

**AGREEMENT BETWEEN  
RUTHERFORD COUNTY  
AND  
CITY OF MURFREESBORO  
FOR THE CONDUCT AND COORDINATION  
OF AN EMERGENCY MEDICAL FIRST RESPONDER PROGRAM**

This Agreement and Statement of Policies and Procedures has been negotiated by and between the City of Murfreesboro Fire & Rescue Department (“MFRD”) and the Rutherford County Emergency Medical Service (“RCEMS”) to organize and coordinate the effective provision of emergency medical care and first responder services within the city limits of the City of Murfreesboro, Tennessee.

This Agreement is entered into this \_\_\_\_ day of \_\_\_\_\_, 2014, by and between the City of Murfreesboro (“City”), a public municipal corporation of the State of Tennessee acting on behalf of MFRD and Rutherford County (“County”), a public municipal corporation of the State of Tennessee, acting on behalf of RCEMS.

**WITNESSETH:**

**WHEREAS**, the parties hereto desire to enter into this Agreement for adoption of a first responder service in MFRD’s first-response area pursuant to the General Rules and Standards adopted by the Tennessee Department of Health, Division of Emergency Medical Services Board, under the authority of Tennessee Code Annotated § 68-140-501 et seq., and the Tennessee EMS Board Rules and Regulations, Chap. 1200-12-1-.01 et seq.; and

**WHEREAS**, this Agreement has been negotiated by and between the parties hereto to organize and coordinate the effective provision of emergency medical first-responder services pursuant to said authority; and

**WHEREAS**, the purpose of this Agreement is to compliment the emergency medical services provided by RCEMS within Murfreesboro’s city limits with a coordinated and high-quality first-response service to persons in need of emergency medical assistance; and

**WHEREAS**, RCEMS is a licensed ambulance service, is the Primary EMS Provider for Rutherford County, Tennessee and is the coordinator of first responder services within the County including the MFRD’s first-response area, which is contiguous with the territory embraced by the City’s boundaries and corporate limits and which is hereinafter referred to as the “City limits”;

**WHEREAS**, MFRD, as a municipal fire and rescue department established pursuant to the City’s Charter, is a legally recognized organization or service sanctioned to perform emergency management, public safety, firefighting, and rescue functions, and thereby eligible to operate a first responder service and participate in the Rutherford County’s EMS system; and

**WHEREAS**, the parties wish to revise and replace the agreement they entered into on December 18, 2002, governing the coordination of first responder services within the city limits of the City of Murfreesboro;

**NOW THEREFORE**, for and in consideration of the mutual covenants and promises contained and other good and valuable consideration, receipt of which is acknowledged by the parties hereto, the parties to this Agreement do hereby agree as follows:

**1. DISPATCH AND RESPONSE PROCEDURES**

**A. Dispatch.** The RCEMS Communications Center shall contact a dispatcher at the Murfreesboro Police/Fire Communications Center (“City dispatcher”) whenever the Communications Center receives an emergency call from a location within the City limits requesting assistance in connection with a priority medical emergency (as defined in “Exhibit A—Priority Medical Emergencies” attached hereto) and shall request that the City dispatcher dispatch a First Responder Unit to the scene of the medical emergency. The City dispatcher shall in turn direct the closest First Responder Unit to the scene. The Communications Center may request the dispatch of a First Responder Unit in response to other non-priority emergency medical calls when a Communications Center emergency medical dispatcher deems it appropriate under the circumstances.

The parties hereto agree that the RCEMS Communications Center should request the assistance of a First Responder Unit any time an emergency medical dispatcher believes that death or significant injury may be prevented with rapid response of a First Responder Unit. The Communications Center’s emergency medical dispatchers shall be responsible for prioritizing calls in accordance with Exhibit A and as is appropriate to address immediate time-critical and life-critical situations. RCEMS will provide a copy of Exhibit A to the Murfreesboro Police/Fire Communications Center to facilitate call priority and the proper dispatch of First Responder Units.

