaker, including adult and pediatric pads and cables	
Has 12-Lead ECG capability if the vehicle is staffed to provide ALS services	
Vascular Access supplies consisting of:	
Isotonic crystalloid solutions	
Antiseptic solution (alcohol wipes and providone-iodine wipes)	
Intravenous catheters, 14G-24G	
Long-large bore needles or angiocatheters (at least 3.25 inches in length for needle chest decompression in large patients)	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Latex-free tourniquet	
Needles of various sizes, including suitable sizes for intramuscular injections	
Intravenous macrodrip and microdrip administrations sets	
Intravenous arm boards, adult and pediatric, or appropriate substitute.	
An ALS agency shall stock and maintain drugs and medications as required by the master drug list contained in protocols established in accordance with this section.	
Controlled drugs shall be stored in a locked storage box in a locked compartment on the vehicle that is immediately accessible to personnel.	
This administrative regulation shall not prevent an agency from maintaining other supplies or equipment that are required to carry out its protocols as approved by the board in accordance KRS 311A.180	
All items with expiration dates shall not be expired	
Two (2) 250 ml bags of normal saline or lactated ringers	
Twelve (12) syringes assorted from 1cc to 2cc	
Four (4) three-way stopcocks	
A needle cricothyrotomy kit for children from the ages of twenty-nine (29) days until twenty-one (21) years of age	
A blind-insertion airway device (BIAD) in appropriate sizes for children from the ages of twenty-nine (29) days until twenty-one (21) years of age.	
Direct two-way communications with the designated neonatologist, attending physician, or receiving NICU	
A standby or backup power source other than the one (1) contained in the isolette	

A source of electrical power sufficient to operate the isolette and ancillary electrically powered equipment	
A transport incubator with portable power supply, portable oxygen tanks, or liquid oxygen, and a source of compressed air, including appropriate valves, meters, and fittings. The transport incubator shall be secured in the vehicle using a manufacturer-approved vehicle mounting device	
One (1) portable heart rate monitor with visual or audible display and alarm system per patient	
One (1) portable blood pressure monitor with an assortment of cuff sizes suitable for infants	
Three (3) battery powered mechanical IV pumps capable of delivering as low as 1cc increments for IV fluids	
A battery or self-powered oxygen sensor and transcutaneous oxygen monitor or oxygen Saturation monitor	
Oxygen delivery devices and tubing capable of administering high concentrations of oxygen	
A temperature-monitoring device	
A portable ventilator appropriate for neonatal patients	
An anesthesia or self-inflating bag with an oxygen reservoir of less than 750 ml, a manometer pressure gauge, and premature newborn and infant size clear masks	
A laryngoscope handle	
Laryngoscope Blades in Miller sizes 00, 0, 1, 2, 3	
Two (2) bulbs	
Two (2) batteries	
Endotracheal tubes in various sizes	
Two (2) stylets	
Two (2) meconium aspirators	
Oral airways in various sizes	
Suction equipment with low suction capabilities of less than eighty (80) mmHg	
Two (2) suction catheters in sizes 5.0, 6, 6.5, 8, and 10 each	
Syringes sizes 1 cc through 60 cc in various sizes	
Two (2) medication access devices	
23-27 gauge vascular access devices in various sizes	
Sterile gloves in various sizes and sufficient quantity for all crewmembers	
Medications as required by the master drug list contained in protocols established in accordance with this section	
IV extension tubing in sufficient length to administer IV fluids or medications	
IV securing devices in various sizes	
Two (2) IV filters	
Two (2) umbilical catheters, sizes 3.5 and 5	
Ten (10) antiseptic solution wipes	
One (1) blood glucose-monitoring device	
Five (5) lancets for obtaining a blood glucose sample	
One (1) neonatal stethoscope	
One (1) flashlight	

Gauze pads	
One (1) No. 5 and one (1) No. 8 French feeding tube	
One (1) high intensity light capable of transillumination	
A biomedical waste plastic bag or impervious container	
Puncture resistant containers for disposal of sharp objects that shall be secured to the vehicle	
Gloves made of nitrile or other suitable materials in sufficient quantity for all crew members	
Respiratory face masks in sufficient quantity for all crew members	
Special procedure trays or instruments capable of performing umbilical catheterization, venous cutdown, and thoracostomy in accordance with established protocol	
One (1) bulb syringe	
One (1) cord clamp	
One (1) age appropriate chest tube evacuation device	
Needle aspiration device or chest tubes in appropriate sizes for a neonate patient	

Class III Adult Critical Care Equipment List

Ambulance Operations

<p>Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.</p>	
<p>(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.</p>	
<p>Be designed to provide for the medical care or transportation of patients.</p>	
<p>Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.</p>	
<p>Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires</p>	
<p>A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.</p>	
<p>An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall</p>	

supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle with extra batteries, bulbs, or blades if applicable	
Laryngoscope blades in the following sizes:	
0-4, straight Miller	
2-4, curved Macintosh	
Endotracheal tubes in the following sizes:	
2.5, 3.0, 3.5, 4.0, 4.5, 5.0, and 5.5 cuffed or uncuffed	
6.0, 6.5, 7.0, 7.5 and 8.0 cuffed	
Stylettes in adult and pediatric sizes	
10-mL syringes	
Magill forceps in adult and pediatric sizes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
End-Tidal CO2 detection capability (adult and pediatric)	

