



INDIAN RIVER COUNTY DEPARTMENT OF EMERGENCY SERVICES

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

APPLICANT NAME: National Health Transport, Inc. DATE: 5-26-2020

APPLICATION FEE: \$100.00 APPLIES TO INITIAL APPLICATIONS ONLY.

If payment applicable, make check payable to INDIAN RIVER COUNTY FIRE RESCUE.

- This is a new application; fee is attached.
- This is a renewal of our present COPCN.
- This is a renewal of our present COPCN with ownership or classification changes.

I. CLASSIFICATION OF CERTIFICATE REQUESTED

Please check applicable boxes and options.

Class A BLS ALS

Governmental entities that use advanced life support vehicles to conduct a pre-hospital EMS ALS/BLS service.

Class B BLS ALS

Agencies that provide non-emergency ambulance inter-facility medical transport at the ALS/BLS level.

Class C BLS ALS

Agencies that provide non-emergency ambulance inter-facility medical transports which require special clinical capabilities and require a physician's order.

Class D BLS ALS

Agencies that provide non-emergency ambulance medical transports limited to out of county transfers.

Class E Wheelchair Wheelchair/Stretcher Ambulatory Transport

Agencies that provide wheelchair transportation service only where said services are *paid* for in part or in whole either directly or indirectly with government funds.

Class E1 Wheelchair Wheelchair/Stretcher Ambulatory Transport

Agencies that provide wheelchair vehicle service where said services are *not paid* for in part or in whole either directly or indirectly with government funds.

II. COMPANY DETAILS

1. NAME OF AGENCY: National Health Transport, Inc.
MAILING ADDRESS: 2290 NW 110th Avenue
CITY Sweetwater COUNTY Miami-Dade
ZIP CODE: 33172 BUSINESS PHONE: (305) 636-5503

2. TYPE OF OWNERSHIP(i.e. Private, Government, Volunteer, Partnership, etc.):

Corporation (private)

3. MANAGER'S NAME: Mike Desouza
ADDRESS: 930 SE Central Parkway Stuart, FL 34995
PHONE #: 954-616-9000

4. PROVIDE NAME OF OWNER(S) OR LIST ALL OFFICERS, PARTNERS, DIRECTORS, AND SHAREHOLDERS, IF A CORPORATION (attach a separate sheet if necessary):

<u>NAME</u>	<u>ADDRESS</u>	<u>POSITION</u>
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Raul Rodriguez	2290 NW 110th Ave. Sweetwater, FL. 33172	President
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5. PROVIDE NAMES AND ADDRESSES OF AT LEAST THREE (3) LOCAL REFERENCES

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE #</u>
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Cory Richter	714 W Fischer Cir. Sebastian, FL 33958	772-633-3929
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Darlene Silverstein	1000 36th St Vero Beach, FL. 32960	772-567-4311
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Jen Michalowski	2150 SE Salerno Rd, Ste 108 Stuart, FL 34997	772-807-0415
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6. FUNDING SOURCE: Self

7. RATE SCHEDULE ATTACHED? YES NO N/A

8. LIST THE ADDRESS(es) OF YOUR BASE AND ALL SUB-STATIONS:

930 SE Central Parkway Stuart, FL 34995

III. COMMUNICATIONS INFORMATION:

TYPES OF RADIOS/EQUIPMENT:

Motorola

1. RADIO FREQUENCY (ies)
See attached contract with Highland Wireless

2. RADIO CALL NUMBER(s)
WQYV483

3. LIST ALL HOSPITALS AND OTHER EMERGENCY AGENCIES WITH WHICH YOU HAVE DIRECT RADIO COMMUNICATIONS:

FROM AMBULANCE
All via Med-10

FROM BASE STATION
All via phone



**Federal Communications Commission
Public Safety and Homeland Security Bureau**

RADIO STATION AUTHORIZATION

LICENSEE: NATIONAL HEALTH TRANSPORT INC

ATTN: RAUL RODRIGUEZ
NATIONAL HEALTH TRANSPORT INC
2950 NW 7TH AVE
MIAMI, FL 33127

Call Sign WQYV483	File Number 0007636881
Radio Service PW - Public Safety Pool, Conventional	
Regulatory Status PMRS	
Frequency Coordination Number PS20170200019	

FCC Registration Number (FRN): 0026157818

Grant Date 02-02-2017	Effective Date 02-02-2017	Expiration Date 02-02-2027	Print Date 02-03-2017
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STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Area of operation
Countywide: MIAMI-DADE, FL