When the Murfreesboro Police/Fire Communications Center receives a call from a location within the City limits requesting emergency medical assistance, the City dispatcher shall immediately transfer the caller to the RCEMS Communications Center. In addition, if the caller is requesting assistance in connection with a matter that might reasonably be construed as a priority medical emergency, as defined in Exhibit A, the City dispatcher shall also dispatch a First Responder Unit to the scene of the medical emergency without waiting for the Communications Center to request that a First Responder Unit be sent. The City dispatcher shall inform that emergency medical dispatcher at the Communications Center that a First Responder Unit is being dispatched. In addition, the City dispatcher shall remain a party to the transferred call as the City dispatcher may need to pass on additional information obtained by the emergency medical dispatcher to the First Responder Unit. If RCEMS does not need the assistance of a First Responder Unit, the emergency medical dispatcher may cancel the dispatched unit, in which case the First Responder Unit shall proceed in accordance with Section 1.B of this Agreement. MFRD and RCEMS shall jointly develop guidance to assist City dispatchers in determining whether a caller is seeking assistance in connection with a priority medical emergency.

**B. Response.** MFRD will provide first-responder services within the City limits twenty-four (24) hours a day, seven (7) days per week. MFRD shall notify RCEMS and the RCEMS Communications Center if at any time MFRD is not available or staffed for emergency medical response.

MFRD shall respond when dispatched to a location within the City limits. Upon arriving on scene, a First Responder Unit shall render emergency medical care in accordance with the protocols established by RCEMS until the arrival of RCEMS or as directed by RCEMS personnel on scene.

The First Responder Unit shall provide status updates to and seek direction from the Communications Center on the RCEMS communications channel both en route and upon arriving on scene. If an emergency medical dispatcher cancels the First Responder Unit prior to its arrival on scene, the Unit should cancel its response, even if a RCEMS ambulance is not yet on the scene. If an emergency medical dispatcher cancels the First Responder Unit as the Unit is arriving on scene, the First Responder Unit shall advise the dispatcher that the Unit is already on scene and proceed to the patient.

## **2. DESIGNATION OF FIRST RESPONDER SERVICE VEHICLE AND PERSONNEL**

MFRD will designate specific vehicles for emergency medical care, and will provide RCEMS and the RCEMS Communications Center with an up-to-date roster identifying all MFRD vehicles designated for emergency medical care, the location and unit number identification for such vehicles and the names of all MFRD personnel authorized to operate as first responders.

## **3. ON-SCENE ACTIONS; PROTOCOLS**

Whenever the vehicles and response units within the service area are insufficient to render the services required, additional sources may be sought to provide for emergency response.

Upon arrival at the scene, MFRD units shall be parked to minimize obstruction and to enhance access to the patient by the ambulance unit. MFRD personnel may assist in removing needed equipment from the ambulance. If requested by RCEMS personnel, MFRD personnel may accompany the ambulance crew and support patient care during patient transport. In situations demanding response to the scene of violence or criminal activity, First Response and EMS units shall coordinate adequate law enforcement presence at the scene prior to or at the time of arrival.

MFRD shall operate all first responder calls pursuant to RCEMS protocols adopted and implemented under the authority of RCEMS's medical director. RCEMS shall provide one copy of such protocols to MFRD, and shall provide MFRD with any revisions to such orders and protocols in a timely manner. The current version of all protocols shall be kept on file at the administrative offices of both RCEMS and MFRD.

RCEMS and MFRD shall meet with RCEMS's medical director at least once every twelve (12) months to review and, where warranted by local clinical evidence, revise the protocols applicable to MFRD personnel.

#### **4. PATIENT SURVEYS AND MEDICAL CARE**

Upon arriving at the scene, MFRD's first responders will conduct an initial patient primary and secondary survey. If a call appears to be a false call or an accident without personal injuries, the First Responder unit shall notify the appropriate responding agency through the RCEMS Communications Center. The RCEMS Communications Center dispatcher or ambulance crew shall make the decision to terminate ambulance response.

