

Title: ALS Expanded Scope and Critical Care

Transport

Section: Patient Care

Approved: EMS Medical Directors Consortium

Effective: December 17, 2025

# ALS EXPANDED SCOPE AND CRITICAL CARE TRANSPORT

#### I. PURPOSE

To define the requirements and responsibilities of an ALS expanded scope and critical care transport program.

#### II. DEFINITIONS

- A. <u>ALS Expanded Scope and Critical Care Transport</u>: Prehospital or inter-hospital transportation of a critically injured or ill patient by a vehicle service provider, including the provision of medically necessary supplies and services, at a level of service beyond the scope of the Paramedic when medically indicated by a physician. For the purposes of this policy, critical care transport plans are defined in three tiers of care.
- B. <u>Tier I Transports</u>: Tier I transports provide a level of care for patients who require care beyond the IDPH-approved Paramedic scope of practice, up to but not including the requirements of Tiers II and III. Tier I transport may include the use of a ventilator, the use of infusion pumps with administration of medication drips, and maintenance of chest tubes. Tier I transports are considered "expanded scope of practice".
- C. **Expanded Scope of Practice**: Includes the accepted national curriculum plus additional education, experience and equipment as approved by the EMS Medical Director and IDPH.
- D. <u>Tier II Transports</u>: Tier II transports provide an expanded scope of practice more comprehensive than Tier I and are approved by the EMS Medical Director and IDPH in accordance with the EMS System Plan. Tier II transports are considered critical care transports.
- E. <u>Tier III Transports</u>: Tier III transports provide the highest level of transport care for patients who require advanced level treatment modalities and interventions as approved by the EMS Medical Director and IDPH and identified in the EMS System Plan. Tier III transports are considered critical care transports.

## III. POLICY

- A. Critical care transport may be provided by:
  - 1. IDPH-approved critical care transport agencies, not owned or operated by a hospital, utilizing Paramedics with additional training, nurses, or other qualified health professionals; or
  - 2. Hospitals, when utilizing any licensed vehicle service provider or any hospital-owned or operated licensed vehicle service provider. Nothing in the Act requires a hospital to use, or to be, an IDPH-approved critical care transport provider when transporting patients, including those critically injured or ill. Nothing in the Act shall restrict or prohibit a hospital from providing, or arranging for, the medically appropriate transport of any patient, as determined by a physician.



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3. Physician medical direction for critical care, as approved by the EMS Medical Director or delegate, shall have the qualifications consistent with the acuity and conditions of the critical care patients transported. Such medical direction includes an Illinois licensed practicing physician with competency in critical care transport medicine and board certification in a specialty relevant to the provider agency mission or experience in critical care transport medicine consistent with the types, acuity and severity of patients transported.

B. All critical care transport providers must be approved by the EMS Medical Director. Nothing in this policy shall restrict a hospital's ability to furnish personnel, equipment, and medical supplies to any vehicle service provider, including a critical care transport provider.

#### IV. TIER I TRANSPORTS - ALS EXPANDED SCOPE

- A. Licensure and Personnel Staffing
  - 1. Licensed Illinois Paramedic, PHRN, PHPA or PHAPRN;
  - 2. Scope of practice more comprehensive than the national EMS scope of practice model approved by IDPH; and
  - 3. Approved to practice by IDPH in accordance with the EMS System plan.
- B. Minimum Staffing
  - 1. System authorized EMT, Paramedic, PHRN, PHPA or PHAPRN as driver; and
  - 2. System authorized expanded scope of practice Paramedic, PHRN, PHPA, PHAPRN or physician who shall remain with the patient at all times.
- C. Education, Certification and Experience
  - 1. Initial Education
    - a. Documentation of initial education and demonstrated competencies of expanded scope of practice knowledge and skills as required by Tier I Level of Care and approved by IDPH in accordance with the EMS System plan.
  - 2. Continuing Education Requirements
    - a. Annual competencies of expanded scope of practice knowledge, equipment and procedures shall be completed; and
    - b. The EMS vehicle service provider shall maintain documentation of competencies and provide documentation to the EMS System upon request.



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#### 3. Certifications

a. Tier I personnel shall maintain the following renewable certifications and credentials in active status:

- Advanced Cardiac Life Support (ACLS);
- Pediatric Education for Pre-Hospital Professionals (PEPP) or Pediatric Advance Life Support (PALS);
- International Trauma Life Support (ITLS) or Pre-Hospital Trauma Life Support (PHTLS); and
- Any additional educational course work or certifications required by the EMS MD.

## 4. Experience

- a. Minimum of 6 months of experience functioning in the field at an ALS level or as a physician in an Emergency Department; and
- b. Documentation of education and demonstrated competencies of expanded scope of practice knowledge and skills required for Tier I Level of Care, approved by IDPH, and included in the EMS System Plan.

