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South Dakota Office of Rural Health Emergency Medical Services

March 2016

In This Issue

- ◆ Legislative Report **02**
- ◆ Drivers Group
- ◆ DOH Strategic Plan **03**
- ◆ Monthly Training
- ◆ Trauma System
- ◆ Online Amb. Licensing **04**
- ◆ Recruitment Incentive—PM
- ◆ Workforce Assistance **05**
- ◆ EMS Stakeholders **06**
- ◆ 2016 EMS Day on the Hill
- ◆ Job Opening—EMS **07**
- ◆ Leadership Group
- ◆ RHHub –EMS Resources
- ◆ BLS NCCP Recert. **08**
- ◆ Opioid OD—SD Rule **09**
- ◆ Cont. Ed. at Programs
- ◆ Online Recert. **10**
- ◆ Newsletter Info.
- ◆ Star of Life Origin **11**
- ◆ EMS Data Submission
- ◆ ALS Licensure Process **12**
- ◆ ZIKA Virus
- ◆ EMS Week 2016 **13**
- ◆ College Credit for EMTs
- ◆ Contact Info. **14**

Director’s Welcome

By Marty Link—EMS Director

I wanted to take this opportunity to say thank you for all you do! Emergency Medical Services in South Dakota is reliant on the dedication, commitment, and willingness of people like you who unselfishly serve others. You are truly a special group and your actions do not go unnoticed.

In the words of Socrates, “The secret of change is to focus all of your energy not on fighting the old, but on building the new.” Since the transition of the EMS Program from the Department of Public Safety back to the Department of Health in April of 2015, there has been a focus to deeply scrutinize the inner workings of Emergency Medical Services in South Dakota. This healthy scrutiny allows us to look forward with an open mind and envision EMS as a highly functional, sustainable, and integral system of care.

As part of the healthcare system, it is vital EMS providers hold ourselves in high esteem. Promoting a high-level of professionalism in everything we do is essential; from emergency response to partaking in community events, our industry is extremely visible. Many of you are role models to the youth in your community, many pillars in those same communities, all of you dedicated to serving others, one of the highest and most notable attributes of all.

As EMS evolves and in the spirit of the Socrates quote, it is essential communication channels are in place, channels that are free-flowing, and allow for everyone to have a voice, a voice that is heard and understood. There are so many positive changes occurring in the EMS industry, especially here in South Dakota. We want to hear your feedback; please feel free to email any of the ORH/EMS staff!

Thank you again for all you do! We look forward to working as a team building a better Emergency Medical System in South Dakota.

Marty Link
EMS Director





Legislative Report

By Marty Link—EMS Director

One of the recommendations from the Stakeholder’s Group, Workforce—Recommendation A, was to change the minimum staffing for ambulance services and eliminate the hardship statute. As a direct result of this recommendation, SB27 was introduced as legislation to revise certain personnel requirements for ambulance services and to repeal the hardship exemption.

SB27 ultimately realigns minimal standards for crew makeup from two EMTs to one EMT and a driver; a driver who demonstrates specified competencies; competencies that are focused and non-burdensome. This bill was heard without any opposition and was signed by the Governor on February 25, 2016.



SB22, an Act to add emergency medical responders to the list of mandatory reporters was introduced at the request of Jolene’s Law Task Force. SB22 will add emergency medical technicians and paramedics to the list of mandatory reporters.

Pictured Left to Right

- Senator Corey Brown
- Secretary Kim Malsam-Rysdon
- Eric Van Dusen, President SD EMS Association
- Maynard Konechne, Director, Kimball Ambulance Service
- Governor Dennis Daugaard
- Shawn Fischer, Director, Sturgis Ambulance Service
- Halley Lee, Administrator, Office of Rural Health
- Tom Martinec, Deputy Secretary, DOH
- Marty Link, Assistant Administrator, ORH

Drivers Group

By Marty Link—EMS Director

Based on the EMS Stakeholders’ Group recommendations, a Drivers’ Group was formed to further develop attributes the “Driver” component must have, as outlined in SB 27. Group members include Halley Lee, Marty Link, Brian Hambek, Nicole Neugebauer, Maynard Konechne, Rob Parker, Nick Brandner, Cheryl Clark, Bob Hardwick, Lance Iversen, and Al Johnson.