This information will be conveyed directly to the responding ambulance unit or through the RCEMS Communications Center. MFRD will brief the ambulance crew upon their arrival regarding the nature of the patient presentation. First Responders will record the patient's name, age, chief complaint, vital signs, medical history, current medications, and further relevant medical information to give to the ambulance crew. First Responders will record all such information either electronically and/or on the RCEMS/MFRD First Responder Patient Care Form.

#### **5. CERTIFICATION OF PERSONNEL**

MFRD shall provide personnel on each first responder unit who are certified or licensed as an Emergency Medical Responder ("EMR") (or First Responder, through December 31, 2016), Emergency Medical Technician ("EMT") (or EMT-Basic through December 31, 2016), Advanced EMT ("AEMT") (or EMT-IV through December 31, 2016), or Paramedic in Tennessee. All MFRD first responder personnel will be certified or licensed by the Tennessee Department of Health, Division of Emergency Medical Services to at least the First Responder/EMR level.

In addition, MFRD personnel licensed as an EMT-IV, AEMT, or Paramedic must complete a credentialing program established and administered by RCEMS in order to perform medical services beyond the scope of practice for First Responders/Emergency Medical Responders. Once an MFRD employee who holds an EMT-IV, AEMT or Paramedic license completes the credentialing program, that individual will be able to practice as an EMT First Responder under protocols consistent with evidence-based guidelines for pre-hospital care, documented community needs, and the skill level of MFRD personnel. MFRD personnel licensed as an EMT-IV, AEMT, or Paramedic will be required to complete the credentialing program every two (2) years to continue to practice as an EMT First Responder.

MFRD will maintain member personnel files that contain current evidence of member certifications, in-service training documentation, and health records; the City of Murfreesboro Human Resources Department maintains all sex offender and adult/elder abuse "registry checks" for MFRD personnel as required under Tenn.Code Ann. § 63-1-149. MFRD will perform the required "registry checks" before hiring any person who would be providing direct patient care,

and before designating an existing employee as a person responsible for providing such services.

MFRD will provide RCEMS with a complete and current roster of personnel licensed to provide medical care and further agree to supply RCEMS an updated roster each time it is published. Copies of member state medical certificates will be supplied to RCEMS and updated as member certifications change.

## **6. MEDICAL EQUIPMENT**

MFRD shall provide minimum equipment and supplies as shall be required by Chapter 1200-12-1 General Rules, Tennessee Department of Health, Division of Emergency Medical Services, relating to First Responder Services, and as may be specified by RCEMS and its Medical Director. RCEMS will provide a first responder unit with replacements for the following disposable items on an item-by-item basis when such items have been used by the first responder unit in providing care: (i) all resuscitative and airway management devices; (ii) splints; (iii) cervical collars; and (iv) other patient handling equipment used during patient transport. RCEMS and MFRD may mutually agree on the replacement of other equipment and supplies as circumstances require. Each party shall attempt to recover and secure equipment for return to the appropriate service either at the scene or upon the patient's arrival at the medical facility.

## **7. COMMUNICATIONS**

Two-way radio communications will be maintained between MFRD and RCEMS on RCEMS's radio frequency. Each agency shall execute a frequency agreement for this purpose. All radio communications shall be in "plain English," without the use of "10-Codes," in accordance with National Incident Management System (NIMS) standards. The responding first responder unit will notify the RCEMS Communications Center upon responding to dispatch, upon arriving on scene, and returning to service. The RCEMS Communications Center shall record the times of receipt of call, dispatch, arrival on scene, and return-to-service.

Upon arriving at the scene, the first responder unit shall notify the RCEMS Communications Center and verify:

- A. The number of patients;
- B. The nature of the emergency and severity of the situation;
- C. The need for rescue and additional resources; and
- D. Any on-scene hazards.

If a call appears to be a false call or an accident without personal injuries, the first responder unit shall notify the appropriate responding agency through the RCEMS Communications Center. The RCEMS Communications Center dispatcher or ambulance crew shall make the decision as to whether to terminate ambulance response.