One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Equipment necessary to perform emergency percutaneous cricothyrotomy	
Disposable nebulizer	
A portable, battery-operated monitor defibrillator that:	
Has a tape write-out or recorder, hands-free defibrillator pads, electrocardiogram monitoring leads, and electrodes for adults and pediatrics	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	
Has synchronized counter-shock capability for cardioversion	
Has a transcutaneous cardiac pacemaker, including adult and pediatric pads and cables	
Has 12-Lead ECG capability if the vehicle is staffed to provide ALS services	
Vascular Access supplies consisting of:	
Isotonic crystalloid solutions	
Antiseptic solution (alcohol wipes and providone-iodine wipes)	
Intravenous catheters, 14G-24G	
Long-large bore needles or angiocatheters (at least 3.25 inches in length for needle chest decompression in large patients)	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Latex-free tourniquet	
Needles of various sizes, including suitable sizes for intramuscular injections	
Intravenous macrodrip and microdrip administrations sets	
Intravenous arm boards, adult and pediatric, or appropriate substitute.	
An ALS agency shall stock and maintain drugs and medications as required by the master drug list contained in protocols established in accordance with this section.	
Controlled drugs shall be stored in a locked storage box in a locked compartment on the vehicle that is immediately accessible to personnel.	
This administrative regulation shall not prevent an agency from maintaining other supplies or equipment that are required to carry out its protocols as approved by the board in accordance KRS 311A.180	
All items with expiration dates shall not be expired	
A portable transport ventilator, the capabilities of which shall include: 1. Controlling rate; 2. Volume; 3. FiO2 up to 100 percent; 4. I:E ratio; 5. PEEP; 6. Volume control; 7. Pressure control; 8. SIMV mode; 9. NPPV mode; and 10. Low- and high-pressure warning alarms	
Two (2) portable transport ventilator circuits appropriately sized for the patient being transported	
Continuous Positive Airway Pressure (CPAP) ventilation portable equipment	
Electronic waveform capnography, intubated patient, capable of waveform display	
Difficult airway equipment in the form of a bougie gum elastic ET introducer	
Sterile cricothyrotomy set, surgical or needle	

Invasive pressure monitoring capability electronic waveform available on two (2) channels	
An infusion pump or pumps capable of infusing three (3) separate medications simultaneously	
Six (6) IV infusion pump tubing sets	
Two (2) blood infusion sets	
A device to monitor core body temperature through rectal or esophageal probe	

Class IV ALS Equipment List

Ambulance Operations

Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.

(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.

Be designed to provide for the medical care or transportation of patients.

Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.

Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires

A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.

An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- Legislative Research Commission PDF Version Page: 2 of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall

supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Each BLS agency shall maintain evidence in the form of a letter that adult and pediatric medical protocols have been reviewed and approved by the board pursuant to KRS 311A.180. A hard copy or electronic equivalent of approved protocols shall be accessible to each provider throughout each call.	
Suction, ventilation, and blood pressure equipment	
Two (2) sources of suction apparatus, one (1) of which shall be mechanically operated	
Rigid catheters	
Flexible catheters in adult, pediatric, and infant sizes	
Bulb syringe for infant and neonate suction	
Disposable adult and pediatric bag-valve-mask with a pediatric pop-off valve with oxygen reservoir, oxygen tubing, and adult, pediatric, infant, and neonate masks	

Nasopharyngeal airways (16F-34F; adult and child sizes) with water-soluble lubricant	
Oropharyngeal airways (sizes 0-5; adult, child, and infant sizes)	
Blind-Insertion Airway Device (BIAD) (adult and pediatric)	
Manual pediatric and adult regular and large sphygmomanometer cuffs with stethoscope.	
Oxygen equipment	
A fixed oxygen system for each ambulance	
Two (2) portable, adequately filled, secured oxygen tanks that are minimally size D	
Pressure gauge and flow rate regulator for fixed and portable units with a range of zero to fifteen (15) liters per minute	
Transparent non-rebreather oxygen masks and nasal cannulas for adults and pediatrics.	
Bandages, bandaging supplies and tape, including:	
Commercially packaged or sterile burn sheets	
Triangular bandages	
Dressings of the following types:	
Sterile dressings, including gauze sponges of suitable size	
Abdominal dressings	
Gauze rolls, various sizes	
Occlusive dressing, or equivalent	
Adhesive tape of various sizes (include one (1) inch and two (2) inch)	
Arterial tourniquet	
Shears for bandages.	
Obstetrical supplies that shall include at a minimum:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
Thermal absorbent blanket and head cover, aluminum foil roll, or appropriate heat reflective material, e.g., enough to cover newborn infant	
BLS Supplies	
Sterile irrigation fluids	
Glucometer or blood glucose measuring device with reagent strips and lancets for obtaining a blood glucose sample	
Oral glucose	
Cold packs	
Heat packs	
An AED with a minimum of two (2) complete sets of pads suitable for adult and pediatric populations for all non-ALS vehicles	
Pulse oximeter with pediatric and adult probes	

