

**Title 19—DEPARTMENT OF
HEALTH AND SENIOR SERVICES
Division 30—Division of
Regulation and Licensure
Chapter 40—Comprehensive
Emergency Medical Services Systems Regulations**

PROPOSED AMENDMENT

19 CSR 30-40.760 Standards for ST-Segment Elevation Myocardial Infarction (STEMI) Center Designation. The department is amending sections (1), (3) and (4) and renumbering through section (4).

PURPOSE: This amendment changes continuing education hours to be consistent with required continuing education requirements by national designating or verifying bodies of STEMI centers, removes continuing medical education requirements for physicians who are emergency medicine board certified or board eligible through the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine and who are practicing in the emergency department of a STEMI center, removes requirements relating to the operation or construction of a helipad at STEMI centers and adds an option for STEMI centers to enter STEMI data into a national data registry or databank that will allow the STEMI center to perform its performance improvement and patient safety program requirements.

AGENCY NOTE:

I-R, II-R, III-R, or IV-R after a standard indicates a requirement for level I, II, III, or IV STEMI centers respectively.

I-IH, II-IH, III-IH, or IV-IH after a standard indicates an in-house requirement for level I, II, III, or IV STEMI centers respectively.

I-IA, II-IA, III-IA, or IV-IA indicates an immediately available requirement for level I, II, III, or IV STEMI centers respectively.

I-PA, II-PA, III-PA, or IV-PA indicates a promptly available requirement for level I, II, III, or IV STEMI centers respectively.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome and expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) General Standards for STEMI Center Designation.

(G) The STEMI center shall appoint a physician to serve as the STEMI medical director with appropriate qualifications, experience, and training. A STEMI medical director shall be appointed at all times with no lapses. (I-R, II-R, III-R, IV-R)

1. Level I and II STEMI center medical directors shall be cardiologists or interventional cardiologists. It is recommended that the cardiologist or interventional cardiologist be board-certified or board-admissible in interventional cardiology or cardiology. (I-R, II-R)

2. Level III and IV STEMI center medical directors shall be physicians. A board-certified or board-admissible physician is recommended. (III-R, IV-R)

3. The STEMI center shall have a job description and organization chart depicting the relationship between the STEMI medical director and other services. (I-R, II-R, III-R, IV-R)

4. Level I and II STEMI medical directors are recommended to be members of the catheterization lab team call roster. (I-R, II-R)

5. The STEMI medical director shall meet the continuing medical education (CME) requirements as described in section (4) of this rule. (I-R[, II-R, III-R, IV-R])

6. The STEMI medical director shall be responsible for oversight of the education and training of the medical and clinical staff in STEMI care. This includes a review of the appropriateness of the education and training for the practitioner's level of responsibility. (I-R, II-R, III-R, IV-R)

7. Level I STEMI medical directors shall participate in the STEMI center's research and publication projects. (I-R)

(H) The STEMI center shall have a STEMI program coordinator/manager who is a registered nurse, other clinical staff, or qualified individual. The STEMI center shall have a STEMI program coordinator/manager at all times with no lapses. (I-R, II-R, III-R, IV-R)

1. The STEMI center shall have a job description and organization chart depicting the relationship between the STEMI program coordinator/manager and other services. (I-R, II-R, III-R, IV-R)

2. The STEMI coordinator/manager shall meet continuing education requirements as described in section (4) of this rule. (I-R[, II-R, III-R, IV-R])

3. The STEMI program coordinator/manager shall participate in the formal STEMI center performance improvement and patient safety program. (I-R, II-R, III-R, IV-R)

(R) The STEMI center shall have a helicopter landing area. (I-R, II-R, III-R, IV-R) [*Level I, II, and III STEMI centers shall have a lighted designated helicopter landing area at the STEMI center to accommodate incoming medical helicopters. (I-R, II-R, III-R)*]

1. The landing area shall serve solely as the receiving and take-off area for medical helicopters and shall be cordoned off at all times from the general public to assure its continual availability and safe operation. (I-R, II-R, III-R)

2. The landing area shall be on the hospital premises no more than three (3) minutes from the emergency room. (I-R, II-R, III-R)