At the scene of a fatality or upon any delay at the scene of a possible dead-on-arrival where resuscitative effort may not be initiated, MFRD shall notify the dispatcher, await arrival of

the ambulance, and secure the scene following orders of the law enforcement officer, coroner, or medical examiner investigator.

## 8. RECORDS

The following information shall be recorded on each incident, to be retained in the service log or file:

- A. Date;
- B. Time of Dispatch;
- C. Time of Arrival at Scene;
- D. Time Back-In-Service;
- E. Location of Incident;
- F. Type of Incident;
- G. Name of MFRD personnel who provided primary patient care; and
- H. Patient Care Information

MFRD personnel shall complete a patient survey form for each incident, and verbally report all relevant information to RCEMS personnel at the scene. Any information obtained from medication bottles, medical alert tags, or witnesses to the incident shall be referred to the ambulance crew. Where CPR is initiated or bystander CPR has been performed, the officer-in-charge should attempt to record the names of rescuers who had patient contact.

MFRD shall maintain a service log and a copy of every patient survey on file at the Murfreesboro Fire & Rescue MFRD administrative office. Such records, including copies of patient surveys, shall be made available upon request to RCEMS's Quality Assurance Officer.

Pursuant to Tenn.Code Ann. § 10-7-504, all patient information and records obtained and maintained by the MFRD shall be treated as confidential and shall not be disclosed to or made open for inspection by members of the public. *Both parties acknowledge that MFRD is not a "covered entity" for purposes of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and, therefore, not subject to HIPAA regulations. As a matter of practice, however, MFRD will comply with those principles pertaining to the non-disclosure of patient information set forth in the HIPAA Privacy Rule and in RCEMS's HIPAA Policy and agrees not to release any patient information or records except as required or allowed under applicable state or federal law. RCEMS shall be responsible for providing MFRD with a current copy of RCEMS's HIPAA Policy.*

## 9. INCIDENT COMMAND

It is understood and agreed by the parties hereto that the National Incident Management System (NIMS) and Incident Command will be used on all emergency scenes. In accordance with recognized "Unified Command" procedures, RCEMS shall be in charge of medical command on any emergency scene where patient care is being rendered and shall be responsible for treatment of patients. MFRD, through the Chief of the Murfreesboro Fire & Rescue

Department (“MFRD Chief”) or the Chief’s designee, shall have control of the scene command with respect to, but not limited to, incident mitigation, managing traffic, scene safety, and safe access to the scene.

## **10. INFECTION CONTROL**

MFRD agrees to have in place a working exposure-control plan for blood-borne pathogens in accordance with OSHA CFR 1910.1030. RCEMS will assist MFRD in complying with the standards for the protection of its members where possible. A plan will be in place for all first responders, regardless of whether or not they are compensated. A copy of the plan will be supplied to RCEMS, and adherence to the plan will be part of the review process done under the Quality Assurance Program. Each member of the First Responder agency will receive yearly update training on the exposure control plan as well as OSHA CFR 1910.1030.

## **11. IN-SERVICE EDUCATION**

RCEMS and MFRD shall establish and operate in-service education programs for the continuing education, re-certification, and credentialing of MFRD’s first responders. The first responder in-service program will be a working program and not merely an action plan. RCEMS will assist in the first responder’s in-service program for quality and compliance. RCEMS will assist in training instructors or will provide any instructors as necessary to ensure MFRD meets at least the minimum requirements to keep employee’s licensure and certifications current.

## **12. QUALITY ASSURANCE PROGRAM AND ANNUAL AUDIT**

To affect Quality Improvement and Competency standards, the first responder coordinator from RCEMS and/or a field supervisor may respond to calls for the purpose of evaluating responder skill levels. The evaluation of medical first responders is used to determine the need for training and improve deficiencies in skill levels in providing quality patient care.

The parties hereto agree that the parties will abide by the medical direction and protocols of the medical director.