A length-based resuscitation tape or a reference material that provides appropriate guidance for pediatric drug dosing and equipment sizing based on length or weight	
Splints, including:	
Lower extremity mechanical traction splint in adult and pediatric sizes	
Upper and lower extremity rigid splint devices for adult and pediatric patients	
Immobilization devices, including:	
Short extrication and immobilization device	
Adult and pediatric impervious long spine boards or other full body immobilization devices	
with a minimum of three (3) appropriate restraint cross-straps	
Cervical collars in the following sizes:	
Cervical collars for pediatric patients ages two (2) years or older	
Cervical collars for adults in small, medium, large, and other available sizes	
Pediatric and adult adjustable cervical collars	
Towel rolls or other commercially available cervical immobilization devices for adults and pediatrics	
Two (2) currently certified five (5) pound size or larger, secured, ABC multipurpose fire extinguishers, approved by Underwriters Laboratory, Coast Guard, or Factory Mutual. One (1) shall be accessible to the driver and the other to the attendant or attendants in the patient compartment in the ambulance	
Multi-position stretcher with wheels and a minimum of three (3) cross-straps in addition to one (1) set of shoulder straps for securing the patient to the stretcher and a fixed mechanism to secure the stretcher while in transit	
A pediatric transport device with a minimum weight range of ten (10) to forty (40) pounds	
A stair chair for the movement of patients in a seated position.	
Personal protective equipment shall be available to each staff member responding on the vehicle, including:	
One (1) clean scrub gown (or substitute, such as disposable coveralls)	
Simple disposable face mask	
Clear protective goggles or safety glasses	
Disposable gloves	
One (1) particulate filter mask rated at N95 or better without an exhaust port for patient use	
One (1) particulate filter mask rated at N95 or better with or without an exhaust port for protection of crew members	
A means of cleansing the hands, such disposable towlettes or other solutions.	
Cleaning materials shall be available including:	
Hospital grade disinfectants	
Trash bags for disposal of nonbiohazard waste materials	
Biohazard bags for the disposal of biohazard waste	
Puncture resistant containers for disposal of sharp objects that are secured to the vehicle.	
Patient comfort items shall be available including:	
Two (2) clean blankets, sheets, pillows, and pillowcases	

A disposable urinal	
A disposable bed pan	
An emesis container or similar substitute.	
All items with an expiration date shall not be expired.	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle with extra batteries, bulbs, or blades if applicable	
Laryngoscope blades in the following sizes:	
0-4, straight Miller	
2-4, curved Macintosh	
Endotracheal tubes in the following sizes:	
2.5, 3.0, 3.5, 4.0, 4.5, 5.0, and 5.5 cuffed or uncuffed	
6.0, 6.5, 7.0, 7.5 and 8.0 cuffed	
Stylettes in adult and pediatric sizes	
10-mL syringes	
Magill forceps in adult and pediatric sizes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
End-Tidal CO2 detection capability (adult and pediatric)	
One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Equipment necessary to perform emergency percutaneous cricothyrotomy	
Disposable nebulizer	
A portable, battery-operated monitor defibrillator that:	
Has a tape write-out or recorder, hands-free defibrillator pads, electrocardiogram monitoring leads, and electrodes for adults and pediatrics	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	
Has synchronized counter-shock capability for cardioversion	
Has a transcutaneous cardiac pacemaker, including adult and pediatric pads and cables	
Has 12-Lead ECG capability if the vehicle is staffed to provide ALS services	
Vascular Access supplies consisting of:	
Isotonic crystalloid solutions	
Antiseptic solution (alcohol wipes and providone-iodine wipes)	
Intravenous catheters, 14G-24G	
Long-large bore needles or angiocatheters (at least 3.25 inches in length for needle chest decompression in large patients)	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Latex-free tourniquet	
Needles of various sizes, including suitable sizes for intramuscular injections	
Intravenous macrodrip and microdrip administrations sets	
Intravenous arm boards, adult and pediatric, or appropriate substitute.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	

A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
An ALS agency shall stock and maintain drugs and medications as required by the master drug list contained in protocols established in accordance with this section.	
Controlled drugs shall be stored in a locked storage box in a locked compartment on the vehicle that is immediately accessible to personnel.	
This administrative regulation shall not prevent an agency from maintaining other supplies or equipment that are required to carry out its protocols as approved by the board in accordance KRS 311A.180	
All items with expiration dates shall not be expired	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class IV BLS Equipment List

Ambulance Operations

Have the name of the provider permanently affixed by paint, decal, or wrap on both sides of the exterior surface of the vehicle. 1. The name shall be the incorporated name or the name under which the provider does business and as it appears on the provider's license. 2. This requirement shall not preclude a provider from adding additional names from another entity on the vehicle due to a joint venture, if the name as licensed by the board is larger, and visible and legible by the public. 3. A vehicle operated by an agency shall not be marked with the words "advanced life support", "paramedic," or similar words that convey essentially the same meaning on the vehicle's exterior surface visible to the public unless the: a. Vehicle is always staffed at an Advanced Life Support level; or b. Agency was licensed by the board prior to January 1, 2018.

(b) Be maintained in good operating condition and in full repair without obvious apparent problems relating to tires, exhaust, body integrity, warning devices, or mechanical reliability, which would be recognized by the average lay person who is not an automotive mechanic.

Be designed to provide for the medical care or transportation of patients.