(S) Level IV STEMI centers shall have a lighted designated helicopter landing area that meets the following requirements:

1. Accommodates incoming medical helicopters; (IV-R)

2. Serves as the receiving and take-off area for medical helicopters; (IV-R)

3. Cordoned off from the general public when in use; (IV-R)

4. Managed to assure its continual availability and safe operation; and (IV-R)

5. *It is recommended the landing area shall be no more than three (3) minutes from the emergency department. (IV-R)*

(T) **(S)** STEMI centers shall enter data into [*the Missouri*] a STEMI registry *as follows:*

1. [*All*] STEMI centers shall submit data into the department's Missouri STEMI registry on each STEMI patient who is admitted to the STEMI center, transferred out of the STEMI center, or dies as a result of the STEMI (independent of hospital admission or hospital transfer status). The data required to be submitted into the Missouri STEMI registry by the STEMI centers is listed and explained in the document entitled "Time Critical Diagnosis ST-Segment Elevation Myocardial Infarction (STEMI) Center Registry Data Elements" dated March 1, 2012, which is incorporated by reference in this rule and is available at the Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, MO 65102-0570 or on the department's website at www.health.mo.gov. This rule does not incorporate any subsequent amendments or additions. [*;* (I-R, II-R, III-R, IV-R)]

2] The data [*required in paragraph (1)(T)1. above*] shall be submitted electronically into the Missouri STEMI registry via the department's website at www.health.mo.gov; **or** (I-R, II-R, III-R, IV-R)

2. STEMI centers shall submit data into a national data registry or data bank capable of being used by the STEMI center to perform its ongoing performance improvement and patient safety program requirements for its STEMI patients. STEMI centers shall submit data for each data element included in the national data registry or data bank's data system; (I-R, II-R, III-R, IV-R)

3. This data required in paragraph (1)(T)1. **and 2.** above shall be submitted electronically into the [*Missouri*] STEMI registry on at least a quarterly basis for that calendar year. STEMI centers have ninety (90) days after the quarter ends to submit the data electronically into the [*Missouri*] STEMI registry; (I-R, II-R, III-R, IV-R)

4. The data submitted by the STEMI centers shall be complete and current; and (I-R, II-R, III-R, IV-R)

5. The data submitted by the STEMI centers shall be managed in compliance with the confidentiality requirements and procedures contained in section 192.067, RSMo. (I-R, II-R, III-R, IV-R)

[(U)] T. A STEMI center shall maintain a diversion protocol for the STEMI center that is designed to allow best resource management within a given area. The STEMI center shall create criteria for diversion in this diversion protocol and shall detail a performance improvement and patient safety process in the diversion protocol to review and validate the criteria for diversion created by the STEMI center. The STEMI center shall also collect, document, and maintain diversion information that includes at least the date, length of time, and reason for diversion. This diversion information shall be readily retrievable by the STEMI center during a review by the department and shall be kept by the STEMI center for a period of five (5) years. (I-R, II-R, III-R, IV-R)

(3) Standards for Hospital Resources and Capabilities for STEMI Center Designation.

(A) The STEMI center shall meet emergency department standards listed below.

1. The emergency department staffing shall meet the following requirements:

A. The emergency department in the STEMI center shall provide immediate and appropriate care of the STEMI patient; (I-R, II-R, III-R, IV-R)

B. A level I STEMI center shall have a medical director of the emergency department who shall be a board-certified or board-admissible physician in emergency medicine by the American Board of Medical Specialties, the American Osteopathic Association Board of Osteopathic Specialists, or the Royal College of Physicians and Surgeons of Canada; (I-R)

C. A level II STEMI center shall have a medical director of the emergency department who shall be a board-certified or board-admissible physician; (II-R)

D. A level III and IV STEMI center shall have a medical director of the emergency department who is recommended to be a board-certified or board-admissible physician; (III-R, IV-R)

E. There shall be an emergency department physician credentialed for STEMI care covering the emergency department twenty-four (24) hours a day, seven (7) days a week; (I-R/IH, II-R/IH, III-R/IH, IV-R/IA)