## **13. MEDICAL OVERSIGHT**

The RCEMS Medical Director oversees all medical aspects of Rutherford County’s EMS system, including all first-responder services. RCEMS’s Medical Director must approve all EMRs, EMT-IVs/AEMTs, and Paramedics for clinical practice before they can render any patient care EMRs or EMT First Responders. No individual, regardless of whether the individual has been licensed or certified by the Tennessee Department of Health, Division of Emergency Medical Services, may render patient care as part of the MFRD’s first responder service unless the individual has been approved by the Medical Director and credentialed in accordance with the provisions of this Agreement.

## **14. REPORTING, INVESTIGATION AND RESOLUTION OF CLINICAL INCIDENTS**

**A. Scope of Policy.** The policy set forth in this section shall apply to all clinical issues and incidents involving alleged or possible violations of the applicable clinical standard of care by MFRD personnel approved for practice as a First Responder/EMR or EMT First Responder. This policy applies to clinical issues only. Any non-clinical issues involving MFRD personnel shall be reported to the MFRD Chief for investigation and resolution by the Chief or the Chief's designee. RCEMS may limit, suspend, or terminate the approved scope of practice of any MFRD personnel only where the RCEMS Director finds that an individual's act or omission violates the applicable clinical standard of care, is prohibited by Tenn.Code Ann. § 68-140-311, or constitutes unethical conduct as defined in Tenn.Comp.R. & Regs. Ch. 1200-12-01-.17 (hereinafter "Clinical Standard of Care Violation"). Where an MFRD employee's alleged conduct, if true, would constitute a violation of either Tenn.Code Ann. § 68-140-311 or Tenn.Comp.R. & Regs. Ch. 1200-12-01-.17 but does not raise any clinical concerns (e.g., theft of a patient's property), the MFRD and RCEMS may choose to conduct a joint investigation of the incident or, alternatively, choose to assign responsibility for the investigation to either agency. In the event a single agency is assigned responsibility for the investigation, the other agency shall be provided with a draft copy of the investigating agency's findings and proposed course of action at least seventy-two (72) hours before the findings and proposed course of action become final.

**B. Reporting.** Complaints made by RCEMS personnel alleging a Clinical Standard of Care Violation by an MFRD employee should be made to the RCEMS Director of Education/Quality Assurance in accordance with RCEMS's internal policy for reporting clinical incidents. Complaints made by MFRD employees alleging a Clinical Standard of Care Violation by RCEMS employees are to be made to the MFRD Chief or the Chief's designee, who shall forward such complaint to the RCEMS Director of Education/Quality Assurance.

**C. Incident Levels.** All alleged Clinical Standard of Care Violations shall be classified as follows for purposes of reporting, investigation, and resolution:

1. Level I ("Minor") Incidents involve a minor deviation from established policy or protocol in which the action or inaction is unlikely to result in harm to a patient.

2. Level II ("Moderate") Incidents involve either: (i) a deviation from established policy or protocol in which such action or inaction may result in harm to a patient; or (ii) multiple minor errors in a single incident or repeated minor errors within a twelve-month period.

3. Level III ("Major") Incidents involve either: (i) a deviation from established policy or protocol in which such action or inaction is likely to cause or did cause harm to a patient; (ii) an alleged incident involving physical or emotional abuse of a patient; or (iii) multiple minor errors in a single incident or repeated moderate errors within a twelve-month period.

All Level II and Level III incidents will be reported to the Medical Director. In addition, if the RCEMS Medical Director and/or RCEMS Director of Education/Quality Assurance determines that the alleged incident violates a state law, rule, or regulation, RCEMS shall report the incident to the State Division of Emergency Medical Services.