Stow all equipment weighing three (3) pounds or more in an enclosure, bracket, mount, or other appropriate securing device.

Have tires that meet the manufacturer's standards for the gross vehicle weight of the vehicle. 1. A tire shall not display exposed tire cord or have tread depth less than 2/32 on back tires and 4/32 on front tires if measured in any two (2) adjacent grooves at three (3) locations spaced equally around the tire. 2. Retread tires shall not be used on ground vehicles. 3. Internal patches may be utilized for tire repairs if necessary. 4. More than two (2) patches shall not be used on any one (1) defective tire. 5. Plugs shall not be used for the repair of defective ambulance tires

A ground ambulance licensed in Kentucky shall be affixed with an official Kentucky Board of Emergency Medical Services decal that states, at a minimum, the month and year of inspection.

An ambulance manufactured prior to January 1, 2019 shall meet or exceed the standards established in the U.S. General Services Administration Federal Specification for the Star- of-Life Ambulance (GSA KKK-A-1822) in effect on the original date of manufacture. (c) The agency shall require, for a unit in which the chassis of an ambulance is later replaced, the conversion company to supply a letter to verify that no modification exists that was contained in GSA KKK-A-1822 on the original date of module manufacture. (d) A new production ground ambulance that is ordered after January 1, 2019 shall comply fully with the ambulance design criteria contained in the Commission on Accreditation of Ambulance Services Ground Vehicle Standard for Ambulances (GVS), 7/2016. A decal or letter of verification from the manufacturer certifying that the vehicle meets the GVS standard, if ordered after January 1, 2019, shall be made available upon inspection. (e) The agency shall require for any GVS certified vehicle, in which the chassis of an ambulance is later replaced, the conversion company shall

supply a letter to verify that no modification exists that was contained in the GVS standard on the original date of module manufacture	
The air-conditioning system shall minimally deliver a temperature of sixty-five (65) degrees Fahrenheit or less from the vent or vents in the driver and patient compartments in warm weather conditions as determined by a standard automotive testing thermometer.	
The heating system shall minimally deliver a temperature of eighty-five (85) degrees Fahrenheit or more from the vent or vents in the driver and patient compartments in cool weather conditions as determined by a standard automotive testing thermometer.	
The patient care area lighting shall be fully functional.	
A preventive maintenance program shall be maintained for each vehicle and its equipment to keep them in optimum working order to protect the health and safety of the patient and ambulance personnel.	
Documentation shall be maintained by the agency to support evidence of periodic inspections as recommended by the manufacturer, including calibrations required for maintenance and operation of the vehicle and its equipment.	
all linen used for patient care including sheets, blankets, pillowcases, pillows, towels, and washcloths shall be stowed in a separate cabinet and secured from body fluids. (b) One (1) pillow, one (1) pillow-case, one (1) fitted sheet, two (2) flat sheets, one (1) towel, and two (2) blankets may be utilized on the stretcher that is in-service and shall not require stowing.	
Each ambulance equipped with a mobile two-way radio with a control point in driver's and patient compartment. Radios must have capability, under normal conditions, of operating on agency, dispatch center, mutual aid and hospital frequencies	
Each ambulance shall have a minimum of two (2) portable push-to-talk two way radio communication devices capable of operating on the agency dispatch center, mutual aid, and hospital frequencies - an alternative method of two (2) way communication may be substituted for one portable two way radio	
Capability to communicate on all VHF Ky State Mutual Aid Frequencies, per the Ky Field Operations Guide	
Each BLS agency shall maintain evidence in the form of a letter that adult and pediatric medical protocols have been reviewed and approved by the board pursuant to KRS 311A.180. A hard copy or electronic equivalent of approved protocols shall be accessible to each provider throughout each call.	
Suction, ventilation, and blood pressure equipment	
Two (2) sources of suction apparatus, one (1) of which shall be mechanically operated	
Rigid catheters	
Flexible catheters in adult, pediatric, and infant sizes	
Bulb syringe for infant and neonate suction	
Disposable adult and pediatric bag-valve-mask with a pediatric pop-off valve with oxygen reservoir, oxygen tubing, and adult, pediatric, infant, and neonate masks	

Nasopharyngeal airways (16F-34F; adult and child sizes) with water-soluble lubricant	
Oropharyngeal airways (sizes 0-5; adult, child, and infant sizes)	
Blind-Insertion Airway Device (BIAD) (adult and pediatric)	
Manual pediatric and adult regular and large sphygmomanometer cuffs with stethoscope.	
Oxygen equipment	
A fixed oxygen system for each ambulance	
Two (2) portable, adequately filled, secured oxygen tanks that are minimally size D	
Pressure gauge and flow rate regulator for fixed and portable units with a range of zero to fifteen (15) liters per minute	
Transparent non-rebreather oxygen masks and nasal cannulas for adults and pediatrics.	
Bandages, bandaging supplies and tape, including:	
Commercially packaged or sterile burn sheets	
Triangular bandages	
Dressings of the following types:	
Sterile dressings, including gauze sponges of suitable size	
Abdominal dressings	
Gauze rolls, various sizes	
Occlusive dressing, or equivalent	
Adhesive tape of various sizes (include one (1) inch and two (2) inch)	
Arterial tourniquet	
Shears for bandages.	
Miscellaneous supplies, including:	
Hand held flashlight capable of providing adequate lighting to assess a scene or a patient	
Penlight	
A copy or electronic equivalent of the 2016 U.S. Department of Transportation, Emergency Response Guidebook	
A minimum of ten (10) triage tags consistent with START System of Triage	
Obstetrical supplies that shall include at a minimum:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
Thermal absorbent blanket and head cover, aluminum foil roll, or appropriate heat reflective material, e.g., enough to cover newborn infant	
BLS Supplies	
Sterile irrigation fluids	
Glucometer or blood glucose measuring device with reagent strips and lancets for obtaining a blood glucose sample	