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000463.00000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.00000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.02500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.16250000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.16250000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.18750000	MO	20		11K2F3E	100.000	100.000			02-02-2018

Conditions:

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV483

File Number: 0007636881

Print Date: 02-03-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000462.95000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000467.95000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000462.96250000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000467.96250000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000462.97500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000467.97500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000462.98750000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000467.98750000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.17500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.02500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.05000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.05000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.07500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.07500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.10000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.10000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.12500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.12500000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.15000000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.15000000	MO	20		11K2F3E	100.000	100.000			02-02-2018

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV483

File Number: 0007636881

Print Date: 02-03-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000463.1750000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.1875000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.0125000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.0125000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.0375000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.0375000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.0625000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.0625000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.0875000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.0875000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.1125000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.1125000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000463.1375000	MO	20		11K2F3E	100.000	100.000			02-02-2018
1	1	000468.1375000	MO	20		11K2F3E	100.000	100.000			02-02-2018

Control Points

Control Pt. No. 1

Address: 2950 NW 7th Ave

City: Miami **County:** MIAMI-DADE **State:** FL **Telephone Number:** (305)636-5510

Associated Call Signs

<NA>

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV483

File Number: 0007636881

Print Date: 02-03-2017

Waivers/Conditions:

NONE

Official Copy



**Federal Communications Commission
Public Safety and Homeland Security Bureau**

RADIO STATION AUTHORIZATION

LICENSEE: NATIONAL HEALTH TRANSPORT INC

ATTN: RAUL RODRIGUEZ
NATIONAL HEALTH TRANSPORT INC
2950 NW 7TH AVE
MIAMI, FL 33127

Call Sign WQYV706	File Number 0007636303
Radio Service PW - Public Safety Pool, Conventional	
Regulatory Status PMRS	
Frequency Coordination Number PS20170200025	

FCC Registration Number (FRN): 0026157818

Grant Date 02-06-2017	Effective Date 02-06-2017	Expiration Date 02-06-2027	Print Date 02-07-2017
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STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Area of operation
Countywide: BROWARD, FL

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000463.00000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.18750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.00000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.02500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.02500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.05000000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Conditions:

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV706

File Number: 0007636303

Print Date: 02-07-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000468.0500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1875000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0875000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0875000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1375000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV706

File Number: 0007636303

Print Date: 02-07-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000462.98750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.98750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.13750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.16250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.16250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.95000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.95000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.96250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.96250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.97500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.97500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.15000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.17500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.17500000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Control Points

Control Pt. No. 1

Address: 2950 NW 7th Ave

City: Miami County: MIAMI-DADE State: FL Telephone Number: (305)636-5510

Associated Call Signs

<NA>

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV706

File Number: 0007636303

Print Date: 02-07-2017

Waivers/Conditions:
NONE

Official Copy



**Federal Communications Commission
Public Safety and Homeland Security Bureau**

RADIO STATION AUTHORIZATION

LICENSEE: NATIONAL HEALTH TRANSPORT INC

ATTN: RAUL RODRIGUEZ
NATIONAL HEALTH TRANSPORT INC
2950 NW 7TH AVE
MIAMI, FL 33127

Call Sign WQYV762	File Number 0007636306
Radio Service PW - Public Safety Pool, Conventional	
Regulatory Status PMRS	
Frequency Coordination Number PS20170200029	

FCC Registration Number (FRN): 0026157818

Grant Date 02-06-2017	Effective Date 02-06-2017	Expiration Date 02-06-2027	Print Date 02-07-2017
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STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Area of operation
Countywide: MONROE, FL

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000463.1125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1625000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Conditions:

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Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV762

File Number: 0007636306

Print Date: 02-07-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000462.9500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.9500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.9625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.9625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.9750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0250000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.1875000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.1875000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0125000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0375000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.0625000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.0875000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV762

File Number: 0007636306

Print Date: 02-07-2017

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000468.08750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000462.98750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.98750000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000467.97500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.05000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.07500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
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1	1	000463.10000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000468.10000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.12500000	MO	20		11K2F3E	100.000	100.000			02-06-2018
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1	1	000468.15000000	MO	20		11K2F3E	100.000	100.000			02-06-2018
1	1	000463.17500000	MO	20		11K2F3E	100.000	100.000			02-06-2018

Control Points

Control Pt. No. 1

Address: 2950 NW 7th Ave

City: Miami County: MIAMI-DADE State: FL Telephone Number: (305)636-5510

Associated Call Signs

<NA>

Licensee Name: NATIONAL HEALTH TRANSPORT INC

Call Sign: WQYV762

File Number: 0007636306

Print Date: 02-07-2017

Waivers/Conditions:

