# **16 DEPARTMENT OF PUBLIC SAFETY**

**163 BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS)**

**CHAPTER 2: DEFINITIONS**

As used in these Rules, unless the context indicates otherwise, the following terms have the following meanings:

1. **ADVANCED EMERGENCY MEDICAL TREATMENT** means those portions of emergency medical treatment:
	1. Defined by the board to be advanced; and
	2. That the board determines may be performed by persons licensed under this chapter within a system of emergency care approved by the board when acting under the supervision of:
		1. An appropriate physician; or
		2. A physician assistant or nurse practitioner, licensed by the State, and authorized by a hospital to supervise and direct the actions of an emergency medical services person.
2. **AMBULANCE** means any vehicle, whether an air, ground or water vehicle, that is designed, constructed, or routinely used or intended to be used for the transportation of ill or injured persons. The licensing of these vehicles is in addition to any registration required by any other authorities. For the purposes of these Rules, vehicles operated by the Maine Army National Guard, Maine Air National Guard or the United States armed forces are not considered ambulances.
3. **AMBULANCE SERVICE** means any person, persons, or organization, which holds itself out to be a provider of transportation for ill or injured persons or which routinely provides transportation for ill or injured persons. For the purposes of these Rules, the Maine Army National Guard, Maine Air National Guard, and the United States armed forces are not considered ambulance services. It does not mean a person, persons, or an organization which transports ill or injured persons for reasons not connected with their illness or injury. It does not mean a nursing home licensed under 22 M.R.S. chapter 405, a children's home licensed under 22 M.R.S. chapter 1669, a boarding home licensed under 22 M.R.S. chapter 1663, or similar residential facility when transporting its own residents or those of another similarly licensed facility when those residents do not require emergency medical treatment. The types of Ambulance Services licensed by Maine EMS are listed below:
	1. **Ground Ambulance Services** are those services licensed by the Board that treat patients and transport them in ambulance vehicles that are licensed by the Board and are designed to be operated on the roads and highways of the State.
	2. **Scene Response Air Ambulance Services** are those services licensed by the Board that transport patients, utilizing aircraft licensed by the Board, from the scene of the patient's illness or injury to the hospital or provide air transfer of patients being transferred from a hospital or health care facility to another place.
	3. **Transfer Air Ambulance Services** are those services licensed by the Board that transport patients utilizing aircraft licensed by the Board and that may only provide air transfer of patients being transferred from a hospital or health care facility to another place.
	4. **Restricted Response Air Ambulance Services (RRAAS)** are those services licensed by the Board and that utilize aircraft licensed by the Board to provide limited air ambulance services in order to meet a need within the State not otherwise fulfilled by a Scene Response Air Ambulance Service or a Transfer Air Ambulance Service.
4. **BASE LOCATION** has the following meanings dependent upon the type of service license held:
	1. For services licensed as Ground Ambulance Services, Scene Response Air Ambulance Services or Restricted Response Air Ambulance Services, Base Location means the physical location within a municipality, designated by the service, and approved by the Board, from which a service responds its ambulances.

Ground Ambulance Services may position ambulances within municipalities abutting the municipality in which the Base Location is situated, for the purpose of enhancing emergency response.