Both the Stakeholders’ Group and the Drivers’ Group agreed the “driver” must have training in CPR, EVOC, HIPAA awareness, infection control, patient movement, and general equipment and communications system knowledge. Such training can be obtained through face-to-face, online, or a hybrid training model. Service directors will be asked to maintain records of successful completion of the driver components. Existing drivers will be grandfathered.

The Drivers’ Group will bring forth recommendations to the DOH and the Stakeholders’ Group for action. Please refer to our website at EMS.sd.gov for the latest developments.

DOH Strategic Plan

By Marty Link—EMS Director

Over the summer of 2015, the Department of Health refocused its Strategic Plan. Under the direction and leadership of Secretary of Health, Kim Malsam-Rysdon, and approximately 40 department leaders, a new 2015-2020 Strategic Plan was created. The plan is broken into five goals, each goal having specific performance indicators. The plan in its entirety can be found at <http://doh.sd.gov/strategicplan/>.

The Vision, Mission, and Guiding Principles encapsulate the department's focus.

Our **Vision:** Healthy People, Healthy Communities, and Healthy South Dakota.

Our **Mission:** To promote, protect and improve the health of every South Dakotan.

Our **Guiding Principles:** Serve with integrity and respect; Eliminate health disparities; Demonstrate leadership and accountability; Focus on prevention and outcomes; Leverage partnerships; and Promote innovation.

Monthly Training

By Marty Link—EMS Director

Over the past several years many EMS providers across South Dakota have enjoyed monthly training provided by National Highway Safety Traffic Administration (NHSTA) funding. NHSTA recently requested the EMS Program decrease dependence on said dollars. As a result, the current plan allows for a funding commitment through September of 2016 which means monthly training will be provided unchanged to this point. Significant funding decreases exist after September which is allowing us to review alternative methods for delivery of education to EMS providers. We are currently pursuing alternative options for educational delivery with the decreased dollar amount. As always, please visit our website for the latest information at EMS.sd.gov.

Trauma System

By Marty Link—EMS Director

In the world of Trauma, a pulse > 120, a SBP < 90; a GCS < 10, a respiratory rate < 10 or > 29, or an airway obstruction or respiratory compromise requiring the use of an advanced airway are all physiological absolutes for activating the trauma team. This criterion is black and white; there is no grey area. If at any point a patient meets any of the above criteria, trauma activation should be requested.

Trauma activations are in place for a number of reasons. The primary reason is for early notification of the system of care that encompasses not only the local facility, but also flight services and tertiary center awareness. This notification allows providers, laboratory and radiology personnel, and support staff to respond to the ER and ready the necessary equipment to properly care for the injured patient. Trauma is a surgical disease; the quicker a patient receives surgical care, the better chance of survival.



Online Ambulance Service Licensing

By Marty Link—EMS Director

The EMS Program has been working with our licensing software vendor to create an online ambulance licensing platform. Our goal is to launch this platform for the 2016 licensing year where service directors can update service demographics, ambulance assets, and personnel in real time, online. This will minimize redundant data entry year after year. Beta testing has been completed. Improvements found during Beta testing are being implemented and should be complete by the time this newsletter is published. As with other articles, please refer to our website at EMS.sd.gov for the latest developments.

Recruitment Incentive for Paramedics

By Halley Lee—Administrator, Office of Rural Health

Ambulance services may now submit applications for paramedics under the Rural Healthcare Facility Recruitment Assistance Program (RHFRAP). This state program provides a \$10,000 payment to eligible health professionals after three years of full-time practice in an eligible healthcare facility. The \$10,000 payment to the selected health professional will be divided among the employing facility and the state. The amount the facility pays will depend on the population of its community. Eligible SD facilities must be located in a community with a population of 10,000 or less.

Applications for the program are available from the SD Office of Rural Health beginning in May for each program year. Applications must be submitted by the employing facility, with a limit of three participants per facility. Slots are limited and the program operates on a first come, first serve basis. Applying health professionals must be employed less than nine months at the time the application is received.