NONE

Official Copy

IV. ADDITIONAL INFORMATION REQUIRED TO BE SUBMITTED WITH THIS APPLICATION:

RENEWAL APPLICANTS FOR CLASSES A-D NEED ONLY #'s 4 - 9

RENEWAL APPLICANTS FOR CLASSES E AND E-1 NEED ONLY #'s 6 – 9

- 1. Factual Statement indicating the public need and services, including studies supporting the demonstrated demand and feasibility for the proposed service(s) and deficiencies in existing services, and any other pertinent data you wish to be considered.
- 2. Factual statement of the proposed services to be provided, including type of service, hours and days of operation, market to be served, geographic areas to be serviced, and any other pertinent data you wish to be considered.
- 3. Factual Statement indicating the ability of the applicant to manage and provide the proposed services, including the management plan, maintenance facilities, insurance program, accounting system, system for handling complaints, system for handling accidents and injuries, system for providing the county monthly operating reports and any other pertinent data you wish to be considered.
4-5
- 4. Copy of Standard Operating Procedures.
- 5. Copy of Medical Protocols.
- 6. Copy of your insurance policy – must show coverage limits –
- 7. Vehicle Information. For each vehicle provide the following:
 - a. Make, Model, Year, Manufacturer
 - b. Mileage
 - c. VIN #
 - d. Tag Number
 - e. Passenger capacity (E/E1 classification)
 - f. Indicate ALS/BLS (A-D classification)
- 8. Personnel Roster. For each employee provide the following:
 - a. Name – Last, First and Middle Initial
 - b. Driver's License # (if commercial, specify class) & Expiration Date
ADDITIONAL INFO REQUIRED FOR A-D classifications
 - c. Emergency Medical Service Certification and # (EMT or Paramedic)
 - d. Expiration date of Certification
 - e. Whether or not has an Emergency Vehicle Operation Certificate.
- 9. Fee Schedule Incl: Service Type, Base Rate, Mileage, Waiting & Special Charges



NATIONAL HEALTH TRANSPORT

INDIAN RIVER COUNTY DEPARTMENT OF EMERGENCY SERVICES APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

1. Factual Statement indicating the public need and services, including studies supporting the demonstrated demand and feasibility for the proposed service(s) and deficiencies in existing services, and any other pertinent data you wish to be considered.

NHT has met with the local healthcare facilities and has been told that there are serious delays by the current provider. In a public hearing on October 1, 2019, the newest provider stated, "We believe that it is in the public's best interest for a competitive environment..." As the recent acquisition of two providers by an incumbent, the County is left with a void. With this addition, NHT will be poised to provide backup service to the current providers and additional resources in the event of a disaster.

2. Factual statement of the proposed services to be provided, including type of service, hours and days of operation, market to be served, geographic areas to be serviced, and any other pertinent data you wish to be considered.

NHT will be providing Advance Life Support and Basic Life Support non-emergency ambulance transportation. This service will operate 24 hours per day, 7 days per week. The intent is to serve the entire geographic Indian River County. NHT currently possesses a COPCN in neighboring Osceola County.

3. Factual Statement indicating the ability of the applicant to manage and provide the proposed services, including the management plan, maintenance facilities, insurance program, accounting system, system for handling complaints, system for handling accidents and injuries, system for providing the county monthly operating reports and any other pertinent data you wish to be considered.

NHT has been operating in Miami-Dade County for over 30 years. We have the experience, manpower, and systems in place today to handle the expansion into Indian River County. NHT currently operates in Monroe, Miami-Dade, Broward, Martin, and Osceola Counties. Additionally, NHT was recently granted a COPCN in Seminole County as well.



Employee Handbook

03/18/2021



ABOUT THIS HANDBOOK/DISCLAIMER

We prepared this handbook to help employees find the answers to many questions that they may have regarding their employment with National Health Transport, Inc. Please take the necessary time to read it.

We do not expect this handbook to answer all questions. Supervisors and Human Resources also serve as a major source of information.

Neither this handbook nor any other verbal or written communication by a management representative is, nor should it be considered to be, an agreement, contract of employment, express or implied, or a promise of treatment in any particular manner in any given situation, nor does it confer any contractual rights whatsoever. National Health Transport, Inc. adheres to the policy of employment at will, which permits the Company or the employee to end the employment relationship at any time, for any reason, with or without cause or notice.

No Company representative other than the President may modify at-will status and/or provide any special arrangement concerning terms or conditions of employment in an individual case or generally and any such modification must be in a signed writing.

