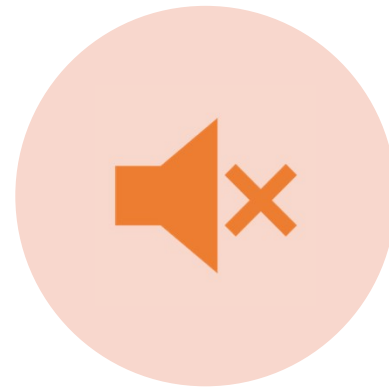


Please



**TYPE QUESTIONS IN THE
CHAT BOX**



MUTE YOUR LINES

Note



This operational WebEx/call is for EMS agencies and EMS educational programs only.



If you are a member of the media or the general public, you are asked to disconnect from this WebEx/call immediately.

Georgia OEMST Update – Epidemiology and Operations

December 9, 2022

GA Epidemiology Update

Dr. Amanda Feldpausch

One Health Medical Epidemiologist

Deputy State Public Health Veterinarian

OEMST Epi and Operational Update/ December 9, 2022

Topics

- Ebola Sudan Virus
- Mpox
- Influenza
- COVID-19

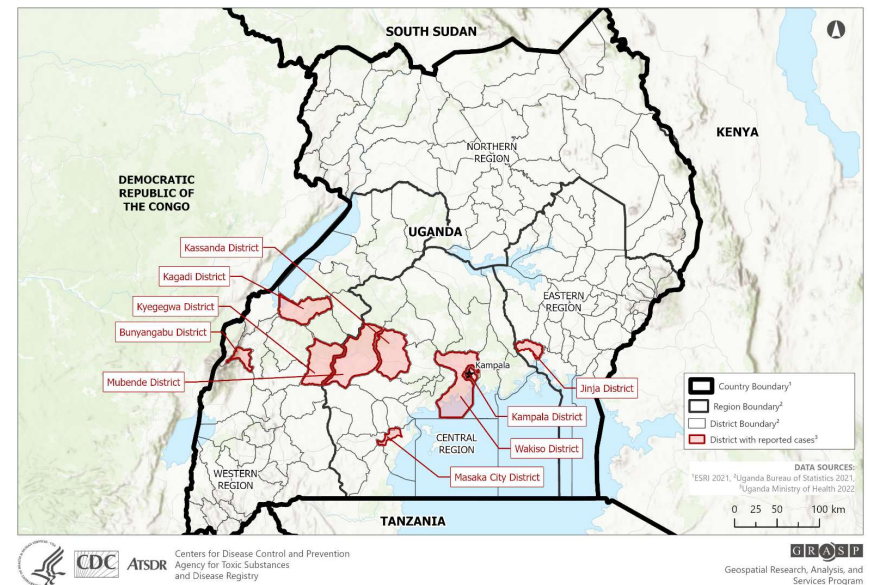
About Ebola

- Ebola is a rare and deadly disease caused by infection by a group of viruses within the genus Ebolavirus.
- Ebola viruses are found in several African countries.
- Four Ebola virus species –Zaire virus, Sudan virus, Tai Forest virus, and Bundibugyo virus–can cause disease in humans.
- The Sudan virus is the strain causing the current outbreak.

Current Outbreak

- September 2022, Uganda:
 - On September 20, 2022, the Ugandan Ministry of Health confirmed an outbreak of Ebola virus disease (EVD) (Sudan virus) in Mubende District, in western Uganda.
 - This announcement came after a patient with a suspected viral hemorrhagic fever (VHF) was identified and isolated at Mubende Regional Referral Hospital.
 - Outbreaks have been reported in 9 districts
 - In the absence of licensed vaccines and therapeutics for prevention and treatment of Sudan virus disease, the risk of potential serious public health impact is high.

Uganda: Ebola Virus Disease Outbreak 2022



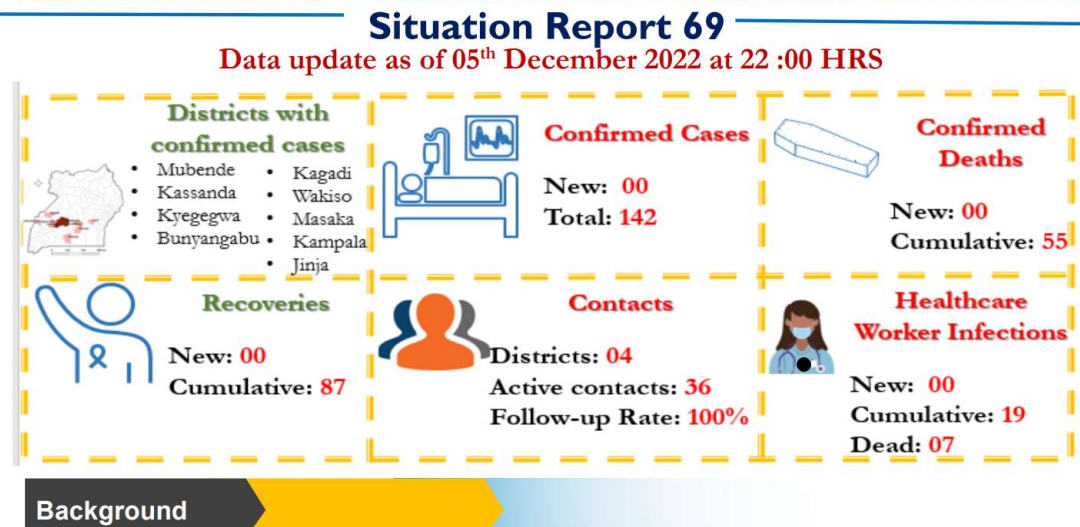
Current Outbreak Continued

Total Cases in Uganda = 164

- 142 Confirmed
- 22 Probable

Total Deaths in Uganda = 77

- 55 Confirmed
- 22 Probable



Case Fatality: 39% (among confirmed cases)

Total Recoveries: 87 (among confirmed cases)

Key Highlights

- ➔ Today marks 80 days of responding to the EVD outbreak, and seven days since the last confirmed case.
- ➔ Within the past 24 hours, there was no new confirmed case or death registered, there was no recovery.
- ➔ Case Fatality Ratio (CFR) among confirmed cases still stands 55/142 (39%).
- ➔ A total of 36 contacts actively being followed-up in four districts, follow-up rate in the past 24 hours was 100%.