Oral glucose	
Cold packs	
Heat packs	
An AED with a minimum of two (2) complete sets of pads suitable for adult and pediatric populations for all non-ALS vehicles	
Pulse oximeter with pediatric and adult probes	
A length-based resuscitation tape or a reference material that provides appropriate guidance for pediatric drug dosing and equipment sizing based on length or weight	
Splints, including:	
Lower extremity mechanical traction splint in adult and pediatric sizes	
Upper and lower extremity rigid splint devices for adult and pediatric patients	
Immobilization devices, including:	
Short extrication and immobilization device	
Adult and pediatric impervious long spine boards or other full body immobilization devices	
with a minimum of three (3) appropriate restraint cross-straps	
Cervical collars in the following sizes:	
Cervical collars for pediatric patients ages two (2) years or older	
Cervical collars for adults in small, medium, large, and other available sizes	
Pediatric and adult adjustable cervical collars	
Towel rolls or other commercially available cervical immobilization devices for adults and pediatrics	
Two (2) currently certified five (5) pound size or larger, secured, ABC multipurpose fire extinguishers, approved by Underwriters Laboratory, Coast Guard, or Factory Mutual. One (1) shall be accessible to the driver and the other to the attendant or attendants in the patient compartment in the ambulance	
Multi-position stretcher with wheels and a minimum of three (3) cross-straps in addition to one (1) set of shoulder straps for securing the patient to the stretcher and a fixed mechanism to secure the stretcher while in transit	
A pediatric transport device with a minimum weight range of ten (10) to forty (40) pounds	
A stair chair for the movement of patients in a seated position.	
Personal protective equipment shall be available to each staff member responding on the vehicle, including:	
One (1) clean scrub gown (or substitute, such as disposable coveralls)	
Simple disposable face mask	
Clear protective goggles or safety glasses	
Disposable gloves	
One (1) particulate filter mask rated at N95 or better without an exhaust port for patient use	
One (1) particulate filter mask rated at N95 or better with or without an exhaust port for protection of crew members	
A means of cleansing the hands, such disposable towelettes or other solutions.	
Cleaning materials shall be available including:	
Hospital grade disinfectants	

Trash bags for disposal of nonbiohazard waste materials	
Biohazard bags for the disposal of biohazard waste	
Puncture resistant containers for disposal of sharp objects that are secured to the vehicle.	
Patient comfort items shall be available including:	
Two (2) clean blankets, sheets, pillows, and pillowcases	
A disposable urinal	
A disposable bed pan	
An emesis container or similar substitute.	
All items with an expiration date shall not be expired.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class VI ALS Equipment List

Agency Operations	
Maintain one (1) complete set of equipment	
Each basic life support non-transport vehicle shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Must have the capability to communicate on all VHF Kentucky State Mutual Aid Frequencies in accordance with the Commonwealth of Kentucky Field Operations Guide (KY-FOG)	
Shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall properly store and keep multiuse items clean and sterile if indicated.	
Portable suction apparatus, capable of a minimum vacuum of 300 millimeters mercury, equipped with two (2) each of the following:	
Wide-bore tubing	
Rigid catheters	
Soft pharyngeal suction tips in child size	
Soft pharyngeal suction tips in adult size	
One (1) hand-operated bag-mask ventilation unit equipped with clear facemasks and oxygen reservoirs with oxygen tubing in each of the following sizes:	
Adult	
Child	
Infant	
Neonatal mask only	
Two (2) oropharyngeal airways in each of the following sizes:	
Adult	
Child	
Infant	
One (1) pocket mask with a one (1) way valve	
Blind-Insertion Airway Devices (BIAD) in adult and pediatric sizes	
Portable oxygen equipment of at least 300 liters capacity and D size cylinder with a regulator capable of delivering 25LPM	
Oxygen delivery devices, including:	
Two (2) non-rebreathing oxygen masks in both adult and pediatric sizes	
Two (2) nasal cannula in both adult and pediatric sizes	
Two (2) nasopharyngeal airways with water-soluble lubricant in each of the following sizes:	
Adult	
Child	
Infant	
Wound care supplies, including:	
Two (2) airtight dressings for open chest wounds	
Assorted bandaging supplies for the care of soft tissue injuries	
Sterile water for irrigation	

