1	10A NCAC 14E	3.0310 is amended with changes as published in NCR 29:11, pp. 1290-1298 as follows:
2		
3	10A NCAC 14I	E .0310 EMERGENCY BACK-UP SERVICES
4	(a) Each clinic	shall have a written plan for the transfer of emergency cases from the clinic to a nearby hospital
5	when hospitaliza	ation becomes necessary.
6	(b) The clinic s	hall have procedures, personnel, and suitable equipment to handle medical emergencies which may
7	arise in connection with services provided by the clinic.	
8	(c) The clinic shall have a written agreement between the clinic and a [nearby] hospital to facilitate the transfer of	
9	patients who are in need of emergency care. A clinic that has documentation of its efforts to establish such a	
10	transfer agreement with a hospital that provides emergency services and has been unable to secure such an	
11	agreement shall be considered to be in compliance with this Rule.	
12	(d) The facility	<u>clinic</u> shall provide intervention for emergency situations. These provisions shall <u>include</u> : <u>include</u> :
13	but are not limit	ed to:
14	(1)	Basic basic cardio-pulmonary life support;
15	(2)	Emergency emergency protocols for:
16		(a) (A) Venous access supplies, administration of intravenous fluids;
17		(b) (B) Air way support and oxygen, establishing and maintaining airway support;
18		(C) oxygen administration;
19		(e) (D) utilizing a bag-valve-mask resuscitator Bag valve mask unit with oxygen reservoir,
20		reservoir; and
21		(d) (E) <u>utilizing a Suction suction</u> machine; <u>and</u>
22		(F) utilizing an automated external defibrillator;
23	(3)	Emergency emergency lighting available in the operating room; procedure room as set forth in
24		Rule .0206 of this Subchapter; and
25	(4)	Ultrasound ultrasound equipment.
26		
27	History Note:	Authority G.S. 14-45.1(a); [G.S. 90 21.83;] 143B-10; S.L. 2013-366 s.4(c);
28		Eff. February 1, 1976;
29		Readopted Eff. December 19, 1977;
30		Amended Eff. October 1, 2015; July 1, 1994; December 24, 1979.