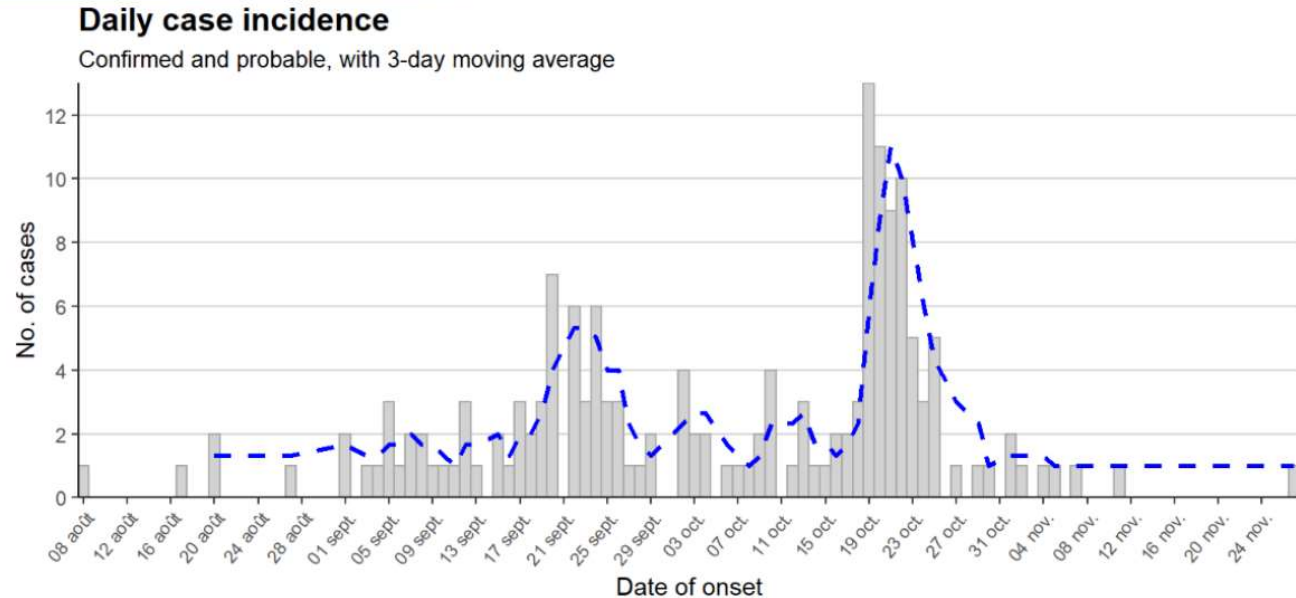


Figure: Time analysis of affected individuals

Response to the Current EVD Outbreak

- As of October 10, 2022: all travelers from Uganda are being filtered into five US airports: ATL, JFK, Newark, Dulles, Chicago O'Hare
- Airport screening of all travelers at the departure country
- Screening occurs once travelers arrive at five US airports
- Risk assessments conducted by DPH Epidemiologists and enrollment into monitoring
- Monitoring of all travelers through the State Electronic Notifiable Disease Surveillance System, Ebola Active Monitoring System.

Intervention	Reported High-risk Exposure	Present in Designated Outbreak Area	Present in Outbreak Country but not Designated Outbreak Area
Initial Risk Assessment	Yes	Yes	Yes
Health education	Yes	Yes	Yes
Symptom monitoring	Daily	At least twice weekly until 21 days after departure from Uganda	At least weekly until 21 days after departure from Uganda
Movement restrictions	Quarantine	None	None
Travel	Not permitted	Advance notification to health department and coordination with destination health department	Advance notification to health department and coordination with destination health department

Georgia Monitoring Data

- 110 individuals are currently under monitoring
 - 32 were present in the outbreak country but NOT in the designated outbreak area
 - 78 were present in the designated outbreak area
 - 0 reported any high risk exposures
 - 14 are <18 years of age

We have had a few travelers who reported minor symptoms, in the last week most of these persons experienced mild symptoms of illness in transit or just prior to their travel, but they had resolved upon arrival in GA and have remained healthy here - none have needed transport or evaluation for Ebola Sudan virus disease at an Infectious Disease Network hospital.

EVD Outbreak Response: Ill Travelers

- Travelers are instructed to contact 1-866-PUB-HLTH (866-782-4584)
- Consultation with medical epidemiologist
- If identified that traveler needs medical care the Infectious Disease Network (IDN) will be initiated and Transportation Network (IDTN) may be used to safely transport, evaluate, and treat a patient.
 - Communication is key
 - Telemedicine sometimes an option

Symptoms of EVD

- Fever
- Severe headache
- Fatigue
- Muscle pain
- Vomiting
- Diarrhea
- Abdominal pain
- Unexplained hemorrhage



Based on current data, a person infected with EVD **IS NOT** contagious until symptoms appear

Role of Medical Epidemiologist

- Medical epidemiologist will
 - Complete a risk assessment to determine if a traveler requires a medical evaluation
 - Identify Facility
 - Contact facility to determine availability to accept the individual
 - Facilitate proper transportation (personal transportation or IDTN)
 - Initiate transport through the IDTN to transfer the patient to facility, if necessary
 - Facilitate laboratory testing to confirm the disease
 - Notify the public health district and other relevant partners

Identify, Isolate and Inform

Identify:

- Identify patients with an exposure history
 - Travel history
 - Compatible symptoms
- Isolate
 - Isolate the patient rapidly in a private room with a private bathroom
- Inform
 - Call 1-866-PUB-HLTH (1-866-782-4584)
 - Ask to speak to a medical epidemiologist

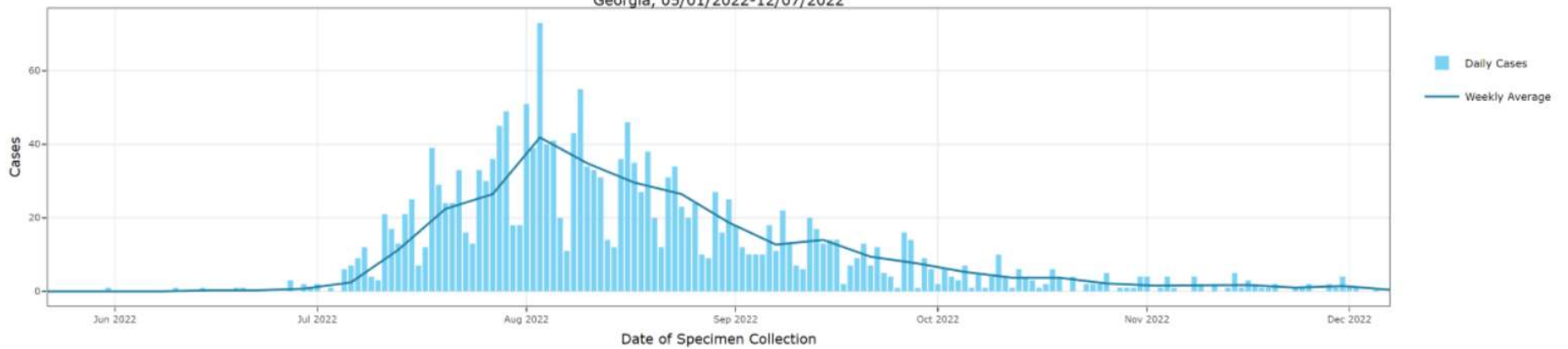
Mpox

Cases over Time

By Specimen Collection Date

By Symptom Onset Date

Laboratory-Positive Monkeypox Cases by Specimen Collection Date
Georgia, 05/01/2022-12/07/2022



Week	Cumulative Cases By Week (Wed to Wed)		No. of New Cases in the Pasa Week
	1957	1973	
Nov 30-Dec 7	1957	1973	16
Nov 24-Nov 30	1951	1957	6
Nov 16-Nov 23	1942	1951	9
Nov 9-Nov 16	1929	1942	13
Nov 2-Nov 9	1916	1929	13
Oct 26-Nov 2	1903	1916	13
Oct 19-Oct 26	1884	1903	19
Oct 12-Oct 19	1854	1884	30
Oct 5-Oct 12	1826	1854	28
Sep 28-Oct 5	1784	1826	42

Monkeypox (Mpox)

Test | Treat | Vaccinate

Learn more about Georgia's public health response



What is Monkeypox (Mpox)?