An AED with a minimum of two (2) complete sets of pads for all non-ALS providers and vehicles	
Patient stabilization equipment, including:	
Two (2) upper and two (2) lower extremity-splinting devices	
Two (2) cervical collars in each of the following sizes or adjustable equivalents:	
Pediatric	
Small	
Medium	
Large	
No-Neck	
Personal protection and body substance isolation equipment, including at least one (1) of each of the following for each EMS provider:	
Gown	
Face mask and shield	
Gloves	
Biohazard bag	
Puncture resistant container for the disposal of sharp objects	
Antimicrobial hand cleaner	
Obstetrical supplies, including:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
One (1) blood pressure sphygmomanometer in each of the following cuff sizes:	
Large adult	
Adult	
Pediatric	
One (1) stethoscope in each of the following sizes:	
Adult	
Pediatric	
A glucometer or blood glucose-measuring device with reagent strips and lancets for obtaining blood glucose sample.	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle	
Various laryngoscope blades in adult, pediatric, and infant sizes	
Extra batteries and bulbs for handles or blades	
A minimum of seven (7) different sizes of endotracheal tubes for oral and nasal placement in adult, pediatric, and infant sizes	
Equipment necessary to perform emergency cricothyrotomy	
An end tidal carbon dioxide detection device	
Stylettes in adult and pediatric sizes	
Magill forceps in adult and pediatric sizes	
One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
A portable monitor defibrillator that:	
Is capable of displaying a visual display of cardiac electrical activity	

Is capable of providing a hard copy of cardiac electrical activity measure	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	
Is capable of providing external cardiac pacing	
Has adult and pediatric external pads, capable of utilization for immediate monitoring of heart activity and delivery of counter shock in both the adult and pediatric patient	
Is capable of being operated from internal rechargeable batteries	
Has synchronized counter shock capability for cardioversion	
Has a patient monitoring cable with electrode pads or equivalent for use with the patient monitoring cable	
Medication Administration	
Sterile, disposable needles, in types and sizes sufficient for personnel to administer medications and perform procedures allowed by the agency's patient treatment protocols	
Disposable syringes in types and sizes sufficient for personnel to administer medications and perform procedures allowed by the agency's patient treatment protocols	
Restriction band appropriate for use with venipuncture procedure	
Disposable, individually packaged antiseptic wipes	
Intravenous fluids as required by the agency's protocol, with macrodrip and microdrip fluid sets, and accessory items including over the needle catheter devices in sizes fourteen (14) to twenty-four (24) gauge	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Miscellaneous items, including:	
Pediatric drug dosage tape or equivalent that provides easy reference for pediatric and infant treatment and drug dosages.	
Controlled drugs shall be stored in a locked storage box in a locked compartment that is immediately accessible to personnel.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class VI BLS Equipment List	
Agency Operations	
Maintain one (1) complete set of equipment	
Each basic life support non-transport vehicle shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Must have the capability to communicate on all VHF Kentucky State Mutual Aid Frequencies in accordance with the Commonwealth of Kentucky Field Operations Guide (KY-FOG)	
Shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall properly store and keep multiuse items clean and sterile if indicated.	
Portable suction apparatus, capable of a minimum vacuum of 300 millimeters mercury, equipped with two (2) each of the following:	
Wide-bore tubing	
Rigid catheters	
Soft pharyngeal suction tips in child size	
Soft pharyngeal suction tips in adult size	
One (1) hand-operated bag-mask ventilation unit equipped with clear facemasks and oxygen reservoirs with oxygen tubing in each of the following sizes:	
Adult	
Child	
Infant	
Neonatal mask only	
Two (2) oropharyngeal airways in each of the following sizes:	
Adult	
Child	
Infant	
One (1) pocket mask with a one (1) way valve	
Blind-Insertion Airway Devices (BIAD) in adult and pediatric sizes	
Portable oxygen equipment of at least 300 liters capacity and D size cylinder with a regulator capable of delivering 25LPM	
Oxygen delivery devices, including:	
Two (2) non-rebreathing oxygen masks in both adult and pediatric sizes	
Two (2) nasal cannula in both adult and pediatric sizes	
Two (2) nasopharyngeal airways with water-soluble lubricant in each of the following sizes:	
Adult	
Child	
Infant	
Wound care supplies, including:	
Two (2) airtight dressings for open chest wounds	
Assorted bandaging supplies for the care of soft tissue injuries	
Sterile water for irrigation	

An AED with a minimum of two (2) complete sets of pads for all non-ALS providers and vehicles	
Patient stabilization equipment, including:	
Two (2) upper and two (2) lower extremity-splinting devices	
Two (2) cervical collars in each of the following sizes or adjustable equivalents:	
Pediatric	
Small	
Medium	
Large	
No-Neck	
Personal protection and body substance isolation equipment, including at least one (1) of each of the following for each EMS provider:	
Gown	
Face mask and shield	
Gloves	
Biohazard bag	
Puncture resistant container for the disposal of sharp objects	
Antimicrobial hand cleaner	
Obstetrical supplies, including:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
One (1) blood pressure sphygmomanometer in each of the following cuff sizes:	
Large adult	
Adult	
Pediatric	
One (1) stethoscope in each of the following sizes:	
Adult	
Pediatric	
A glucometer or blood glucose-measuring device with reagent strips and lancets for obtaining blood glucose sample.	
Miscellaneous items, including:	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class VIII ALS Equipment List