Eligible occupations

Dietitian or Nutritionist
Nurse (LPN or RN)
Occupational therapist
Respiratory therapist
Laboratory technologist
Pharmacist
Physical therapist
Paramedic
Medical technologist
Radiologic technologist
Speech therapists
Healthcare social worker

Eligible facilities

South Dakota licensed:
Hospitals
Nursing homes
Federally certified home health agencies
Chemical dependency treatment facilities
Intermediate care facilities for individuals with intellectual disabilities
Community support providers
Community mental health centers
ESRD facilities
Community health centers (FQHCs)
Ambulance services

For more information, contact Jacob Parsons at the South Dakota Office of Rural Health, 600 E. Capitol, Pierre, SD, 57501; phone 1-800-738-2301 or 605-773-2679; email jacob.parsons@state.sd.us. For more details on the RHFRAP program, visit <http://doh.sd.gov/providers/ruralhealth/recruitment/facility.aspx>.

Workforce Assistance for Ambulance Services

By Halley Lee—Administrator, Office of Rural Health

There is no question the decline in EMS workforce over the past years has caused significant concern ensuring access to qualified competent pre-hospital care. This topic was at the core of recent EMS Stakeholders' group discussions. Considerable time was spent on how to assist services in building and sustaining their staffs. For more information on these discussions, visit EMS.sd.gov and scroll down to the "EMS Stakeholders Group" bullet.

As agency directors struggle to staff their services, they may want to consider reaching out to other medical personnel in their communities to assist. Current Administrative Rule allows physicians, RNs, LPNs, nurse practitioners or physician assistants currently licensed in South Dakota to serve on an ambulance crew.

44:05:03:06.02. Two-person ground ambulance response. *On all ground ambulance responses with a two-person crew, both the driver and attendant must be emergency medical technicians currently certified by the department. A physician, registered nurse, practical nurse, nurse practitioner, or physician assistant currently licensed in South Dakota may replace the attendant on any type of response.*

Source: 12 SDR 58, effective October 14, 1985; 20 SDR 204, effective June 9, 1994; 30 SDR 125, effective February 22, 2004; 41 SDR 218, effective July 1, 2015.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-6.

44:05:03:06.03. Three-person ground ambulance response. *On all ground ambulance responses with a three-person crew using two emergency medical technicians certified by the department as attendants, the driver may be a person who has completed the department's EVOC or an equivalent. A physician, registered nurse, practical nurse, nurse practitioner, or physician assistant currently licensed in South Dakota may replace any attendant on any type of response.*

Source: 12 SDR 58, effective October 14, 1985; 16 SDR 147, effective March 18, 1990; 20 SDR 204, effective June 9, 1994; 30 SDR 125, effective February 22, 2004; 41 SDR 218, effective July 1, 2015.

General Authority: SDCL 34-11-5.

Law Implemented: SDCL 34-11-5.

Service directors may wish to work with their medical directors to develop written guidelines highlighting the scope of practice such professionals are allowed to perform. It is also advisable to discuss liability, workers compensation, and any additional training such professionals may consider prior to working for an EMS agency. Written guidelines may serve as off-line medical control in the event a physician is not readily available.

Building a sustainable EMS workforce in South Dakota will require the continued dedication from EMS personnel, but also the addition of other capable allied healthcare professionals such as those noted above. In visiting with services who are currently utilizing alternative staffing methods, they are extremely grateful for this opportunity, especially for a BLS service with regards to transfers. As you look toward the future, you may wish to consider your local healthcare workforce to assist in staffing your service.

Any questions on this issue may be directed to Halley Lee at 605.773.3361 or via email at halley.lee@state.sd.us.



EMS Stakeholders' Group Update

By Halley Lee—Administrator, Office of Rural Health

As many of you know, one of the first steps the Department of Health took after EMS moved from DPS back 'home' to DOH was to form a Stakeholders' Group to assist the department in exploring the EMS industry in South Dakota. This group consisted of approximately 40 individuals representing the industry, hospitals, associations, local government, state legislature and state government. The group met four times over the summer of 2015 with the following goal: "To provide recommendations to the Department of Health on EMS sustainability and ensuring access to quality EMS in South Dakota, particularly in rural South Dakota, by identifying key issues and suggesting strategies." The group's final recommendations were categorized into four main topic areas: workforce, quality, sustainability and infrastructure.

To read more about this effort, visit EMS.sd.gov and scroll down to the "EMS Stakeholders Group" bullet. A working document outlining progress towards fulfilling these recommendations has been created and will be regularly updated.

The Stakeholders' Group will continue to be involved moving forward. The group will be monitoring progress as well as providing input and guidance on action steps and solutions.

For more information, please feel free to contact Marty Link at 605.367.5372 or marty.link@state.sd.us or Halley Lee at 605.773.3361 or halley.lee@state.sd.us.