### D. Medical Equipment and Supplies

1. Authorized equipment as approved by the EMS MD and IDPH and included in the EMS System Plan.

#### E. Vehicle Standards

- Any vehicle used for providing expanded scope of practice care shall comply, at a minimum, with the Region 11 <u>Ambulance Licensing Requirements Policy</u> or the State of Illinois Administrative Code in regards to the Licensure of SEMSV (Specialized EMS Vehicle) Programs (<u>Section</u> <u>515.900</u>) and SEMSV Program Licensure Requirements for Air Medical Transport Programs (<u>Section 515.920</u>) vehicle requirements, including additional medical equipment and ambulance equipment as defined in the EMS System Plan.
- 2. Any vehicle used for expanded scope of practice transport shall be equipped with an onboard alternating current (AC) supply capable of operating and maintaining the AC current needs of the required medical devices used in providing care during the transport of a patient.

#### F. Treatment and Transport Protocols

- 1. Shall address written operating procedures and protocols signed by the EMS MD and approved for use by IDPH in accordance with the EMS System Plan; and
- 2. Use of authorized equipment as approved by the EMS MD.



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## G. Quality Assurance Program

- 1. The Tier I transport provider shall develop a written Quality Assurance (QA) plan approved by the EMS System and IDPH. The provider shall provide quarterly QA reports to the EMS System and to IDPH upon request for the first 12 months of operation.
- 2. If the EMS System has not identified any deficiencies or adverse outcomes after the first year, the EMS System shall establish the frequency of quality reports.
- 3. An EMS MD shall oversee the QA program.
- 4. The QA plan shall evaluate all expanded scope of practice activity. The review shall include at a minimum:
  - a. Review of transferring physician orders and evidence of compliance with those orders;
  - b. Documentation of vital signs and frequency and evidence that abnormal vital signs or trends suggesting an unstable patient were appropriately detected and managed;
  - Documentation of any side effects/complications, including hypotension, extreme bradycardia or tachycardia, increasing chest pain, dysrhythmia, altered mental status and/or changes in neurological examination, and evidence that interventions were appropriate for those events;
  - d. Documentation of any unanticipated discontinuation of a catheter or rate adjustments of infusions, along with rationale and outcome;
  - e. Documentation that any unusual occurrences were promptly communicated to the EMS System; and
  - f. A root cause analysis of any event or care inconsistent with standards.
  - g. The QA plan shall be subject to review as part of an EMS System site survey and as deemed necessary by IDPH.

### V. TIER II TRANSPORTS - CRITICAL CARE

- A. Licensure and Personnel Staffing
  - 1. Licensed Illinois Paramedic, PHRN, PHPA or PHAPRN.
- B. Minimum Staffing
  - 1. System authorized Paramedic, PHRN, PHPA or PHAPRN; and
  - 2. System authorized Paramedic, PHRN, PHPA, PHAPRN or physician who is critical care prepared and who shall remain with the patient at all times.
- C. Education, Certification and Experience
  - 1. Initial Advanced Education



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a. At a minimum, 80 didactic hours of established higher collegiate critical care education nationally recognized; or two years of experience in critical care or emergency care with completion of an EMS MD approved critical care training program (consisting of, at minimum, 80 didactic hours) and obtaining a nationally recognized advanced certification within two years; and

b. Demonstrated competencies, as documented by the EMS MD or SEMSV MD and approved by IDPH

## 2. Continuing Education Requirements

- a. The EMS System shall document and maintain annual competencies of expanded scope of practice knowledge, equipment, and procedures;
- b. A minimum of 40 hours of critical care level education shall be completed every four years;
- c. The EMS provider shall maintain documentation of compliance with continuing education requirements and shall provide documentation to the EMS System upon request; and
- d. Nationally recognized critical care certifications shall be maintained and renewed based on national recertification criteria.

#### 3. Certifications

- a. Tier II personnel shall maintain, at a minimum, the following renewable certifications, and credentials in active status:
  - ACLS:
  - PEPP or PALS;
  - ITLS or PHTLS

#### 4. Experience

a. Minimum of one year experience functioning in the field at an ALS level for Paramedics, PHRNs, PHPAs, and PHAPRNs and one year experience in an Emergency Department for physicians.

#### D. Medical Equipment and Supplies

- 1. Infusion pumps; and
- 2. Other authorized equipment as approved by the EMS MD or SEMSV MD and IDPH and included in the EMS System Plan.

#### E. Vehicle Standards

 Any vehicle used for providing critical care transports shall comply, at a minimum, with the Region 11 <u>Ambulance Licensing Requirements Policy</u> or the State of Illinois Administrative Code in regards to the Licensure of SEMSV (Specialized EMS Vehicle) Programs (<u>Section 515.900</u>) and SEMSV Program Licensure Requirements for Air Medical Transport Programs (<u>Section 515.920</u>) vehicle



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requirements, including additional medical equipment and ambulance equipment as defined in the EMS System Plan.