#### **D. Responsibilities.**

1. RCEMS Director of Education/Quality Assurance is responsible for: (i) Receiving, investigating and evaluating all alleged Clinical Standard of Care Violations; (ii) Notifying the EMS Director, EMS Medical Director, County Attorney and the MFRD Chief or the Chief's designee of the investigation; notice to the MFRD Chief or the Chief's designee shall be sent via email within forty-eight (48) hours of receiving a complaint concerning a MFRD employee; (iii) Suspending or limiting an MFRD employee's right to or scope of practice pending the outcome of an investigation; (iv) Notifying the State Division of Emergency Medical Services when an MFRD employee certified or licensed as an EMR, EMT-IV/AEMT, or Paramedic has violated any state law, rule or regulation; (v) Recommending a course of action to the EMS Director and providing a copy of such recommendation to the MFRD Chief or the Chief's designee; and (vi) Determining, when appropriate, a performance improvement plan for the individual against whom a complaint was filed and evaluating upon completion of the plan.

2. The RCEMS Medical Director is responsible for: (i) Reviewing investigations, including all alleged Level II and Level III violations; (ii) Giving medical opinions pertinent to the investigation; and (iii) Determining the final action to be taken with respect to any established Level II or Level III violation.

3. The RCEMS Director is responsible for: (i) Evaluating the incident or issue; (ii) Determining the final action to be taken with respect to any established Level I violation; and (iii) Communicating the final action on any established violation (Level I, II, or III) in writing to the MFRD Chief or the Chief's designee.

4. Regardless of whether an investigation concerns the actions of an RCEMS employee or an MFRD employee, the MFRD Chief or the Chief's designee is responsible for: (i) Providing RCEMS with access to all information relevant to an alleged violation; (ii) Making MFRD personnel available for interviewing by the RCEMS Director of Education/Quality Assurance; and (iii) Participating in the investigation as requested by the RCEMS Director of Education/Quality Assurance or RCEMS Director.

#### **E. MFRD Participation in the Investigation and Resolution of Clinical Incidents.**

1. MFRD employees interviewed as part of an investigation conducted by RCEMS shall be advised of their rights under federal and state law, including specifically their rights under *Garrity v. New Jersey*, 385 U.S. 493 (1967), at the beginning of the interview.

2. The City, by and through the MFRD Chief, the Chief's designee, and/or the City's legal counsel, shall have the right to be present at any interview of a City employee conducted by RCEMS. The City's right to participate in such interviews shall be limited to the assertion of City's rights pursuant to the U.S. or Tennessee Constitutions and the attorney-client privilege by the City's legal counsel. In addition, RCEMS shall provide the MFRD Chief or the Chief's designee with a copy of all investigative findings or reports, proposed courses of action, improvement plans, and final actions concerning an MFRD employee and the opportunity to comment on such findings, reports, proposed courses of action, and/or improvement plans. No

finding, report, course of action, or improvement plan made or proposed by the RCEMS Medical Director or RCEMS Director shall become final with respect to an MFRD employee (except suspending or limiting an MFRD employee's right to or scope of practice pending the outcome of an investigation) until the MFRD Chief or the Chief's designee has had seventy-two (72) hours to comment on the finding, report, proposed course of action, or improvement plan.

## **15. MALPRACTICE AND LIABILITY INSURANCE**

The City of Murfreesboro is self-insured for liability under the Tennessee Governmental Tort Liability Act and shall maintain sufficient reserves to cover claims up to the minimum limits set forth in T.C.A. § 29-20-403. Such coverage shall meet the requirements of Tenn.Comp.R. & Regs. Ch. 1200-12-01-.07 and shall extend to emergency care personnel and to the City itself.

## **16. TERMS AND AGREEMENT**

- a. This Agreement is by and between two independent agencies and is not intended to and shall not be construed to create a relationship of agent, servant, employee, or association.
- b. The parties shall not assign any rights or duties under this Agreement to a third party without the written consent of both parties.
- c. Violation of any terms within the articles of agreement shall be grounds for suspension until such violations have been corrected. Alleged violations of state law or rules shall be reported to the Regional EMS Consultant of the Department of Health.
- d. Either party may terminate this Agreement upon 30 days written notice to the other party.
- e. Both parties agree to comply with any applicable federal, state, and local laws and regulations.
- f. No waiver of any provision of this Agreement shall affect the right of any party thereafter to enforce such provision or to exercise any right or remedy available to it in the event of any other default.
- g. Neither party shall subscribe to any personnel policy which permits or allows for the promotion, demotion, employment, dismissal, or laying-off of any individual due to race, color, national origin, religion, age, sex, or which is in violation of applicable laws concerning the employment of individuals with disabilities.
- h. City and County policy prohibit discrimination on the basis of race, color, national origin, religion, age, sex, disability, or any other class of persons recognized by federal or state law in its hiring and employment practices, or in admission to, access to, or operation of its programs, services, and activities. Both parties certify and warrant that their performance under this Agreement will adhere at all times to and comply with these policies.