F. The emergency department physician who provides coverage shall be current in continuing medical education (CME) in the area of cardiovascular disease as set forth in section (4) of this rule; (I-R[, II-R, III-R, IV-R])

G. There shall be a written policy defining the organizational relationship of the emergency department physicians to other physician members of the STEMI team; (I-R, II-R, III-R, IV-R)

H. Registered nurses in the emergency department shall be current in continuing education requirements as set forth in section (4) of this rule; (I-R [, II-R, III-R, IV-R])

I. At a minimum, all registered nurses assigned to the emergency department shall be determined to be credentialed in the care of the STEMI patient by the STEMI center within one (1) year of assignment in the emergency department, and these registered nurses shall remain current in continuing education requirements as set forth in section (4) of this rule; and (I-R, II-R, III-R, IV-R)

J. The emergency department in STEMI centers shall have written care protocols for identification, triage, and treatment of acute STEMI patients that are available to emergency department personnel, reviewed annually, and revised as needed. (I-R, II-R, III-R, IV-R)

2. Nursing documentation for the STEMI patient shall be on a STEMI flow sheet approved by the STEMI medical director and the STEMI program manager/coordinator. (I-R, II-R, III-R, IV-R)

3. The emergency department shall have at least the following equipment for resuscitation and life support available to the unit:

A. Airway control and ventilation equipment including:

(I) Laryngoscopes; (I-R, II-R, III-R, IV-R)

(II) Endotracheal tubes; (I-R, II-R, III-R, IV-R)

(III) Bag-mask resuscitator; (I-R, II-R, III-R, IV-R)

(IV) Sources of oxygen; and (I-R, II-R, III-R, IV-R)

(V) Mechanical ventilator; (I-R, II-R, III-R)

- B. Suction devices; (I-R, II-R, III-R, IV-R)
 - C. Electrocardiograph, cardiac monitor, and defibrillator; (I-R, II-R, III-R, IV-R)
 - D. Central line insertion equipment; (I-R, II-R, III-R)
 - E. All standard intravenous fluids and administration devices including intravenous catheters and intraosseous devices; (I-R, II-R, III-R, IV-R)
 - F. Drugs and supplies necessary for STEMI emergency care; (I-R, II-R, III-R, IV-R)
 - G. Two- (2-) way communication link with emergency medical service (EMS) vehicles; (I-R, II-R, III-R, IV-R)
 - H. Equipment necessary to communicate with emergency medical services regarding pre-hospital ECG STEMI findings; (I-R, II-R, III-R, IV-R)
 - I. End-tidal carbon dioxide monitor; (I-R, II-R, III-R, IV-R)
 - J. Temperature control devices for patient and resuscitation fluids; (I-R, II-R, III-R, IV-R)
 - K. External pacemaker; and (I-R, II-R, III-R, IV-R)
 - L. Transvenous pacemaker. (I-R/IA, II-R/IA, III-R/IA)
4. The STEMI center emergency department shall maintain all equipment according to the hospital preventive maintenance schedule and document when the equipment is checked. (I-R, II-R, III-R, IV-R)
- (D) The STEMI center shall have an intermediate care unit (e.g., step down unit). (I-R, II-R, III-R)
1. The STEMI center shall have a designated medical director for the STEMI center intermediate care unit who has access to a physician knowledgeable in STEMI care and who meets the STEMI call roster continuing medical education requirements as set forth in section (4) of this rule. (I-R, II-R, III-R)
 2. The STEMI center intermediate care unit shall have a physician on duty or available twenty-four (24) hours a day, seven (7) days a week who is not the emergency department physician. This physician shall have access to a physician on the STEMI call roster. (I-R/IA, II-R/IA, III-R/IA)
 3. The STEMI center intermediate care unit shall have registered nurses and other essential personnel on duty twenty-four (24) hours a day, seven (7) days a week. (I-R, II-R, III-R)
 4. The STEMI center intermediate care unit registered nurses shall remain current in continuing education requirements as set forth in section (4) of this rule. (I-R, II-R, III-R)
 5. The STEMI centers shall annually credential registered nurses that work in the intermediate care unit. (I-R, II-R, III-R)
 6. The STEMI center intermediate care unit shall have written care protocols for identification and treatment of STEMI patients which are available to the cardiac unit personnel, reviewed annually, and revised as needed. (I-R, II-R, III-R)
 7. The STEMI center intermediate care unit shall have equipment to support the care and resuscitation of the STEMI patient that includes at least the following:
 - A. Airway control and ventilation equipment including:
 - (I) Laryngoscopes, endotracheal tubes of all sizes; (I-R, II-R, III-R)
 - (II) Bag-mask resuscitator and sources of oxygen; and (I-R, II-R, III-R)