2016 EMS Day on the Hill

By Brian Hambeck-Spearfish, & Maynard Koechne-Kimball

On Monday, January 25th, 2016, several EMS professionals from all around the state attended the 2016 EMS Day on the Hill in Pierre.

That evening, the SDEMSEA and AHA hosted a Legislative Social at the Ramkota Inn with the following in attendance: 69 Legislators, 8 family members, 14 EMT's, 2 from the American Heart Association, 3 from the Department of Health and Office of Rural Health, 11 Interns, 9 Pages, 6 Lobbyists, 2 staff (1 from PUC and 1 from the Secretary of State, and the Lieutenant Governor and his wife.



Pictured: **Back Row:** Scott Larsen-Highmore, Tyler McEhleny-Watertown, Chuck Hansen-Selby, Kevin Heath-Onida, Brian Hambeck-Spearfish **2nd Row:** Mike Steffen-Spearfish, Pat Harrington-Armour **3rd Row:** Pam Miller-AHA-Brookings, Nicole Neugbauer-Armour, Tammy Van Dam-Murdo, Sandy Hansen-Selby, Maynard Koechne-Kimball **Front Row:** Lydia Ymker-Armour, Megan Meyer-AHA-Sioux Falls, Governor Dennis Daugaard, Shawn Fischer-Sturgis, Julie Schmidt-Sturgis



Job Opening—Trauma/EMS Specialist

By Halley Lee—Administrator, Office of Rural Health

Trauma/EMS Specialist

Department of Health

Job ID #6066

Pierre or Sioux Falls, SD

The South Dakota Department of Health, Division of Health Systems Development & Regulation, Office of Rural Health (ORH) is seeking an individual that is a self-starter, a forward-thinker, and has excellent communication and organizational skills. If you are a team-orientated individual who is interested in impacting out-of-hospital care in South Dakota by managing the South Dakota Trauma System and providing technical assistance to the EMS industry, this may be the job for you. Ideal candidate will have a Bachelor's degree or higher in a related field preferred with experience in EMS, nursing or other healthcare experience. This position will require the ability to work independently as well as with a variety of teams; the skill to communicate effectively and efficiently; strong problem solving skills and the ability to make decisions. Salary is \$18.64hr/DOE. This position is Open Until Filled. For more information or to apply, please go <http://bhr.sd.gov/workforus> or contact any South Dakota Department of Labor & Regulation Local Office.

Equal Opportunity Employer

Leadership Group

By Marty Link—EMS Director

A Leadership Group was formed to address Recommendations 2A, 3A, and 4A of the Stakeholders' final report. This group is focusing efforts on supporting the development and education of local EMS leaders across South Dakota through leadership and management education and training, developing the capacity to provide communities with assistance in transitioning from unsustainable to sustainable EMS models, and seeking regular input from EMS Stakeholders to help lead the South Dakota EMS System.

Group members included Halley Lee, Marty Link, Brian Hambek, Maynard Konechne, Gordon Dekkenga, Tammy Van Dam, Nicole Neugebauer, Tom Hericks, Bob Hardwick, Lance Iversen, and Al Johnson.

The Leadership Group will bring forth recommendations to the DOH and the Stakeholders' Group for action. Please refer to our website at EMS.sd.gov for the latest developments.

Great Resource—Rural Health Information Hub

By Marty Link—EMS Director

Rural Health Information Hub (formerly the Rural Assistance Center) is a great resource for information on funding resources, organization information, events, etc. Please visit <https://www.ruralhealthinfo.org/topics/emergency-medical-services/websites-tools> for more information.



BLS NCCP Recertification Implementation

By Lance Iversen—EMS

In 2012, the NREMT introduced a new recertification model, the National Continued Competency Program (NCCP). While reduced hours are just one of the many benefits with the new model, the change allows a platform for evidence-based medicine to reach EMS professionals all over the country. Additionally, it gives state and local agencies the control to dictate a portion of the recertification requirements and provide a foundation for the EMS professional to embrace life-long learning.

The new model streamlines the recertification process into three categories of continuing education: National, Local (State), and Individual. The National requirement (NCCR) or the 'new' refresher makes up 50% of the new recertification model. Topics will be updated every four years and will reflect current trends and changes in EMS. The Local requirement (LCCR) (State) accounts for 25% of your recertification. These hours will be decided by the State EMS Program. Finally, the Individual requirement (ICCR) will complete the remaining 25% of your recertification. Much like the "additional continuing education" section for the traditional model, an individual is free to take any EMS related education.