Mpox is a virus that can cause a rash, bumps, or sores on or near the genitals, or anal area, but also on other areas like the hands, feet, chest, face, or mouth. These sores can be very painful.

The mpox virus can also cause flu-like symptoms like fever, headache, muscle aches and backache, swollen lymph nodes, chills, exhaustion, sore throat, nasal congestion, and cough.

2022 U.S. Monkeypox (Mpox) Outbreak



GA Monkeypox (Mpox) Outbreak Cases and Vaccinations

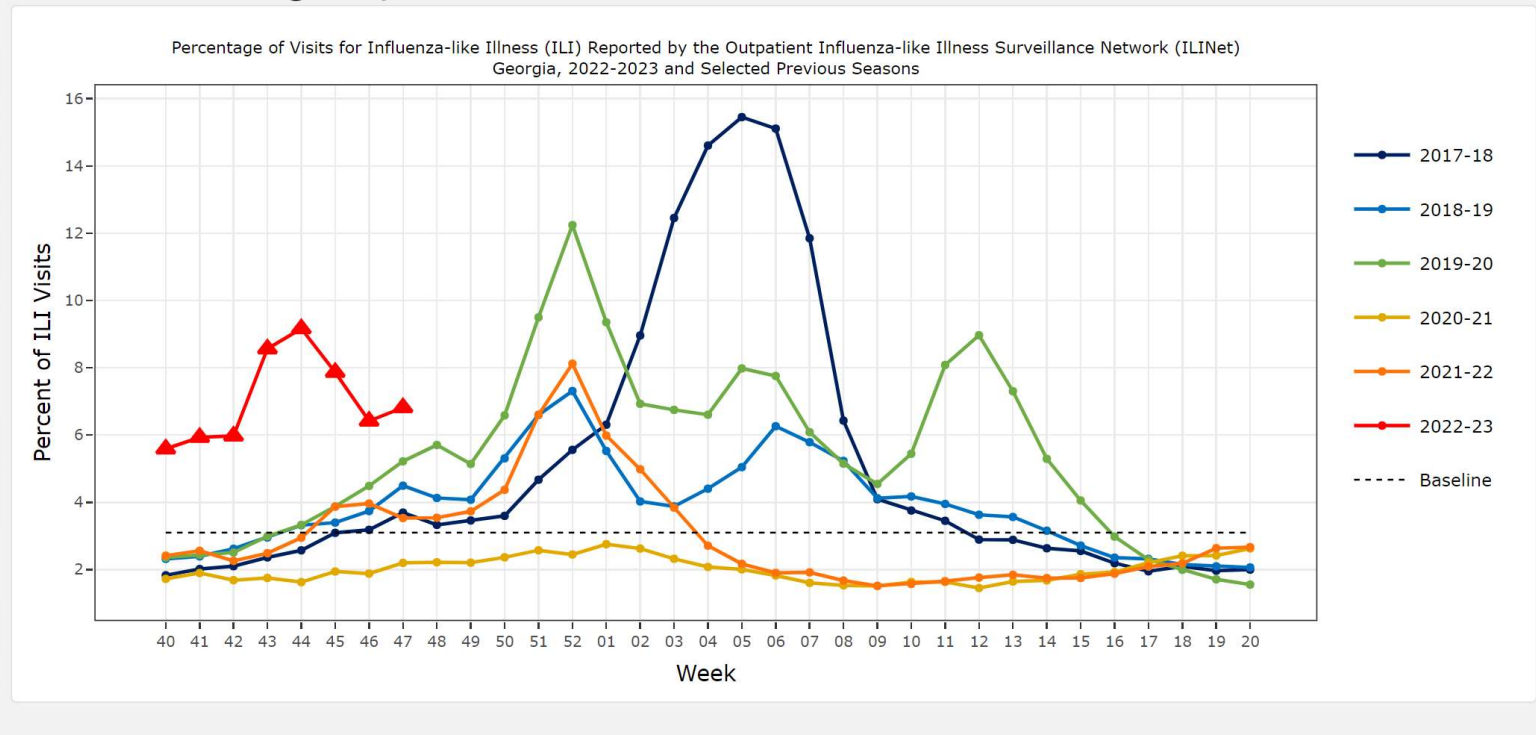
WEEKLY REPORTS

Influenza (US data)

- Seasonal influenza activity is high and continues to increase across the country.
- Of influenza A viruses detected and subtyped this season, 79% have been influenza A(H3N2) and 21% have been influenza A(H1N1).
- CDC estimates that, so far this season, there have been at least 8.7 million illnesses, 78,000 hospitalizations, and 4,500 deaths from flu.
- The cumulative hospitalization rate in the FluSurv-NET system is higher than the rate observed in week 47 during every previous season since 2010-2011.
- The majority of influenza viruses tested are in the same genetic subclade as and antigenically similar to the influenza viruses included in this season's influenza vaccine.