- i. Any notices required by or relating to any part of this Agreement shall be considered delivered and the service thereof completed when said notice is posted by registered mail or when delivered in person to the Party or its authorized representative indicated below:

Notices to the City shall be sent or delivered to:

City of Murfreesboro Administration  
ATNN: City Manager  
111 West Vine Street, Post Office Box 1139  
Murfreesboro, TN 37133-1139

Notices to the Contractor shall be sent to:

Rutherford County  
ATNN: County Mayor  
Rutherford County Courthouse, Room 101  
Murfreesboro, TN 37130

- j. The parties hereto agree that this is the complete and entire Agreement between the parties, and this Agreement may not be amended except in writing signed by both parties.

**17. EFFECTIVE DATE**

This Agreement shall not be binding upon the Parties until it is approved by the Murfreesboro City Council and the Rutherford County Commission and signed by the Mayor of the City of Murfreesboro and the Mayor of Rutherford County. When it has been so signed, this Agreement shall be effective as of the date first written above.

**IN WITNESS WHEREOF**, the parties have executed this agreement on the \_\_\_\_\_, \_\_\_\_\_.

**CITY OF MURFREESBORO**

**RUTHERFORD COUNTY**

\_\_\_\_\_  
Tommy Bragg, City Mayor

\_\_\_\_\_  
Ernest G. Burgess, County Mayor

APPROVED AS TO FORM:

\_\_\_\_\_  
Susan Emery McGannon, City Attorney

ATTEST:

\_\_\_\_\_  
Melissa Wright, City Recorder

SEAL

**EXHIBIT A**  
**PRIORITY MEDICAL EMERGENCIES REQUIRING DISPATCH OF**  
**MURFREESBORO FIRE & RESCUE DEPARTMENT FIRST RESPONDERS**

A “Priority Medical Emergency” means any problem or problems deemed to be of immediate threat to loss of life or limb, and shall include, without limitation, the following medical problems and conditions:

- **All Airway, Respiratory and Circulation Problems, including:**
  - Cardiac arrest;
  - Chest pain;
  - Shortness of breath;
  - Stroke, including head pain possibly indicative of stroke;
  - Respiratory distress and arrest;
  - Choking; and
  - Smoke inhalation.
- **Altered Mental State, included but not limited to:**
  - Seizure;
  - Fainting; and
  - Unresponsive.
- **Severe Allergic Reaction with shortness of breath or known history of allergy;**
- **Heat Exposure (hyperthermia) and Cold Exposure (hypothermia);**
- **Diabetic Emergencies, where patient has a known history of diabetes or hypoglycemia and is disoriented, combative or unresponsive;**
- **Severe Physical Injuries, including:**
  - Severe bleeding;
  - Severe burns;
  - Head injuries;
  - Penetrating/Crushing chest injuries;
  - Shock, as indicated by pale skin, rapid pulse, increased respirations, sweating, trauma, and/or severe loss of blood
  - Neck or back injuries;
  - Gunshot wounds;
  - Amputation or near amputation;
  - Drowning or near drowning;
  - Industrial and environmental emergencies;
  - Mass casualty incidents; and
  - Motor vehicle accident-related injuries;
- **Childbirth.**
- **Attempted Suicide**

Regardless of the type of call, First Responder Units will not be dispatched to facilities with skilled nursing staff unless requested by Rutherford County EMS. Such facilities include: nursing homes; assisted living facilities; dialysis centers; medical clinics; and doctors’ offices.