Another benefit of using this model (both State and National Registry/State) is an increase in the amount of distributive education that can be used towards your recertification. Distributive education is defined as an approved CEC-BEMS F3 course. You can now take just over half of your hours as distributive education. This breaks down to allow for 1/3 of your national component, 2/3 of your local (State) component, and your entire individual component to be distributive education.

The new model of recertification requirements, which are similar to what they are now, will start April 1st, 2017 in South Dakota; meaning, an EMT will have from April 1st, 2017 to March 31st of 2019 to fulfill the new requirements. For those recertifying in March 2018, your cycle will begin April 1st, 2018 for the recertification cycle period of 2018-2020.

Once we finalize the BLS State component, we will post the new standards/topics on our website, EMS.sd.gov.

EMT – South Dakota Only Recertification Components/Hours + CPR Healthcare Provider				
	State	Total Hours		
EMT (SD Only)	24 (up to 24 DE)	24 (all may be DE)		

EMT – National Registry and State Recertification Components/Hours + CPR Healthcare Provider				
	NCCR (National)	LCCR (State)	ICCR (Individual)	Total Hours
EMT	20 (up to 7DE)	10 (up to 7 DE)	10 (up to 10 DE)	40 (24 DE)

Table 1. Distributive Education (DE) Breakdown by EMT (SD Only), and National Registry/State.

For more information, please visit nremt.org, then click [NCCP Recertification Resources](#).



Opioid Overdose Treatment

By Lance Iversen—EMS

Effective January 7th, 2016, SD Rule 20:78:06 was approved to allow EMTs and First Responders (including law enforcement and firemen/firewomen) to administer an opioid antagonist (auto-injector medication Narcan/ Naloxone) for patients known or suspected of suffering from an opioid overdose.

Training shall include:

- The signs and symptoms of an opioid overdose;
- The protocols and procedures for administration of an opioid antagonist;
- The signs and symptoms of an adverse reaction to an opioid antagonist;
- The protocols and procedures to stabilize the patient if an adverse response occurs;
- Opioid antagonist duration;
- The protocols and procedures for monitoring the suspected opioid overdose victim and administration of opioid antagonist if necessary for the safety and security of suspected overdose victim;
- The procedures for storage, transport, and security of the opioid antagonist; and
- The method of opioid antagonist being taught.

Each first responder training program shall be overseen by a physician licensed pursuant to SDCL chapter 36-4. The employer of a first responder may provide the training for a first responder if the training meets each requirement listed above.

A first responder trained to possess and administer opioid antagonist must complete a first responder training program at least every three years.

For more information, please visit <http://legis.sd.gov/Rules> and look up 20:78:06 (Opioid Overdose Prevention).



Example of Naloxone Auto-Injector

Continuing Education at the Program Level

By Lance Iversen—EMS

If your ambulance service would like to hold continuing education courses throughout the year, or if you are an instructor and plan to have continuing education classes for ambulance services and EMS professionals, we can provide state approved CEU's for recertification.

Service Directors, Training Officers, and/or Instructors, please go to our website, EMS.sd.gov, click on the link "Training, Applications, & Exam Schedule", then "Forms and Applications", then "CE Application for Training Approval". For BLS education, fill out the form and mail, fax, or email to the State EMS Program. For ALS, please email your class information to the SD Board of Medical & Osteopathic Examiners at SDBMOE@state.sd.us.

Please visit our website, EMS.sd.gov for the most up-to-date information, forms, etc.



Online EMT Recertification & Updates to your Profile

By Bob Hardwick—EMS

Effective January 2nd, 2015, we began offering EMT's in South Dakota the ability to recertify online.

To access your account, click on the "Online EMT Recertification" link on our homepage at EMS.sd.gov. It will ask you for your EMT Certification Number, Date of Birth, and Social Security Number. From there, you will be able to update your personal information such as address, phone number(s), email address, driver's license # and expiration date, etc.