* 1. For Non-Transporting Services or Transfer Air Ambulance Services, Base Location means that the service maintains a single phone listing for public access.
1. **BASIC EMERGENCY MEDICAL TREATMENT** means those portions of emergency medical treatment:
	1. Defined by the board to be basic; and
	2. That the board determines may be performed by persons licensed under 32 M.R.S. Chapter 2-B within a system of emergency care approved by the board when acting under the supervision of:
		1. An appropriate physician; or
		2. A physician assistant or nurse practitioner, licensed by the State, and authorized by a hospital to supervise and direct the actions of an emergency medical services person.
2. **BOARD** means the Emergency Medical Services Board established pursuant to 32 M.R.S. Chapter 2-B, §88.
3. **BOARD APPROVAL**. When no other method of gaining Board approval is specified, the person who seeks the approval shall apply in writing to the chairperson of the Board in care of the office of Maine Emergency Medical Services, stating the action to be considered, the section in the Rules under which approval is sought and the grounds in support of the request.
4. **CERTIFICATE** means a document issued as evidence that a person has completed a course of training or a particular test or recertification.
5. **CPR TRAINING** means completion of a Cardio-Pulmonary Resuscitation (CPR) program. This is interpreted to include semiautomatic defibrillation when that module is successfully completed.
6. **DEPARTMENT** means the Maine Department of Public Safety.
7. **EMERGENCY MEDICAL CALL** means any event which is perceived to threaten the life, limb, or well-being of an individual in such a manner that a need for emergency medical treatment is created.
8. **EMERGENCY MEDICAL DISPATCH PRIORITY REFERENCE SYSTEM** means a system approved by the Emergency Services Communications Bureau and the board that includes:
	1. A protocol for emergency medical dispatcher response to calls.
	2. A continuous quality improvement program that measures compliance with the protocol through ongoing random case review of each emergency medical dispatcher; and
	3. A training curriculum and testing process consistent with the protocol.

1. **EMERGENCY MEDICAL DISPATCH CENTER** means any entity that holds itself out to be a provider of emergency medical dispatch services.
2. **EMERGENCY MEDICAL DISPATCH SERVICES** means any of the following services provided in the context of an emergency call made to the E-9-1-1 system:
	1. Reception, evaluation, or processing of calls.
	2. Provision of dispatch life support.
	3. Management of requests for emergency medical assistance; and
	4. Evaluation or improvement of the emergency medical dispatch process, including identifying the nature of an emergency request, prioritizing the urgency of a request, dispatching necessary resources, providing medical aid and safety instructions to the caller, and coordinating the responding resources as needed.