2. Any vehicle used for critical care transport shall be equipped with an onboard AC supply capable of operating and maintaining the AC current needs of the required medical devices used in providing care during the transport of a patient.

- F. Treatment and Transport Protocols
  - 1. Shall address equipment and medications used on Tier II transports.
- G. Quality Assurance Program
  - The EMS System and Tier II transport providers shall have an IDPH-approved QA program in place that uses national standards performance indicators to evaluate the appropriateness and quality of patient care. The method and results of the quality improvement projects shall be available to IDPH upon request.
  - 2. An EMS MD shall oversee the QA program.

#### VI. TIER III TRANSPORTS - CRITICAL CARE

- A. Minimum Personnel Staffing and Licensure
  - 1. One driver holding a current Illinois EMS license; and
  - 2. Two critical care prepared clinicians, who shall remain with the patient at all times:
    - a. Paramedic, PHRN, PHPA or PHAPRN; and
    - b. RN, PHRN, PHPA or PHAPRN.
- B. Education, Certification and Experience
  - 1. Paramedic, PHRN, PHPA or PHAPRN
    - a. Initial Advanced Education
      - At a minimum, 80 didactic hours of established higher collegiate critical care education nationally recognized, or two years of experience in critical care or emergency care with completion of an EMS MD or SEMSV MD approved critical care training program (consisting of, at minimum, 80 didactic hours) and obtaining a nationally recognized advanced certification within two years; and; and
      - Demonstrated competencies, as documented by the EMS MD and SEMSV MD and approved by IDPH.



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## b. Continuing Education Requirements

- The EMS System shall document and maintain annual competencies of expanded scope of practice knowledge, equipment, and procedures;
- A minimum of 40 hours of critical care level continuing education shall be completed every four years;
- The EMS provider shall maintain documentation of compliance with continuing education requirements and shall provide documentation to the EMS System upon request; and
- Nationally recognized critical certifications shall be maintained and renewed based on national recertification criteria.

#### c. Certifications

Tier III Paramedic, PHRN, PHPA or PHAPRN personnel shall maintain, at a minimum, the following renewable certifications, and credentials in active status:

- ACLS:
- PEPP or PALS and Neonatal Resuscitation Program (NRP) or EMS System approved equivalent; and
- ITLS or PHTLS.

#### d. Experience

- Minimum of two years experience functioning in the field at an ALS Level;
- Documented demonstrated competencies; and
- Completion of annual competencies of expanded scope knowledge, equipment, and procedures.

#### 2. Registered Nurses

- a. Continuing Education Requirements
  - A minimum of 48 hours of critical care level education shall be completed every four years;
    and
  - The EMS provider shall maintain documentation of compliance with continuing education requirement and shall provide documentation to the EMS System upon request.

#### b. Certifications

Tier III RN personnel shall maintain, at a minimum, the following renewable certifications, and credentials in active status:

- ACLS:
- PEPP, PALS, or Emergency Nursing Pediatric Course (ENPC);
- NRP or EMS System approved equivalent; and
- ITLS, PHTLS, and Trauma Nursing Core Course (TNCC) or Trauma Nurse Specialist (TNC), TPATC or ATLS.

#### c. Experience

• Minimum of two years full-time critical care experience.



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### D. Medical Equipment and Supplies

1. As approved by the EMS MD or SEMSV MD and IDPH and included in the EMS System Plan.

#### E. Vehicle Standards

- Any vehicle used for providing critical care transports shall comply, at a minimum, with the Region 11 <u>Ambulance Licensing Requirements Policy</u> or the State of Illinois Administrative Code in regards to the Licensure of SEMSV (Specialized EMS Vehicle) Programs (<u>Section 515.900</u>) and SEMSV Program Licensure Requirements for Air Medical Transport Programs (<u>Section 515.920</u>) vehicle requirements, including additional medical equipment and ambulance equipment as defined in the EMS System Plan.
- 2. Any vehicle used for critical care transport shall be equipped with an onboard AC supply capable of operating and maintaining the AC current needs of the required medical devices used in providing care during the transport of a patient.

## F. Treatment and Transport Protocols

1. Shall address equipment and medications used on Tier III transports.

#### G. Quality Assurance Program

- 1. The EMS Systems and Tier III transport providers shall have an IDPH-approved QA program in place that uses national standards performance indicators to evaluate the appropriateness and quality of patient care. The method and results of the quality improvement projects will be available to IDPH upon request.
- 2. An EMS MD or SEMSV MD shall oversee the QA program.