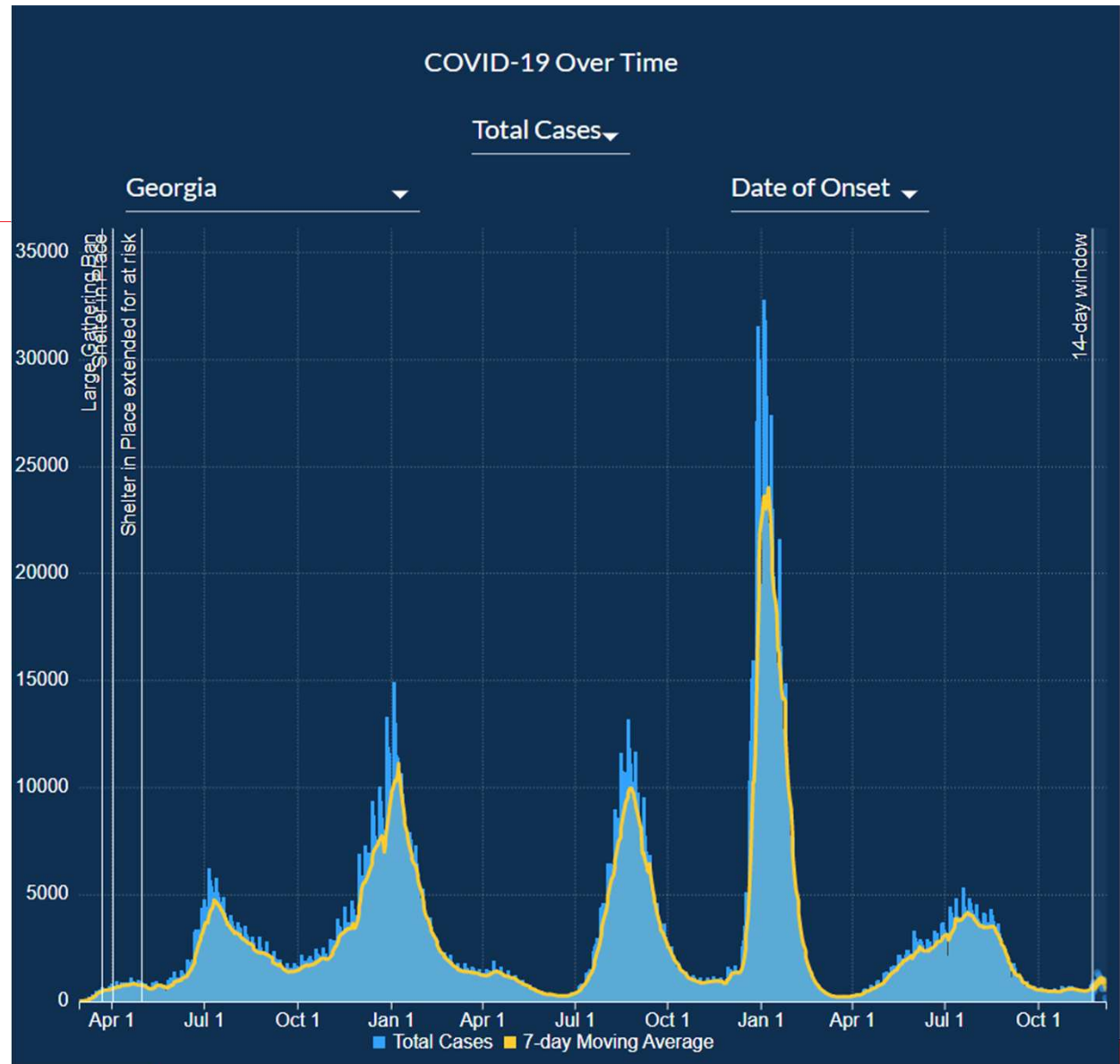
Influenza – GA data (posted weekly)

ILINet Percentages By Season



COVID-19

- New surveillance tools like wastewater



Helpful links

- Ebola
 - CDC
 - General Outbreak <https://www.cdc.gov/vhf/ebola/outbreaks/uganda/2022-sep.html>
 - Risk assessment/monitoring <https://www.cdc.gov/quarantine/interim-guidance-risk-assessment-ebola.html>
 - WHO (SitReps) – <https://www.afro.who.int/countries/publications?country=879>
- Mpox
 - DPH page with link to reports - <https://dph.georgia.gov/monkeypox>
 - CDC page - <https://www.cdc.gov/poxvirus/monkeypox/response/2022/index.html>
- Influenza
 - DPH page with link to surveillance reports - <https://dph.georgia.gov/influenza-surveillance-georgia>
 - CDC FluView - <https://www.cdc.gov/flu/weekly/index.htm>
- COVID-19
 - DPH Status Report - <https://dph.georgia.gov/covid-19-status-report>
 - National Wastewater Surveillance System (NWSS) - <https://dph.georgia.gov/epidemiology/acute-disease-epidemiology/georgia-national-wastewater-surveillance-system-ga-nwss>

Questions for Dr. Feldpausch

- Epidemiology

Operational Update

Michael Johnson/Kelly Joiner/Richard Rhodes

OEMST Position Updates

Michael Johnson

OEMST Position Updates

Regional Training Coordinator – R6

- Heather Reddick

heather.reddick@dph.ga.gov

Cardiac Care Director

- Person selected, starts Jan. 3, 2023

EMS Data Manager

- Application closed, interview process

General Updates

Michael Johnson



Updates in general

- Trauma and Pediatric Transport Guidance
 - Trauma Level I Closure
 - Statewide Pediatric Flu and RSV Surge
- American College of Surgeons Trauma System Assessment
 - Statewide Focus – Jan. 9 - Cordele
 - Rural Focus – Jan. 10 – Cordele
 - Rural Focus – Jan. 11 – Cartersville
 - Report – Jan. 13 - Virtual

Workforce Numbers

Kelly Joiner

Number of Licensees as of 12/09/2022

Level	As of 01/01/22	As of 04/01/2022	As of 12/9/2022	Δ YTD	Δ since 4/01
EMT-Responder	99	203	304	+205	NA
EMT	5,805	5,431	6,345	+537	+914
EMT-Intermediate	4,881	4,805	4,806	-75	+1
Advanced EMT	4,931	4,716	5,180	+249	+464
Cardiac Technician	28	27	27	-1	NC
Paramedic	8,770	8,562	9,072	+302	+510
TOTAL	24,514	23,744	25,734	+1,293	+1,889

Naloxone for EMS Agencies

Kelly Joiner

Naloxone for EMS Agencies

- First request period has closed.
- Next request application will open in March 2023
- Allocations have been completed and sent to the warehouse for packing and shipping.
- Shipments will start going out December 14th
- Naloxone supplies are to supplement current EMS agency inventory and will be allocated based on supply on hand and previous Narcan usage.

EMS Vehicles Equipment and Supplies

Kelly Joiner

Vehicle Equipment and Supplies

The Department worked with EMSAC to update the minimum required supplies/equipment on EMS vehicles.

Vehicle Inspection Forms revised.

- Modifications made:
 - New format
 - Now includes the operational items we have always inspected
 - Items removed
 - Items added
 - Items changed in quantity