Many matters covered by this handbook, such as benefit plan descriptions, are also described in separate Company documents. These Company documents are always controlling over any statement made in this handbook or by any member of management.

This handbook states only general Company guidelines. The Company may, at any time, in its sole discretion, modify or vary from anything stated in this handbook, with or without notice, except for the rights of the parties to end employment at will, which may only be modified by an express written agreement signed by the employee and the President.

This handbook supersedes all prior handbooks.

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Section 1 - Governing Principles of Employment

1-1. Welcome Letter

Welcome to National Health Transport!

On behalf of your colleagues, I welcome you to National Health Transport, and wish you every success here.

We believe that each employee contributes directly to National Health Transport's growth and success, and we hope you will take pride in being a member of our team.

This handbook is designed to acquaint you with National Health Transport and provide you with information about working conditions, employee benefits, and some of the policies affecting your employment. You should read, understand, and comply with all provisions of the handbook. It describes many of your responsibilities as an employee and outlines the programs developed by National Health Transport to benefit employees. One of our objectives is to provide a work environment that is conducive to both personal and professional growth.

Sincerely,

Raul F Rodriguez

President/CEO

National Health Transport

1-2. Introductory Statement

This Employee Handbook will give you important information about working at National Health Transport, Inc. ("National Health Transport, Inc. or the Company"). The policies in the employee handbook explain many of the benefits of working here. However, this employee handbook cannot cover every situation or answer every question about policies and benefits at the National Health Transport, Inc. Also, sometimes the National Health Transport, Inc. may need to change the employee handbook; therefore, it reserves the right to add new policies, change policies, or cancel policies at any time and without prior notice and as required by federal, state, and local law or regulation. This Handbook supersedes any prior or contemporaneous agreements, representations, understandings or arrangements, whether written or unwritten.

Regis HR Group and National Health Transport, Inc. ("Worksite Employer") have entered into a relationship whereby Regis HR Group provides professional employer organization ("PEO") services to the Worksite Employer as a PEO and the co-employment relationship for administrative purposes with you arises solely from the PEO relationship. Regis HR Group is not your Worksite Employer. You are a worksite employee ("worksite employee") of the Worksite Employer.

Unless set forth in a separate written agreement, your employment relationship may be terminated at any time, for any reason or no reason, with or without cause or notice and you shall have no expectation that your relationship with the Worksite Employer will continue indefinitely. Unless set forth in a separate written agreement, this statement of the employment-at-will relationship is the entire agreement between you and your Worksite Employer as to the duration of employment, including notice, procedure and grounds for

termination. This handbook supersedes any prior or contemporaneous agreements, representations, understandings or arrangements, whether written or unwritten. This handbook cannot be modified without the express, written agreement of your Worksite Employer.

If Regis HR Group does not receive payment from your Worksite Employer to pay your compensation, Regis HR Group will still pay you the applicable minimum wage (or the legally required minimum salary) for any such pay period or such other amount as required by law.

Important Contact Information:

Regis HR Group (PEO) Office (786) 272-5305

1-3. Customer Relations

Our customers are very important to us. Every employee represents National Health Transport to customers and the public. Our customers judge all of us by how we treat them. One of the highest priorities at National Health Transport is to help any customer or potential customer. Nothing is more important than being courteous, friendly, prompt, and helpful to customers.

Your contacts with the public, your telephone manners, and any communications you send to customers reflect not just on you but also on the professionalism of National Health Transport. Good customer relations can build greater customer loyalty and increased profits

1-4. Employee Relations

National Health Transport believes that the work conditions, and wages it offers to its employees are competitive with those offered by other employers in this area and in this industry. If employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly to their supervisors.

Our experience has shown that when employees deal openly and directly with supervisors, the work environment can be excellent, communications can be clear, and attitudes can be positive. We believe that National Health Transport amply demonstrates its commitment to employees by responding effectively to employee concerns.

1-5. Equal Employment Opportunity

National Health Transport, Inc. is an Equal Opportunity Employer that does not discriminate on the basis of actual or perceived race, color, creed, religion, national origin, ancestry, citizenship status, age, sex or gender (including pregnancy, childbirth and pregnancy-related conditions), gender identity or expression (including transgender status), sexual orientation, marital status, military service and veteran status, physical or mental disability, genetic information, or any other characteristic protected by applicable federal, state or local laws and ordinances. National Health Transport, Inc.'s management team is dedicated to this policy with respect to recruitment, hiring, placement, promotion, transfer, training, compensation, benefits, employee activities, access to facilities and programs and general treatment during employment.