Agency Operations	
Maintain one (1) complete set of equipment	
Each basic life support non-transport vehicle shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall properly store and keep multiuse items clean and sterile if indicated.	
Portable suction apparatus, capable of a minimum vacuum of 300 millimeters mercury, equipped with two (2) each of the following:	
Wide-bore tubing	
Rigid catheters	
Soft pharyngeal suction tips in child size	
Soft pharyngeal suction tips in adult size	
One (1) hand-operated bag-mask ventilation unit equipped with clear facemasks and oxygen reservoirs with oxygen tubing in each of the following sizes:	
Adult	
Child	
Infant	
Neonatal mask only	
Two (2) oropharyngeal airways in each of the following sizes:	
Adult	
Child	
Infant	
One (1) pocket mask with a one (1) way valve	
Blind-Insertion Airway Devices (BIAD) in adult and pediatric sizes	
Portable oxygen equipment of at least 300 liters capacity and D size cylinder with a regulator capable of delivering 25LPM	
Oxygen delivery devices, including:	
Two (2) non-rebreathing oxygen masks in both adult and pediatric sizes	
Two (2) nasal cannula in both adult and pediatric sizes	
Two (2) nasopharyngeal airways with water-soluble lubricant in each of the following sizes:	
Adult	
Child	
Infant	
Wound care supplies, including:	
Two (2) airtight dressings for open chest wounds	
Assorted bandaging supplies for the care of soft tissue injuries	
Sterile water for irrigation	
An AED with a minimum of two (2) complete sets of pads for all non-ALS providers and vehicles	
Patient stabilization equipment, including:	

Two (2) upper and two (2) lower extremity-splinting devices	
Two (2) cervical collars in each of the following sizes or adjustable equivalents:	
Pediatric	
Small	
Medium	
Large	
No-Neck	
Personal protection and body substance isolation equipment, including at least one (1) of each of the following for each EMS provider:	
Gown	
Face mask and shield	
Gloves	
Biohazard bag	
Puncture resistant container for the disposal of sharp objects	
Antimicrobial hand cleaner	
Obstetrical supplies, including:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
One (1) blood pressure sphygmomanometer in each of the following cuff sizes:	
Large adult	
Adult	
Pediatric	
One (1) stethoscope in each of the following sizes:	
Adult	
Pediatric	
A glucometer or blood glucose-measuring device with reagent strips and lancets for obtaining blood glucose sample.	
Endotracheal intubation equipment consisting of:	
Laryngoscope handle	
Various laryngoscope blades in adult, pediatric, and infant sizes	
Extra batteries and bulbs for handles or blades	
A minimum of seven (7) different sizes of endotracheal tubes for oral and nasal placement in adult, pediatric, and infant sizes	
Equipment necessary to perform emergency cricothyrotomy	
An end tidal carbon dioxide detection device	
Stylettes in adult and pediatric sizes	
Magill forceps in adult and pediatric sizes	
One-half (1/2) inch wide twill tape or equivalent for securing endotracheal tubes	
Water-soluble lubricant for lubrication of endotracheal and nasotracheal tubes	
A portable monitor defibrillator that:	
Is capable of displaying a visual display of cardiac electrical activity	
Is capable of providing a hard copy of cardiac electrical activity measure	
Is capable of delivering direct current energy over a variable range, which is suitable for pediatric and adult usage	

Is capable of providing external cardiac pacing	
Has adult and pediatric external pads, capable of utilization for immediate monitoring of heart activity and delivery of counter shock in both the adult and pediatric patient	
Is capable of being operated from internal rechargeable batteries	
Has synchronized counter shock capability for cardioversion	
Has a patient monitoring cable with electrode pads or equivalent for use with the patient monitoring cable	
Sterile, disposable needles, in types and sizes sufficient for personnel to administer medications and perform procedures allowed by the agency's patient treatment protocols	
Disposable syringes in types and sizes sufficient for personnel to administer medications and perform procedures allowed by the agency's patient treatment protocols	
Restriction band appropriate for use with venipuncture procedure	
Disposable, individually packaged antiseptic wipes	
Intravenous fluids as required by the agency's protocol, with macrodrip and microdrip fluid sets, and accessory items including over the needle catheter devices in sizes fourteen (14) to twenty-four (24) gauge	
Intraosseous needles or intraosseous devices appropriate for children and adults	
Miscellaneous items, including:	
Pediatric drug dosage tape or equivalent that provides easy reference for pediatric and infant treatment and drug dosages.	
Controlled drugs shall be stored in a locked storage box in a locked compartment that is immediately accessible to personnel.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

Class VIII BLS Equipment List	
Agency Operations	
Maintain one (1) complete set of equipment	
Each basic life support non-transport vehicle shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall wrap, properly store, and handle all single-service implements to be inserted into the patient's nose or mouth.	
Shall properly store and keep multiuse items clean and sterile if indicated.	
Portable suction apparatus, capable of a minimum vacuum of 300 millimeters mercury, equipped with two (2) each of the following:	
Wide-bore tubing	
Rigid catheters	
Soft pharyngeal suction tips in child size	
Soft pharyngeal suction tips in adult size	
One (1) hand-operated bag-mask ventilation unit equipped with clear facemasks and oxygen reservoirs with oxygen tubing in each of the following sizes:	
Adult	
Child	
Infant	
Neonatal mask only	
Two (2) oropharyngeal airways in each of the following sizes:	
Adult	
Child	
Infant	
One (1) pocket mask with a one (1) way valve	
Blind-Insertion Airway Devices (BIAD) in adult and pediatric sizes	
Portable oxygen equipment of at least 300 liters capacity and D size cylinder with a regulator capable of delivering 25LPM	
Oxygen delivery devices, including:	
Two (2) non-rebreathing oxygen masks in both adult and pediatric sizes	
Two (2) nasal cannula in both adult and pediatric sizes	
Two (2) nasopharyngeal airways with water-soluble lubricant in each of the following sizes:	
Adult	
Child	
Infant	
Wound care supplies, including:	
Two (2) airtight dressings for open chest wounds	
Assorted bandaging supplies for the care of soft tissue injuries	
Sterile water for irrigation	
An AED with a minimum of two (2) complete sets of pads for all non-ALS providers and vehicles	
Patient stabilization equipment, including:	