Reminder: These forms and criteria will go in effect **January 1, 2023.**

Vehicle Inspection Forms

Current Form

DPH
VEHICLE INSPECTION FORM FOR REGISTERED AMBULANCES

SERVICE NAME: _____ DATE: _____
 UNIT VID NUMBER: _____ UNIT VIN NUMBER: _____

RESPIRATORY EQUIPMENT				
QTY	COMPLIANT	ITEM / DESCRIPTION		
	Y	N	PRI	
1	<input type="radio"/>	<input type="radio"/>	1	Mounted Electric or Manifold Operation Suction Aspirator
1	<input type="radio"/>	<input type="radio"/>	1	Portable Suction Aspirator – as approved by the Department
4	<input type="radio"/>	<input type="radio"/>	1	Sterile Suction Catheters, assorted sizes
2	<input type="radio"/>	<input type="radio"/>	3	Irrigation Liquids, 1000 ml each or equivalent
2	<input type="radio"/>	<input type="radio"/>	1	Bag-Valve-Mask Resuscitator, disposable, with transparent adult mask. The valve must operate in cold weather, and the unit must be capable of use with an oxygen supply. The unit must be capable of delivering approximately 100% oxygen.
2	<input type="radio"/>	<input type="radio"/>	1	Pediatric Bag-Valve-Mask Resuscitator, disposable, with transparent child and infant mask. The valve must operate in cold weather, and the unit must be capable of use with an oxygen supply. The unit must be capable of delivering approximately 100% oxygen.
4	<input type="radio"/>	<input type="radio"/>	1	Adult Oxygen Mask with Reservoir
2	<input type="radio"/>	<input type="radio"/>	3	Adult Oxygen Mask
3	<input type="radio"/>	<input type="radio"/>	1	Pediatric Oxygen Mask with Reservoir
3	<input type="radio"/>	<input type="radio"/>	3	Pediatric Oxygen Mask
3	<input type="radio"/>	<input type="radio"/>	3	Nasal Cannula
3	<input type="radio"/>	<input type="radio"/>	3	Oxygen Supply Tubing
1	<input type="radio"/>	<input type="radio"/>	1	Oropharyngeal Airways, with adult, child and infant sizes
1	<input type="radio"/>	<input type="radio"/>	1	Nasopharyngeal Airways, with adult, child and infant sizes
1	<input type="radio"/>	<input type="radio"/>	1	Tracheal / Pharyngeal Airway Adjunct (device not intended to be placed into the trachea)
1	<input type="radio"/>	<input type="radio"/>	1	Oxygen: fixed system with at least two wall-mounted oxygen outlets and one flowmeter. The system shall also include a yoke, pressure reducer gauge and an approved cylinder-retaining device that meets DOT standards. The system shall be capable of delivering an oxygen flow of at least 15 liters per minute. If the oxygen source is of a size less than "M" cylinder or equivalent, an additional full spare cylinder for the fixed system shall be carried in the ambulance
1	<input type="radio"/>	<input type="radio"/>	1	Oxygen: portable unit consisting of at least a "D" cylinder or equivalent, yoke, pressure gauge, flowmeter and cylinder wrench or hand wheel. The unit shall be capable of delivering an oxygen flow of at least 15 liters per minute. Cylinder holders with a quickrelease fitting shall be furnished to allow the use of the portable unit outside the vehicle. Ambulances manufactured 12 months after adoption of these rules must meet Ambulance Manufacturers Division (AMD) Oxygen Tank Retention Standard 003.
1	<input type="radio"/>	<input type="radio"/>	1	Oxygen: full spare cylinder for use with the above portable oxygen unit. In all ambulances manufactured 12 months after adoption of these rules, the oxygen unit must be secured in a manner that meets Ambulance Manufacturers Division (AMD) Oxygen Tank Retention Standard 003.

Revised Form: 1/1/2023

DPH
Georgia Office of Emergency Medical Services and Trauma
 Vehicle Inspection Form: *Ground Ambulance*

Service Name: _____ Tag#: _____ Type: _____
 VIN #: _____ Call Sign: _____ VID#: _____

Inspection Type: Initial Anniversary Renewal Unscheduled

VID # displayed on **Left** and **Right** side of vehicle:(No less than 3") Yes No
 Service name displayed on **Left** and **Right** side of vehicle:(No less than 3") Yes No

Interior - Cab

Odometer Reading: _____ Make: _____ Model: _____

Windshield free of cracks, starbursts, or spider webbing greater than 3" (GA Code § 40-8-73 (2010)) Yes No
 Proof of insurance (GA Code § 40-6-10 (2020)): Yes No
 Air Conditioner Operational (Front): Yes No
 Heating Operational (Front): Yes No
 Doors Operational from the inside and outside: Yes No
 Door Locks Operational (Front): Yes No
 Seatbelts Operational (Driver): Yes No
 Seatbelts Operational (Passenger): Yes No
 Two-Way Communication System: Yes No
 Vehicle Horn Operational: Yes No
 Wipers Operational: Yes No
 Mirrors Visible and without defect (Driver and Passenger side) Yes No

Exterior Lighting

Headlights Operational (Left and Right) High and Low beam Yes No
 Turn Signal Operational (Front - Left and Right) Yes No
 Turn Signal Operational (Rear - Left and Right) Yes No
 Hazard Lights Operational (Front and Rear) Yes No
 Tail Lights Operational (Left and Right) Yes No
 Reverse Light Operational (Left and Right) Yes No
 Brake Lights Operational (Left, Right, Center if applicable) Yes No
 Reverse/Back up Alarm Operational: Yes No

Safety - Tires/Brakes

Tire Tread depth greater than 2/32" per DOT recommendation(Left - Front) Yes No
 Tire Tread depth greater than 2/32" per DOT recommendation(Right - Front) Yes No
 Tire Tread depth greater than 2/32" per DOT recommendation(Left - Rear Outside) Yes No
 Tire Tread depth greater than 2/32" per DOT recommendation(Left - Rear Inside) Yes No
 Tire Tread depth greater than 2/32" per DOT recommendation(Right - Rear Outside) Yes No
 Tire Tread depth greater than 2/32" per DOT recommendation(Right - Rear Inside) Yes No
 Brakes Operational: Yes No
 Rear Bumper and Step intact and operational: Yes No

Emergency Lights/Siren

All Warning Lights Operational (All Sides) Yes No
 If blue warning lights are used, a valid DPS Permit must be present

Scene/Flood Lights Operational (All Sides) Yes No
 Siren Operational: Yes No

Interior - Patient Compartment

	<input type="checkbox"/> Yes	<input type="checkbox"/> No
id outside:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
rtment seats):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
inal (H/L):	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ee of blood, dirt, and debris, etc)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
ntained in working order and shall be stored in an orderly be readily accessible when needed.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