1. **EMERGENCY MEDICAL DISPATCHER** means a person licensed by the Board who provides emergency medical dispatch services as a member of an emergency medical dispatch center licensed by the Board.
2. **EMERGENCY MEDICAL SERVICES AMBULANCE OPERATOR** means a person associated with a licensed ground ambulance service who operates an ambulance in emergency mode or transports patients and is not licensed under 32 M.R.S. §85.
3. **EMERGENCY MEDICAL SERVICES PERSON** means any person who routinely provides emergency medical treatment to the sick or injured. The following persons are not considered to be routinely providing emergency medical treatment for the purpose of these Rules and may provide emergency medical treatment only as specified below when called upon:
	1. Those persons as specified in 32 M.R.S. §82(2) subject to any restrictions stated in that section.
	2. Any person having CPR or hemorrhage control training, for the purpose of providing those skills within the scope of that training.
	3. Any person who provides automatic external defibrillation in accordance with 22 M.R.S. §2150-C;
	4. Any person who administers Naloxone Hydrochloride in accordance with 22 M.R.S. §2353 and is not licensed in 32 M.R.S. §85
	5. Any student currently enrolled in a course leading to licensure may practice procedures learned in that course when that student:
		1. Has received permission to practice those procedures from the Maine EMS authorized Training Center conducting the course.
		2. Is participating in a scheduled field internship session approved by the course's clinical coordinator.
		3. Is practicing those procedures with a Maine EMS-licensed service that complies with guidelines as developed by Maine EMS to conduct field internship sessions; and,
		4. Is supervised by a preceptor licensed to perform those procedures and who is acting in accordance with any requirements or guidelines as approved and published by Maine EMS.
		5. If such a person is also licensed under these Rules, any emergency medical treatment he/she provides that is within the scope of his/her license will be considered as routine and not subject to such supervision.
4. **EMERGENCY MEDICAL SERVICES VEHICLE** means a vehicle, authorized by Maine EMS pursuant to 29-A M.R.S. §2054, for the purpose of transporting personnel and/or equipment to the scene of a medical emergency that is not otherwise licensed as an ambulance or registered as a fire department vehicle. An emergency medical services vehicle must be exclusively leased or owned and operated by a service licensed by Maine EMS or by an agency designated by Maine EMS.
5. **EMERGENCY MEDICAL TREATMENT** means those skills, techniques and judgments, as defined by the Board, which are directed to maintaining, improving or preventing deterioration of the medical condition of the patient and which are appropriate to be delivered by trained persons at the scene of a patient's illness or injury outside the hospital and during transportation to the hospital.
6. **EMERGENCY RESPONSE MODE** means the operation of the ambulances or emergency medical services vehicle's warning lights and siren in accordance with the Maine Motor Vehicle Statutes, 29-A M.R.S.
7. **EMERGENCY SERVICES COMMUNICATIONS BUREAU** means the Emergency Services Communication Bureau within the Public Utilities Commission.
8. **FAA** means Federal Aviation Administration.
9. **FAR** means Federal Aviation Regulations
10. **FULL TIME DISPATCH** means a communications center that:
	1. Operates twenty-four hours per day.
	2. Records telephone and radio transmissions regarding calls for medical assistance.
	3. Communicates with emergency medical services providers via two-way radio and other methods.
11. **LICENSE** means a full, temporary, provisional, or conditional license issued under these Rules.
12. **LOCATED OUTSIDE THE STATE OF MAINE.** An ambulance service is located outside the State of Maine provided that it is licensed in another state or territory, does not maintain a base of operations in Maine, and does not routinely carry patients between points, both of which are in Maine.
13. **MAINE EMERGENCY MEDICAL SERVICES, or MAINE EMS** means the Board, the emergency medical services director, and staff within the Department of Public Safety responsible for carrying out the responsibilities of 32 M.R.S. §81 et seq. and these Rules.
14. **MEDICAL CONTROL** is physician supervision of pre-hospital emergency medical care. More specifically, it is those actions taken to ensure that care provided on behalf of ill or injured patients is medically appropriate. Medical Control includes:
	1. Online Medical Control:
		1. The contemporaneous physician direction of a field provider utilizing telecommunications, or in-person contact.
		2. This physician direction may be provided by a Physician Assistant or Advanced Practice Registered Nurse delegated by the physician(s) charged with medical oversight, pursuant to 32 M.R.S. §83(17-A).
	2. Medical Direction:
		1. The administrative medical direction of EMS personnel by a physician as designated in these Rules. Medical Direction includes interaction with operational and administrative aspects of EMS (for example, education and training, quality improvement, ambulance staffing, dispatch issues, and hospital destination).
15. **MEDICAL DIRECTION AND PRACTICES BOARD** means the board consisting of each regional medical director, an emergency physician representing the Maine Chapter of the American College of Emergency Medicine Physicians, an at-large member, a toxicologist or licensed pharmacist, a person licensed under 32 M.R.S. §85 to provide basic emergency medical treatment, a person licensed under 32 M.R.S. §85 to provide advanced emergency medical treatment, a pediatric physician, the statewide associate emergency medical services medical director and the statewide emergency medical services medical director. The Medical Direction and Practices Board is responsible for creation, adoption and maintenance of Maine Emergency Medical Services protocols.
16. **NON-EMERGENCY MEDICAL CALL** means a situation in which an immediate response to a scene, hospital, health care facility or other place is not required to prevent life-or limb-threatening medical deterioration of a person.
17. **NON-EMERGENCY RESPONSE MODE** means operation of the ambulance or emergency medical services vehicle in a non-emergency mode obeying all traffic laws.