Two (2) upper and two (2) lower extremity-splinting devices	
Two (2) cervical collars in each of the following sizes or adjustable equivalents:	
Pediatric	
Small	
Medium	
Large	
No-Neck	
Personal protection and body substance isolation equipment, including at least one (1) of each of the following for each EMS provider:	
Gown	
Face mask and shield	
Gloves	
Biohazard bag	
Puncture resistant container for the disposal of sharp objects	
Antimicrobial hand cleaner	
Obstetrical supplies, including:	
Sterile scalpels or scissors	
Sterile gloves	
Bulb suction	
Two (2) umbilical clamps	
One (1) blood pressure sphygmomanometer in each of the following cuff sizes:	
Large adult	
Adult	
Pediatric	
One (1) stethoscope in each of the following sizes:	
Adult	
Pediatric	
Miscellaneous items, including:	
A glucometer or blood glucose-measuring device with reagent strips and lancets for obtaining blood glucose sample.	
Eye protection goggles or safety glasses	
Heavy work gloves	
Hard hats that meet ANSI standards, as stated in 29 C.F.R. 1910.135	
Reflective safety wear for each crew member that meet current ANSI standard ANSI 107-2010 or ANSI 207-2011	
Three (3) reflective triangles or strobes, or equivalent warning devices.	

POST-INSPECTION

Inspection Report

Upon the KBEMS inspector submitting the vehicle or agency checklist (dependent upon internet connectivity) the agency director, as identified in the agency KEMSIS account, will receive an email copy of the vehicle and agency checklists submitted.

Violations

Violations are any items that do not fully satisfy KBEMS minimum requirements as described in the KBEMS Ground Ambulance Regulations. Additionally, medications and supplies WILL NOT be considered acceptable if the manufacturer's expiration date has been surpassed, as consistent with United States Food and Drug Administration (FDA) standards, and other applicable guidelines.

Vehicle Violations will fall into one of the following categories:

Onsite Correctable – A violation for which the agency may be allowed to correct the violation within the time frame of the remainder of the inspection. When a violation is corrected during the inspection, the Inspector/Liaison will update the Inspection Sheet accordingly; otherwise the violation will remain in effect, and will move to the "Critical Violation" category.

NOTE: Three "Onsite Correctable" violations will result in a FAILED vehicle inspection. A failed inspection will result in a re-inspection and assessment of the re-inspection fee as noted in 202 KAR 7:030.

Critical Violations: regulatory violation which will require a re-inspection of the agency or vehicle, and for which the vehicle is immediately removed from service until the violation is corrected and verified by a re-inspection.

Any Onsite Correctable violation that is unable to be corrected during the inspection will result in a critical fail and will also result in a re-inspection and the assessment of the appropriate re-inspection fee.

At no time shall it be acceptable to move equipment or supplies from one vehicle to another during the inspection process unless a surplus of equipment exists on the vehicle from which the equipment is transferred, and the Inspector/Liaison approves the transfer. Concession will be made for operational practices of agencies that transfer Advanced Life Support (ALS) equipment based on the ambulance staffing level.

If one or more critical violations are found during the inspection, the Director of Field Operations will issue the agency director a statement of violations clearly indicating:

- The regulation which governs the violation.
- The item(s) which were in violation of that regulation.

Re-inspection

Should an agency or vehicle be found to have three (3) or more separate violations classified as Onsite Correctable (OC) (as defined herein), or one (1) or more Critical Violations, a complete re-inspection of the vehicle(s) with violations will be required. The re-inspection fee will be assessed for all re-inspections and must be remitted prior to the re-inspection. Failure to pay the re-inspection fee prior to the re-inspection date may result in further disciplinary action per KRS Chapter 311A.

Non-response to Statement of Violations

Should a vehicle or agency be found to have FAILED an inspection, the agency director will receive a statement of violation(s). This notice will indicate the date by which all violations must be corrected.

When a statement of violation has been issued to a Kentucky EMS Agency and KBEMS has not received a plan of correction by the date noted in the statement of violations, the EMS agency may be subject to further discipline per KRS Chapter 311A.

Notification Process

Each KBEMS-licensed agency is responsible for complying with all statutes, regulations, and other applicable standards, regardless of notification from KBEMS; this shall include compliance with the provisions described in a statement of violation.

Notifications to KBEMS, regarding licensure changes, correction of violations, etc., must be in writing via U.S. mail, e-mail or the appropriate KEMSIS application.