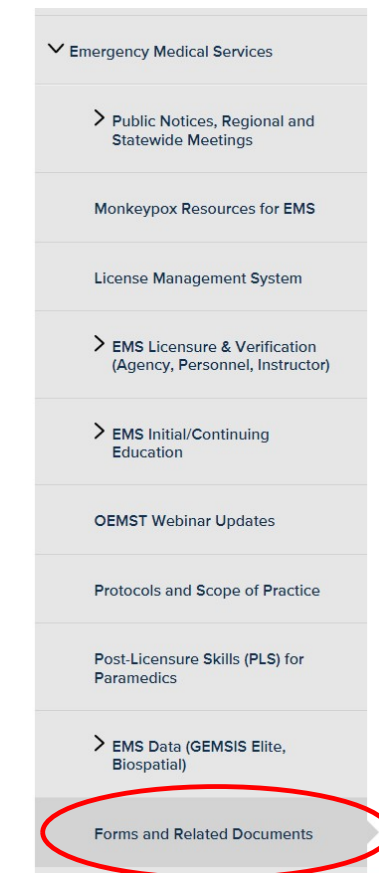
Respiratory Equipment

Item/Description	Compliant
nted Electric Suction unit that works on vehicle power and r system shall achieve a minimum of 5.8 psi (300mmHg) ter the suction tube is closed. Mounted devices must meet 432 (Ambulance Equipment Mount Device or Systems) al or Battery Powered. If battery powered the aspirator num of 5.8 psi (300mmHg) vacuum within 4 seconds after	<input type="checkbox"/> Yes <input type="checkbox"/> No
sorted sizes	<input type="checkbox"/> Yes <input type="checkbox"/> No
iginal sealed packaging	<input type="checkbox"/> Yes <input type="checkbox"/> No
sted packaging	<input type="checkbox"/> Yes <input type="checkbox"/> No
- Adult, disposable, with transparent adult mask and tubing old weather, and the unit must be capable of use with an it be capable of delivering approximately 100% oxygen.	<input type="checkbox"/> Yes <input type="checkbox"/> No
suscitator -BVM with Infant AND Pediatric Mask , disposable th, Infant BVM and Pediatric BVM or Can be 2 Pediatric BVM diatric masks) The valve must operate in cold weather, and use with an oxygen supply. The unit must be capable of 0% oxygen.	<input type="checkbox"/> Yes <input type="checkbox"/> No
ervoir	<input type="checkbox"/> Yes <input type="checkbox"/> No
Reservoir	<input type="checkbox"/> Yes <input type="checkbox"/> No
e ability to provide aerosolized treatment for adult and	<input type="checkbox"/> Yes <input type="checkbox"/> No
sorted sizes, must include 20F, 24F, 28F, 30F, 32F, 34F, with	<input type="checkbox"/> Yes <input type="checkbox"/> No
orted sizes, must include 40mm (00), 50mm (0), 60mm (1), 1 (5), 110mm (6)	<input type="checkbox"/> Yes <input type="checkbox"/> No
es (device not intended to be placed into trachea) in ufacturer (i.e. Combi tube sizes 37mm, 43mm OR King sizes 3, 4, 5 or LMA sizes 3, 4, 5 or equivalent per Service water soluble lubricant	<input type="checkbox"/> Yes <input type="checkbox"/> No

Vehicle Inspection Forms

These forms can be found on the Department website under **Forms and Related Documents, Vehicle Inspection Forms**:

<https://dph.georgia.gov/EMS/ems-forms-and-related-documents>.



Forms for EMS Personnel

Forms for EMS Agencies

Vehicle Inspection Forms

The following vehicle inspection forms are currently in effect until *December 31, 2022*.

- [PDF R-E-01-A Vehicle Inspection Form - Ground Ambulance](#)
- [PDF R-E-01-B Vehicle Inspection Form - Neonatal Ambulance](#)
- [PDF R-E-01-C Vehicle Inspection Form - Medical First Responder](#)
- [PDF R-E-01-D Vehicle Inspection Form - Air Ambulance](#)

The following vehicle inspection forms will be effective starting *January 1, 2023*.

- [PDF 01.01.2023 Ground Ambulance - Vehicle Inspection Form](#)
- [PDF 01.01.2023 Neonatal Ambulance - Vehicle Inspection Form](#)
- [PDF 01.01.2023 Medical First Responder - Vehicle Inspection Form](#)
- [PDF 01.01.2023 Air Ambulance - Vehicle Inspection Form](#)

CLIA Certificates

Kelly Joiner

CLIA Certificates Reminder

- All EMS Agencies must have when submitting Agency Renewal Application

(Starting April 1st all agencies will have to submit verification with Renewal application)

- CLIA Certificate of Waiver/CLIA Certificate of Accreditation

- Federal mandate

- Administered by Department of Community Health (DCH)

About DPH
> Commissioner's Message
> Board of Public Health
> Public Health Regulations
> Contact DPH
> Media/Public Affairs
> Office of Government Relations
> Office of Inspector General
> Clinical Services
▼ Emergency Medical Services
> Public Notices, Regional and Statewide Meetings
Monkeypox Resources for EMS
License Management System
▼ EMS Licensure & Verification (Agency, Personnel, Instructor)
▼ EMS Agency Licensure
Group Payments for Medic Renewals
Voucher Codes for EMS Agencies
CLIA Testing for EMS Agencies
New Authorized Agent

CLIA Testing for EMS Agencies

Since all EMS Agencies in Georgia are required to have devices that can check a patient's blood glucose, all EMS Agencies are required to have a CLIA Certificate of Waiver. Congress passed the Clinical Laboratory Improvement Amendments (CLIA) in 1988, and under CLIA, a laboratory is defined as a facility that performs applicable testing on materials derived from the human body for the purpose of providing information for the diagnosis, prevention, or treatment of any disease or impairment of, or assessment of the health of, human beings.

To learn more about CLIA and how to apply for a CLIA Certificate of Waiver, please review the following:

- [How to obtain a CLIA Certificate of Waiver - CMS](#)
- [Clinical Laboratory Improvement Amendments \(CLIA\) Website](#)
- [PDF CLIA Application Guidance Document with Instructions](#)
- [Waived Tests \(CDC webpage with educational materials\)](#)

The State Agency for CLIA in Georgia is:

GEORGIA DEPARTMENT OF COMMUNITY HEALTH
Healthcare Facility Regulation
Division Diagnostic Services Unit
2 Peachtree Street, N.W., Suite 31-447
Atlanta, GA 30303-3142
(404) 657-5700
FAX: (404) 463-4398
Email: hfrd.diagnostic@dch.ga.gov

Page last updated 8/12/2022

CLIA Certificates

Online Search tool: <https://qcor.cms.gov/main.jsp>



Tool

Basic Search
CLIA Laboratory Lookup

Accrediting Organization Performance

Accredited Hospitals with Recent Substantial Deficiencies
Full Reports of Hospice Complaint Surveys

Providers & Suppliers

Multi-Provider Reports

- Ambulatory Surgical Centers (ASCs)
- CLIA Laboratories
- Community Mental Health Centers (CMHCs)
- Comprehensive Outpatient Rehab Facilities (CORFs)
- Dialysis Facilities (ESRDs)
- Federally Qualified Health Centers (FQHCs)
- Home Health Agencies
- Hospices
- Hospitals
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
- Nursing Homes
- Organ Procurement Organizations (OPO)
 - OPO Public Performance Report
 - OPO Public Performance Report User Guide
- Outpatient Physical Therapy/Speech Pathology (OPT)
- Portable X-ray Suppliers
- Psychiatric Residential Treatment Facilities (PRTFs)
- Rural Health Clinics (RHCs)

Welcome to S&C's Quality, Certification and Oversight Reports (QCOR)

What's New on QCOR?

Full Reports of Hospice Complaint Surveys

Full [survey reports](#) for Hospices with deficiencies cited during State Survey Agency (SA) complaint investigations, as well as survey reports from follow-up surveys resulting from complaint investigations, are now available to view by state in the [Survey Reports section](#). [Survey reports](#) are available for the last three years and include Hospices certified through SAs, as well as Accrediting Organizations.

Attention QCOR users

If you require assistance using the QCOR application, please contact the QCOR Help Desk. For email re

Home Health Agencies (HHA) Information

Due to system migrations, HHA provider and survey information may only be complete and accurate t survey information.

[Accessibility Information](#), [Privacy & Security](#)



CLIA Laboratory Details

CLIA Identification Number	
Facility Name:	
Address:	1835 MACON ROAD PERRY, GA 31069
Phone Number:	478 607-2800
Certificate Type:	Waiver
Certificate Effective Date:	07/29/2021
Certificate Expiration Date:	07/28/2023
Facility Type:	Ambulance

- 11D2186070 404 GYNECOLOGY LLC - Canton, GA
- 11D2060683 4K LQOR LLC DBA CANTON WELLNESS CTR MEDICAL - Canton, GA
- 11D2238635 5 STAR EMS TRANSPORT, LLC - Jonesboro, GA
- 11D2230670 818 DIAGNOSTIC SOLUTIONS - Albany, GA
- 11D2230670 818 DIAGNOSTIC SOLUTIONS - Albany, GA

Post Licensure Skills

Kelly Joiner

Post Licensure Skills

Revising SOP (PLS) Policy

Revisions:

Agency approval will be for 2 years.