(III) Suction devices; and (I-R, II-R, III-R)

B. Telemetry, electrocardiograph, cardiac monitor, and defibrillator; (I-R, II-R, III-R)

C. All standard intravenous fluids and administration devices and intravenous catheters; and (I-R, II-R, III-R)

D. Drugs and supplies necessary for emergency care. (I-R, II-R, III-R)

8. The STEMI center intermediate care unit shall maintain equipment according to the STEMI center's preventive maintenance schedule and document when the equipment is checked. (I-R, II-R, III-R)

(4) Continuing Medical Education (CME) and Continuing Education Standards for STEMI Center Designation.

(A) The STEMI center shall ensure that staff providing services to STEMI patients receive continued medical education and continuing education as set forth in section (4) of this rule and document this education for each staff member. The department shall allow up to one (1) year from the date of the STEMI center's initial STEMI center designation for STEMI center staff members to complete all of the required continuing medical education and/or continuing education requirements if the STEMI center staff documents that at least half of the required continuing medical education and continuing education hours have been completed for each STEMI center staff at the time of the on-site initial application review. The STEMI center shall submit documentation to the department within one (1) year of the initial designation date that all continued medical education and continuing education requirements for STEMI center staff members have been met in order to maintain the STEMI center's designation. (I-R[, II-R, III-R, IV-R])

(B) The STEMI call roster members shall complete the following continuing education requirements:

1. Core team members of the STEMI call roster in level I [*and level II*] STEMI centers shall document a minimum of [*ten (10)*] **eight (8)** hours every year of continuing education in the area of acute coronary syndrome. All other members of the STEMI call roster shall document a minimum of [*ten (10)*] **eight (8)** hours every year of continuing education in the area of cardiovascular disease, **except for physicians who are emergency medicine board certified or board eligible through the American Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency Medicine (AOBEM) and who are practicing in the emergency department.** This continuing education shall be reviewed by the STEMI center medical director for appropriateness to the practitioner's level of responsibility.[; *and*] (I-R[, II-R])

[2. *All members of the STEMI call roster in level III and level IV STEMI centers shall document a minimum of eight (8) hours every two (2) years of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed by the STEMI center medical director for appropriateness to the practitioner's level of responsibility. (III-R, IV-R)*]

(C) The STEMI center medical director shall complete the following continuing medical education requirements:

1. Level I [*and II*] STEMI medical directors shall document a minimum average of [*ten (10)*] **eight (8)** hours every year in the area of acute coronary syndrome.[:,] (I-R[, II-R])

2. *The level III and IV STEMI medical directors that are board-certified or board-eligible shall document a minimum average of eight (8) hours every other year of continuing medical education in the area of cardiovascular disease; and (III-R, IV-R)*

3. *The level III and IV STEMI medical directors who are not board-certified or board-eligible shall document:*

A. *A minimum average of ten (10) hours every two (2) years of continuing medical education in the area of cardiovascular disease with a focus on acute coronary syndrome; and (III-R, IV-R)*

B. *Attend one (1) national, regional, or state meeting every three (3) years in cardiovascular disease. Continuing medical education earned at these meetings can count toward the ten (10) continuing medical education hours required. (III-R, IV-R)*

(D) The STEMI center's STEMI program manager/coordinator shall complete the following continuing education requirements:

1. A level I STEMI program coordinator/manager shall complete and document the following:

A. A minimum average of [*ten (10)*] **eight (8)** hours every year of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the STEMI program manager's/coordinator's level of responsibility; and (I-R)

B. Attend one (1) national, regional, or state meeting every two (2) years focused on cardiovascular disease. If the national, regional, or state meeting provides continuing education, that continuing education may count towards the annual requirement[:]. (I-R)