Down towards the bottom of the page is where you would put in your continuing education information/hours. Once you fill in all the boxes with your class information, date, etc., click the "Add Course" button to begin adding the next course you took. **IMPORTANT** – Anytime you make a change to your account or add a course, be sure to click on the box "Click Here to Confirm the Above and/or Save Changes". Once you have 24 or more hours, when you click "Click Here to Confirm the Above and/or Save Changes", new boxes will open at the bottom of the page where you will answer a few more questions, then click on the check box(s) attesting to the information you are providing is true, criminal history, etc., put in your Initials and then click "Click Here to Renew".

Once you submit your hours for recertification, you will not be able to log back into your account until after April 1st. You should receive your new EMT SD Certification Card in the mail within 2 weeks from the time you submit your hours.

Throughout the 2 year certification period, you can log into your account and update your personal information such as new address if you move, phone number, etc. You can also put in the courses you attended throughout the year and it will show you the total hours you have vs. waiting until you are due to renew and finding all your paperwork to put into your account.

Some of the most common reasons why people are unable to log into their accounts are: We have no date of birth on file for you, or wrong date of birth; no Social Security #, or wrong Social Security Number. If you try to log into your account and receive an error message, please call the EMS Program at 605-773-4031 so we can pull your account to verify correct information.

Newsletter Information

By Lance Iversen—EMS

At the end of last year, the Office of Rural Health/EMS created the first SD EMS Newsletter, PULSESD, for another channel of communications to you, the BLS and ALS providers and interested parties in South Dakota EMS.

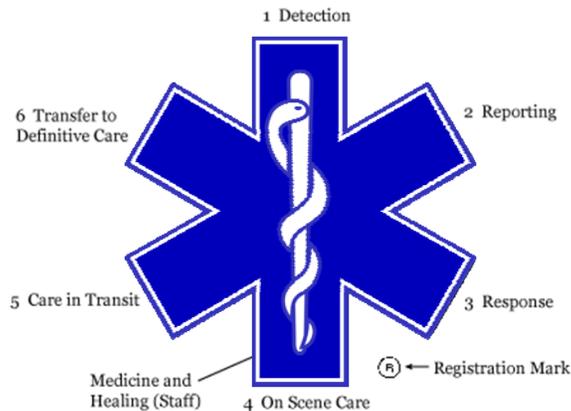
With the success of the first newsletter, we will continue to send out the newsletter each quarter and also have it on our website, EMS.sd.us. With that being said, we are working on creating a database of provider's email addresses. If you receive an email with the link to the newsletter and you do not want to receive it, please go to our website and click the "Subscribe to the PULSESD listserv..." link at the top of our homepage and then unsubscribe. Same if you would like to be added to the newsletter subscription.

If you or your service have an article you would like us to consider for upcoming newsletters, please send to lance.iversen@state.sd.us. We would love to hear from you, share your events/stories and pictures.



Star of Life Origin and Meaning

The blue "Star of Life" symbol was designed for NHTSA in response to the need for a uniform symbol representing the emergency medical services system. The six barred cross was adapted from the personal Medical Identification Symbol of the American Medical Association. For EMS, the six bars represent the six systems functions as indicated below.



EMS Data Submission

By Lance Iversen—EMS

Ambulance Service Directors/Managers – If your service is not using EMStat5 as your ePCR program, please remember to upload your service's ePCR's on a monthly basis (or more frequent basis) to MedMedia WebCur. For those who are using EMStat5, once your crew completes and submits their chart, it will automatically upload to WebCur.

Over the next quarter, I will be distributing some general reports to ambulance services with information relating to your monthly submissions, complete/non complete reports, etc.

The Office of Rural Health/EMS provides MedMedia EMStat5 free of charge to all licensed ambulance services in South Dakota to use. If a service chooses to go with another company, they are required to upload their ePCR data to WebCur on a monthly basis.

If you are having difficulties uploading your service's data, users having problems with their accounts, etc., please contact Intermedix Technical Support at 888-735-9559.

Please have your crews complete their patient reports in a timely manner. A good rule of thumb is, you're not done with your call until your paperwork is done.



Licensure Process for SD Advanced Life Support Personnel

By Margaret B. Hansen, PA-C, MPAS—Executive Director
SD Board of Medical and Osteopathic Examiners

The Board of Medical and Osteopathic Examiners (Board) is the licensing and regulatory agency for Advanced Life Support Personnel (ALS) professionals in South Dakota. All ALS professionals at any level are required to be licensed by the Board in order to work in South Dakota. The application process is conducted in accordance with South Dakota codified law and administration rule. Application is a web based online process. ALS students are also required to be approved for student status by the Board using the same application procedures.