- Education request and education will still have to be done on an annual basis

Adding a Post Licensure Skill

- Initiation of the administration of Blood/Blood Products in prehospital environment

Post Licensure Skills

Post-Licensure Skill for Paramedics
1. Initiation and maintenance of Advanced Transport Ventilators (ATV) that are capable of more advanced modes (i.e., capable of adjusting more than rate and tidal volume).
2. Initiation of additional units of blood/blood products , includes initiating an additional blood/blood product infusion if supplied by the sending facility after all proper safety checks are completed by the sending facility and the ambulance has addressed appropriate storage and temperature maintenance during transport.
3. Maintenance of Intra-Aortic Balloon Pumps (IABPs)
4. Maintenance of Transvenous Cardiac Pacing (TVP) devices
5. Maintenance of external cardiac support devices , including percutaneous Left Ventricular Assist Devices (pLVAD), Extra Corporeal Membrane Oxygenation (ECMO) devices, etc.
6. Administration or maintenance of high flow oxygen via nasal cannula.
7. Initiation of the administration of blood/blood products in the pre-hospital environment.

Post-Licensure Skills (PLS) for Paramedics

- Emergency Medical Services
 - Public Notices, Regional and Statewide Meetings
 - Monkeypox Resources for EMS
 - License Management System
 - EMS Licensure & Verification (Agency, Personnel, Instructor)
 - EMS Initial/Continuing Education
 - OEMST Webinar Updates
 - Protocols and Scope of Practice
 - Post-Licensure Skills (PLS) for Paramedics**
 - EMS Data (GEMSIS Elite, Biospatial)
 - Forms and Related Documents
 - State EMS Office Directory
 - Regional EMS Systems
 - Specialty Care Centers



es > Post-Licensure Skills (PLS) for Paramedics

Post-Licensure Skills (PLS) for Paramedics

Post-Licensure Skills (PLS) for Paramedics are those skills that are above and beyond the normal scope of practice for a Georgia licensed Paramedic as listed on the current Scope of Practice for EMS Personnel.

Paramedics are permitted to perform only those additional post-licensure skills listed below at an EMS agency that has been approved to utilize those post-licensure skills for paramedics, and only once the paramedic has been: **trained** on those skills; **certified** as competent; **credentialed** to perform those skills by the agency's EMS Medical Director; and only while operating under standing, verbal or written **orders** from the agency's EMS Medical Director, transferring physician, or medical control physician.

Georgia licensed Paramedics are only permitted to perform any of the skills above if the following requirements are met for **EACH** specific skill for **EACH** EMS agency that the skill will be performed at.

EMS agencies will only be approved to utilize post-licensure paramedic skills if all the requirements below are met.

To submit for EMS agency approval:



After an EMS agency has been approved for a Post Licensure Paramedic skill and education, the agency must:



To renew EMS agency Post Licensure Skill(s) for Paramedic:



Relevant Guidance Resource Documents

- [Additional Blood Products Guidance](#)
- [Advanced Transport Ventilators Guidance](#)
- [External Cardiac Support Device Guidance](#)
- [High Flow Nasal Cannula Guidance](#)
- [IABP Guidance](#)
- [Transvenous Cardiac Pacing Devices Guidance](#)

NEMESIS v3.5 Transition

Kelly Joiner

NEMESIS v3.5 Transition

Working to finalize Georgia's transition plan dates

NEMESIS has started compliance testing with ePCR software vendors

- Currently 18 ePCR software systems are v3.5 compliant
- <https://nemesis.org/technical-resources/version-3/v3-compliant-software-and-compliance-testing-status/>

All states must be fully transitioned to v3.5 before 2024

www.nemsis.org

From NEMESIS Home Page > Using EMS Data > V3.5.0 Revision

medications
blood pressure
lab test 52%
vaccination 82%
BMI normal

10-may-14

patient #08001 / John Adams

gender ♂
age 23
HR 95 bpm
120/60
ECHO D

V3.5.0 REVISION

WHAT IS NEMESIS USING EMS DATA VIEW REPORTS CALLS AND TRAININGS TECHNICAL RESOURCES SUPPORT

NEMESIS
powered by NEMESIS office of EMS

DNA

NEMESIS > v3.5.0 Revision

Careful consideration of posted requests for revisions to the NEMESIS 3.4.0 standard began in early October 2018, during the NEMESIS V3 Implementation meeting, and continued through bimonthly V3 Implementation webinars and NASEMSO Data Managers Committee calls. An initial release of v3.5.0 was made available in September 2019, with a critical patch following in November 2019.

[List of v3.5 Resources](#)

[v3.5 KEY CHANGES FLYER](#)

[STATE AND VENDOR TRANSITION PLANS \(xlsx\)](#)

[WHY MOVE TO V3.5.0?](#)

[WHEN WILL CHANGES TAKE PLACE?](#)

Free CE Credit Course by the NEMESIS TAC and Prodigy EMS

The NEMESIS TAC partnered with Prodigy EMS to bring you an all-new course on ePCR documentation.

This training provides an overview of NEMESIS and the recent changes implemented for the v3.5 standard.

An expert panel will also discuss the important role that the EMS patient care report plays, as well as best documentation practices.

<https://frontend.prodigyems.com/class/9DF13D48-42C1-4FA8-91EB-EF1CD03790FA?tab=overview>

Data Management Policy

Kelly Joiner

Data Management Policy

Worked with EMSData Workgroup

Will be finalized in the coming weeks, distributed and placed on website

Working on EPCR Data Compliance and Compatibility Requirements for ePCR Vendors



Department of Public Health POLICY AND PROCEDURES	Policy No.:	OEMS-DM-2022-001
	Effective Date:	<00/00/0000>
	Revision #:	<0>
EMS Data Compliance and Reporting Policy	Page No.:	1 of 7

Policy No. OEMS-DM-2022-001

EMS Personnel License Renewal

Richard Rhodes

Instructor License Renewal

EMS Instructor and Instructor/Coordinator Renewal application

- Instructor Renewal period:
1/1/2020 – 12/31/2022
- CE/Active Teaching requirements restart as soon as your renewal is issued
- Application fee of \$25
- Late renewal period is 6 months after the license renewal date
 - Late fee will apply

Instructor Renewal

If an Instructor does not meet the Active Teaching requirement for their level they have two options:

- Obtain the required time between now and renewal, or late renewal time
- Downgrade the license to the level they qualify for

If an instructor chooses to downgrade:

- Submit renewal with active practice
- OEMS will evaluate and trigger another form
- The applicant will complete the form to state which level they wish to downgrade to

Medic License Renewal for 3/31/2023

Georgia Medic Renewal application now available, October 1st – March 31st

- Continuing Education (CE) must be entered into Education Report into LMS
- Must upload BCLS and ACLS (if applicable) cards
- \$75.00
- \$2.75 credit card charge

Agency-Indicate Medics for Renewal Payments application now open

- Application will close on February 15th
- **Georgia Medic Renewal – Agency Paid** application

CAH Training

- Remember that all medics renewing must complete the CAH training available on TRAIN Georgia before renewing.
- All provider numbers must be correct in TRAIN in order to receive credit

CAH Training

TRAIN Account reminder:

Ensure GA license numbers are correctly formatted when creating TRAIN accounts.