1. **NON-TRANSPORTING SERVICE** means any organization, person or persons who hold themselves out as providers of emergency medical treatment and who do not routinely provide transportation to ill or injured persons, and who routinely offer or provide services to the general public beyond the boundaries of a single recreational site, business, school or other facility. For the purposes of these Rules, a physician making house calls as a part of ordinary medical practice is not considered to be a non-transporting service. For the purposes of this definition, “routinely” means regularly, as part of the usual way of doing things.
2. **OFFICE OR OFFICE OF EMERGENCY MEDICAL SERVICES** means the administrative unit within the Department of Public Safety to which the Board assigns responsibility for carrying out the purposes of 32 M.R.S. §81, et seq. Responsibility for implementation, enforcement and administration of these Rules is delegated to the Director of the Office.
3. **PATIENT CARE REPORT** means the report generated and filed by Ambulance Services and Non-Transporting Services documenting each request for service or for each patient when more than one patient is involved.
4. **PARAMEDIC INTER-FACILITY TRANSFER (PIFT)** means a transfer of a patient after initial assessment and stabilization from and to a health care facility, or other location designated by medical control or a primary patient care physician, conducted in accordance with the Maine EMS PIFT guidelines.
5. **PARAMEDIC INTER-FACILITY TRANSFER (PIFT) SERVICE** means a Maine EMS licensed Ambulance Service that has been approved as a PIFT Service by Maine EMS after fulfilling the PIFT Service eligibility requirements.
6. **PARAMEDIC INTER-FACILITY TRANSFER (PIFT) PROVIDER** means a Maine EMS Paramedic who has completed the Maine EMS PIFT Training Program.
7. **PROTOCOL OR MAINE EMERGENCY MEDICAL SERVICES PROTOCOL** means the written statement approved by the Medical Direction and Practices Board and filed with the Board, specifying the conditions under which some form of emergency medical care is to be given by emergency medical services persons. These protocols are coordinated and published through Maine EMS as a single, statewide common set of protocols.
8. **PROVIDER** of emergency medical dispatch services means an Emergency Medical Dispatcher or Emergency Medical Dispatch Center licensed by the Board.
9. **PUBLIC SAFETY ANSWERING POINT (PSAP)** has the same meaning as in 25 M.R.S. §2921.
10. **REGIONAL COUNCILS** mean those business entities recognized by the Board that represent the various geographical areas of the state, as designated by the Board, with respect to matters subject to 32 M.R.S., §81 et seq. and these Rules.
11. **REGIONAL MEDICAL DIRECTOR** means the physician designated in each EMS region by the regional council, subject to approval by the Board, to oversee all matters of medical control and to advise the regional council on medical matters. In approving the regional medical director, the Board will be advised by the regional council for the region.
12. **RESPONSE ASSIGNMENT PLAN** means a Maine EMS-approved plan developed by a Maine licensed service and its service medical director that establishes the service’s response in accordance with Maine EMS Emergency Medical Dispatch (EMD) protocol determinant codes.
13. **ROUTINELY** means the median annual call volume for the lowest 10% of all Maine EMS-licensed ground ambulance and non-transporting services for the preceding year, calculated and applied separately as it pertains to those defined services and ambulance licensure with the least of the median figures applied as it relates to other defined services, emergency medical services persons, or persons licensed by the Board.
14. **SERVICE-LEVEL MEDICAL DIRECTOR** means a physician, or a nurse practitioner who has completed the required clinical experience pursuant to 32 M.R.S. §2102(2-A), who assumes primary responsibility to ensure quality medical care for the service. A physician assistant may assist in this role under the direct supervision of a physician; however, the supervising physician must be identified to Maine EMS as the medical director.
15. **STATE LICENSURE EXAMINATIONS** mean the written (cognitive) tests and practical (psychomotor) evaluations approved by the Board and used to determine the minimum competency of a person seeking licensure as an EMS provider.
16. **TRAINING CENTER** means an entity that meets the requirements of the Maine EMS Training Center Standards and is authorized by Maine EMS to conduct Maine EMS-approved EMS educational courses and training programs leading to EMS provider licensure.
17. **TRAUMA** means a single or multisystem life-threatening or limb-threatening injury requiring immediate medical or surgical intervention or treatment to prevent death or permanent disability.
18. **WILDERNESS EMERGENCY MEDICAL TECHNICIAN (WEMT)** means the graduate of any wilderness emergency medical technician course who may apply the principles of care taught in that course as defined. This is not a Maine EMS licensure level in itself but is a certification of skills and knowledge that may be employed by those licensed by Maine EMS.
19. **9-1-1 PRIMARY RESPONSE AREA** means the geopolitical subdivision(s) where the agency provides response to a scene location for an Emergency Medical Call.

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