2. *A level II STEMI program coordinator/manager shall complete and document the following:*

A. *A minimum average of eight (8) hours every year of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed by the STEMI center medical director for appropriateness to the STEMI program manager's/coordinator's level of responsibility; and (II-R)*

B. *Attend one (1) national, regional, or state meeting every three (3) years focused on cardiovascular disease. If the national, regional, or state meeting provides continuing education, that continuing education may count toward the annual requirement; and (II-R)*

3. *The level III and IV STEMI program coordinator/manager shall complete and document a minimum average of eight (8) hours every other year of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the STEMI program manager's/coordinator's level of responsibility. (III-R, IV-R)*

(E) STEMI center emergency department personnel shall complete the continuing education requirements for STEMI centers that are detailed below.

1. The emergency department physician(s) shall be current in cardiovascular continuing medical education. (I-R[, II-R, III-R, IV-R])

A. Emergency department physicians in level I [*and II*] STEMI centers shall complete and document a minimum average of [*four (4)*] **two (2) hours** every year of continuing medical education in the area of cardiovascular disease, **except for physicians who are emergency medicine board certified or board eligible through the American Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency Medicine (AOBEM) and who are practicing in the emergency department.** (I-R[, II-R])

B. Emergency department physicians in level III and IV STEMI centers shall complete and document a minimum average of six (6) hours every two (2) years of continuing medical education in the area of cardiovascular disease. (III-R, IV-R)

2. Registered nurses assigned to the emergency department shall complete the following requirements:

A. Registered nurses assigned to the emergency department at level I [*and II*] STEMI centers shall complete and document a minimum of [*four (4)*] **two (2) hours** of continuing education every year in the area of cardiovascular disease; **and** (I-R[, II-R])

[B. Registered nurses assigned to the emergency department at level III and IV STEMI centers shall complete and document a minimum of six (6) hours of continuing education every two (2) years in the area of cardiovascular disease; and (III-R, IV-R)

C] **B.** Registered nurses assigned to the emergency department at STEMI centers shall maintain core competencies in the care of the STEMI patient annually as determined by the STEMI center. Continuing education earned in training to maintain these competencies may count toward continuing education requirements. (I-R, II-R, III-R, IV-R)

(F) Registered nurses assigned to the intensive care unit who provide care to STEMI patients shall complete the following continuing education requirements:

1. Registered nurses in the intensive care unit shall complete and document a minimum of eight (8) hours every year of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the practitioner's level of responsibility. (I-R[, II-R]).

(G) Registered nurses and clinical staff assigned to the cardiac catheterization lab shall complete the following continuing education requirements:

1. Registered nurses and clinical staff shall complete and document a minimum of eight (8) hours of continuing education every year in the area of acute coronary syndrome. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the practitioner's level of responsibility. (I-R[, II-R])

(H) Registered nurses assigned to the intermediate care unit shall complete the following continuing education requirements:

1. Intermediate care unit registered nurses in level I [*and level II*] STEMI centers shall complete and document a minimum of eight (8) hours every year of continuing education in the area of cardiovascular disease. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the practitioner's level of responsibility. [*; and*] (I-R[, II-R])

[2. *Intermediate care unit registered nurses in level III STEMI centers shall complete and document a minimum of eight (8) hours of continuing education every two (2) years in the area of cardiovascular disease. This continuing education shall be reviewed for appropriateness by the STEMI center medical director to the practitioner's level of responsibility. (III-R)*]

AUTHORITY: section[s] 190.185, RSMo 2016 and section 190.241, RSMo Supp. 20[12]22. Original rule filed Nov. 15, 2012, effective June 30, 2013. Emergency amendment filed November 21, 2022, effective December 7, 2022, expires June 4, 2023.*

**Original authority: 190.185, RSMo 1973, amended 1989, 1993, 1995, 1998, 2002 and 190.241, RSMo 1987, amended 1998, 2008.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Nicole Gamm at Nicole.Gamm@health.mo.gov or Missouri Department of Health and Senior Services, P.O. Box 570, Jefferson City, Missouri 65101-0570. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*