

SD EMS MEDICAL DIRECTOR HARDSHIP EXEMPTION

Effective September 30, 2024, SDCL 34-11-12.01 allows for licensed ambulance services in South Dakota who are unable to find a South Dakota Licensed Physician to be their Medical Director to apply for a Medical Director Hardship Exemption, following the requirements of Administrative Rule 44:05:07:02, with a SD Licensed Physician Assistant (PA) or Certified Nurse Practitioner (CNP) to take the place of a SD Licensed Physician. The Ambulance Service Director, or authorized person for the ambulance service, must complete this form and submit to the SD Office of EMS & Trauma at least thirty days prior to intended start date of the program director.

Name of Ambulance Service: ______

Ambulance Service Director Name (or authorized person):				
Title:	Email:	Phone #:		
Inde	Lindii			

Full Mailing Address: ______

Please describe, with clear and convincing evidence that no physician within a fifty-mile radius of the ambulance service coverage area and credentialed to work at the primary receiving facility for the ambulance service was available and willing to serve as the medical director of the ambulance service for a fee that is less than five percent of the ambulance service's annual budget (attach separate sheet if needed):

(Check box to confirm) Program Director has acknowledged they have a minimum of two years of clinical experience; agreed, in writing, to be responsible for the supervision and healthcare direction of the ambulance service and attested to have read and understood the *Introduction to Rural EMS Healthcare Direction in SD* handbook

Name of Program Di	irector being requested:	
Credentials:	Physician Assistant (PA)	Certified Nurse Practitioner (CNP)
SD License or Certifi	cation Number:	_
Full Mailing Address	:	
Email Address:		_ Phone Number:
 Service Director or a	uthorized signature	Date:
(This can be typed o	r printed and signed)	

Once this form is complete, save and email to: Julie.Smithson@state.sd.us