Letter must be capitalized.

License must have all zeros

Example- P012345 (one capital letter followed by 6 numbers)

Education

Richard Rhodes

Program Numbers

Number of Programs (by level) 187 Total EMS Initial Education Programs

- This does not account for satellite programs
- 172 EMR
- 164 EMT
- 121 AEMT
- 37 Paramedic

As noted, the above numbers do not account for satellite programs – so the actual number of locations is higher (more on this later)

Information is current as of 11/15/2022

Instructor Numbers

Number of Instructors

- 1,380 Total Instructors
- 576 EMS Instructors
- 18 I/C EMT
- 326 I/C AEMT
- 344 I/C Paramedic
- 115 Instructor with Paramedic Endorsement

Information is current as of 11/18/2022

Eligible Candidates

Ryan Hollingsworth

The Numbers Talk

As of 11/16/2022:

3,382 people are eligible to take the NREMT at some level but have not passed or taken the cognitive exam initially.

2,530 do not have an EMS state license of any kind

852 Providers are licensed at a lower level than they are eligible to test

The Numbers Talk

- EMR: 857 (362)
- EMT:1428 (2390)
 - EMT-R and finished EMT: 66 (currently licensed at EMT-R)
- AEMT: 217 (1111)
 - EMT to AEMT: 578 (currently licensed as EMT)
 - EMT-I to AEMT: 10 (currently licensed as EMT-I)
- PMDC: 28 (657)
 - AEMT/EMT-I to PMDC: 86 (currently licensed as AEMT or EMT-I)
 - EMT to PMDC: 112 (currently licensed as EMT)

Paramedic Bootcamp Update

- Instructor Trish Hotz put together a 48hr Paramedic Refresher course for the students that OEMST had identified from our student survey from July.
- The course was held at Albany Technical College Campus over three weeks in October. Students from all over the state traveled for the class.
- 24 students attended and 21 completed
- As of 11/16/22, Six (6) students have attempted with Three (3) passing on their next attempt.

MetroAtlanta

MetroAtlanta will be hosting a Remediation class in Region 3 in January, and we will be sending this out soon.

Consortium Involvement

- Directors and Training Officers should feel welcome to participate in the Consortium
- Items that are in review
 - Advanced Placement for non-EMS Healthcare (LPN, RN, MD, DO)
 - Re-designation criteria
 - Who can teach instructor courses and instructor CE

Upcoming Meetings/Trainings

Richard Rhodes

Upcoming Meetings/Trainings

EMSAC Quarterly Meeting – February 21, 2022, at 10:00am
(In person & Virtual)

EMSMDAC Quarterly Meeting – January 10, 2022 @ 10:00am (Virtual)

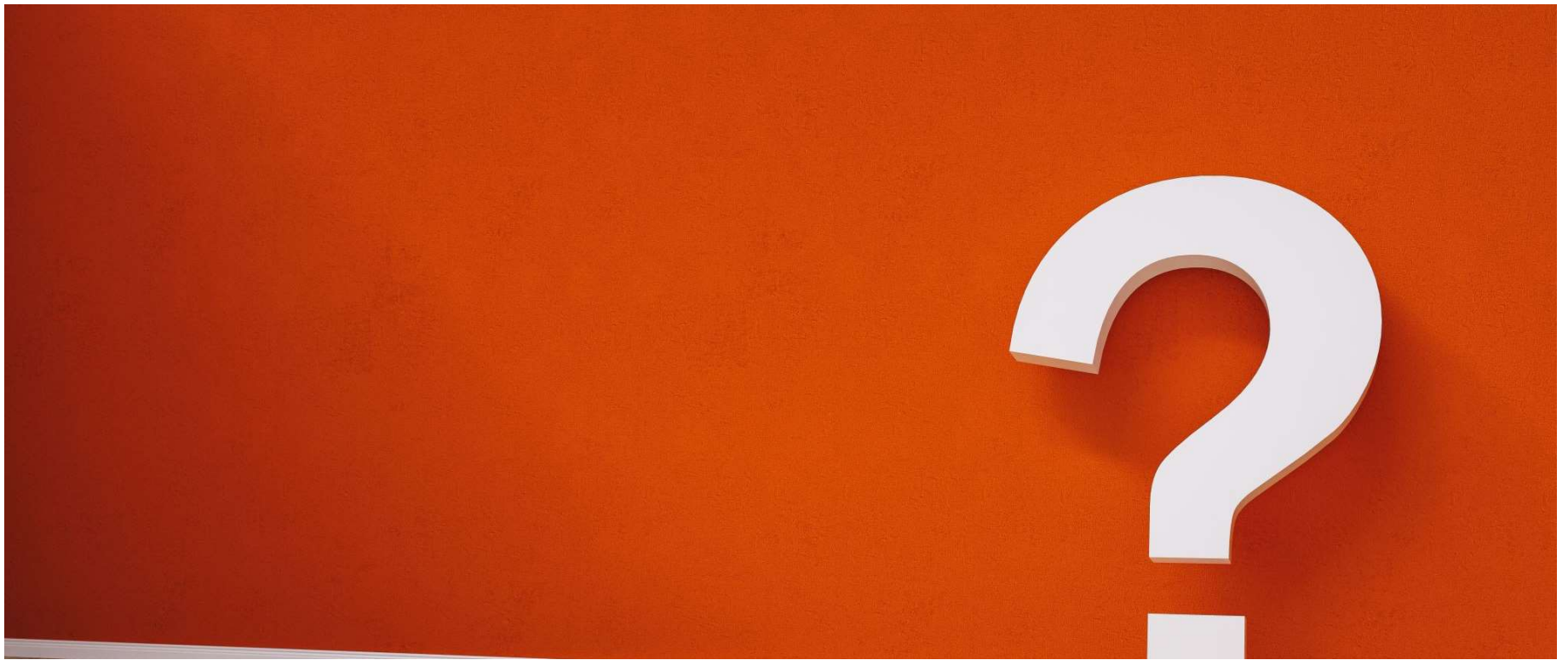
<https://dph.georgia.gov/EMS/public-notice-regional-and-statewide-meetings>

Note: OEMST Monthly Epi and Ops Update: 2nd Friday of each month

Regional Instructor Symposiums

- January 20th – Coastal Pines Technical College – Jessup
 - NREMT will be presenting virtually
- February 13th – Southern Crescent Technical College - Griffin
- March 3rd – Doctors Hospital – Augusta
 - The EMS Education Consortium will also be held this day from 10-12

Questions? And Open Discussion



Thank you for all that you do!

- From the Office of EMS and Trauma staff we wish you a Merry Christmas and a Happy New Year!
- Be Safe
- Watch for emails