The first step to apply for a South Dakota license or an ALS student status is to obtain an online account from the Board. The applicant may designate an authorized agent to assist them at any point in the process. Both the online account request form and the authorized agent forms can be found on the Board website. It is helpful for applicants and ALS program directors to review the Board's General Guidelines for Criminal History prior to making application.

The Board is required to perform due diligence and investigate all applications by obtaining "primary" (meaning directly from the source) verifications. After an application is submitted a checklist of applicant responsibilities is created. The current status of a license application can be viewed online by the applicant and the authorized agent at any time, night or day. The start date of the application is visible as well as any incoming items. By South Dakota administrative rule, all applications must be completed within 120 days and that date is also noted on the online status preview page.

ZIKA Virus

By Lance Iversen—EMS

The *Aedes aegypti* mosquito that transmits the Zika virus is found throughout the tropics and subtropics – it has never been found as far north as South Dakota. **To date South Dakota has reported no cases of Zika virus infection.** The Centers for Disease Control and Prevention (CDC) recommends that pregnant women postpone travel to Zika-affected areas. Individuals who do travel to such areas and become ill within 10 days should see their physician.

Health care providers should contact the South Dakota Department of Health at 605-773-3737 for consultation on Zika testing. If after consultation, the individual meets the case definition, the provider should contact the State Public Health Laboratory at 605-773-3368 — the laboratory will ship the sample and necessary paperwork to CDC for testing.

For more information, please visit the DOH website: <http://doh.sd.gov/diseases/Zika.aspx> and/or the CDC.



EMS Week May 15—21, 2016

By Lance Iversen—EMS

In 1973, President Gerald Ford authorized EMS Week to celebrate EMS practitioners and the important work they do in our nation's communities. Back then, EMS was a new profession, and EMS practitioners had only just started to be recognized as a critical component of emergency medicine and the public health safety net.

A lot has changed since then. EMS is now firmly established as an essential public function and a vital component of the medical care continuum. On any given day, EMS practitioners help save lives by responding to medical emergencies, including heart attack, difficulty breathing, a fall or accident, drowning, cardiac arrest, stroke, drug overdose or acute illness. EMS may provide both basic and advanced medical care at the scene of an emergency and en route to a hospital. EMS practitioners care for their patients' medical needs and show caring and compassion to their patients in their most difficult moments.

Whether celebrated with a company cookout or a catered lunch, an open house, an awards ceremony or even quiet reflection about what it means to be an EMS practitioner, EMS Week is the perfect time to recognize EMS and all that its practitioners do for our nation.

College Credit for EMTs!

By Laura Wiemers—USD

If you are a current EMT and are considering or have applied for postsecondary education, there is an opportunity to gain college credit for up to four hours. Please see the detailed instruction below.

Upon completion and passing of the NREMT exam:

1. Students must apply and be accepted to USD or another Board of Regents college/university to be eligible for college credit of HSC 364/364L.
2. Contact Laura Wiemers or the USD Registrar's office for a 'Credit by Verification' form.
3. Provide to Laura.Wiemers@usd.edu copies of current CPR certification, NREMT card, State License (if applicable), and course completion certificate (obtained from the instructor of your EMT course).
4. Fill out the "Credit by Verification" form with the following information:

Part A

1. Name, student ID number
2. Course Prefix – HSC; Course Number – 364/364L; Course Title – Emergency Medical Technician
3. Sign and Date

Part B

1. The instructor of your EMT course will need to mark off #1 or #2 then sign and date. Course information listed in this section will be the same as the information in Part A. Semester hours will be 4 cr.
5. For completion of Part C and Part D, the form should be returned to Laura.Wiemers@usd.edu.

For any questions, please contact Laura Wiemers at Laura.Wiemers@usd.edu or by phone 605-658-6500. Any documentation can be sent via email or fax (605-677-6745).



South Dakota Office of Rural Health
Emergency Medical Services
600 East Capitol Ave.
Pierre, SD 57501



For Questions or More Information, Contact:

South Dakota Office of Rural Health / EMS - please visit EMS.sd.gov or call 605-773-4031

SDBMOE, Please visit www.sdbmoe.gov or call 605-367-7781

SIM-SD, please visit www.sim.sd.gov or contact the South Dakota Office of Rural Health 605-773-3361