The Company will endeavor to make a reasonable accommodation of an otherwise qualified applicant or employee related to an individual's: physical or mental disability; sincerely held religious beliefs and practices; and/or any other reason required by applicable law, unless doing so would impose an undue hardship upon the Company's business operations.

Any applicant or employee who needs an accommodation in order to perform the essential functions of the job should contact Controller to request such an accommodation. The individual should specify what accommodation is needed to perform the job and submit supporting documentation explaining the basis for the requested accommodation, to the extent permitted and in accordance with applicable law. The Company then will review and analyze the request, including engaging in an interactive process with the employee or applicant, to identify if such an accommodation can be made. The Company will evaluate requested accommodations, and as appropriate, identify other possible accommodations, if any. The individual will be notified of The Company's decision regarding the request within a reasonable period. The Company treats all medical information submitted as part of the accommodation process in a confidential manner.

Any employees with questions or concerns about equal employment opportunities in the workplace are encouraged to bring these issues to the attention of Controller. The Company will not allow any form of retaliation against individuals who raise issues of equal employment opportunity. If employees feel they have been subjected to any such retaliation, they should contact Controller. To ensure our workplace is free of artificial barriers, violation of this policy including any improper retaliatory conduct will lead to discipline, up to and including discharge. All employees must cooperate with all investigations conducted pursuant to this policy.

1-6. Non-Harassment

It is National Health Transport, Inc.'s policy to prohibit intentional and unintentional harassment of or against job applicants, contractors, interns, volunteers or employees by another employee, supervisor, vendor, customer or any third party on the basis of actual or perceived race, color, creed, religion, national origin, ancestry, citizenship status, age, sex or gender (including pregnancy, childbirth and pregnancy-related conditions), gender identity or expression (including transgender status), sexual orientation, marital status, military service and veteran status, physical or mental disability, genetic information or any other characteristic protected by applicable federal, state or local laws (referred to as "protected characteristics"). Such conduct will not be tolerated by National Health Transport, Inc.

The purpose of this policy is not to regulate our employees' personal morality, but to ensure that no one harasses another individual in the workplace, including while on Company premises, while on Company business (whether or not on Company premises) or while representing the Company. In addition to being a violation of this policy, harassment or retaliation based on any protected characteristic as defined by applicable federal, state, or local laws also is unlawful. For example, sexual harassment and retaliation against an individual because the individual filed a complaint of sexual harassment or because an individual aided, assisted or testified in an investigation or proceeding involving a complaint of sexual harassment as defined by applicable federal, state, or local laws are unlawful.

Harassment Defined

Harassment generally is defined in this policy as unwelcome verbal, visual or physical conduct that denigrates or shows hostility or aversion towards an individual because of any actual or perceived protected characteristic or has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Harassment can be verbal (including slurs, jokes, insults, epithets, gestures or teasing), visual (including offensive posters, symbols, cartoons, drawings, computer displays, text messages, social media posts or e-mails) or physical conduct (including physically threatening another, blocking someone's way, etc.). Such conduct violates this policy, even if it does not rise to the level of a violation of applicable federal, state or local laws. Because it is difficult to define unlawful harassment, employees are expected to behave at all times in a manner consistent with the intended purpose of this policy.

Sexual Harassment Defined

Sexual harassment can include all of the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities and other verbal, visual or physical conduct of a sexual nature when:

- submission to that conduct or those advances or requests is made either explicitly or implicitly a term or condition of an individual's employment; or
- submission to or rejection of the conduct or advances or requests by an individual is used as the basis for employment decisions affecting the individual; or
- the conduct or advances or requests have the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Examples of conduct that violate this policy include:

1. unwelcome flirtations, leering, whistling, touching, pinching, assault, blocking normal movement;
2. requests for sexual favors or demands for sexual favors in exchange for favorable treatment;
3. obscene or vulgar gestures, posters or comments;
4. sexual jokes or comments about a person's body, sexual prowess or sexual deficiencies;
5. propositions or suggestive or insulting comments of a sexual nature;
6. derogatory cartoons, posters and drawings;
7. sexually-explicit e-mails, text messages or voicemails;
8. uninvited touching of a sexual nature;
9. unwelcome sexually-related comments;
10. conversation about one's own or someone else's sex life;
11. conduct or comments consistently targeted at only one gender, even if the content is not sexual; and
12. teasing or other conduct directed toward a person because of the person's gender.

Reporting Procedures

If the employee has been subjected to or witnessed conduct which violates this policy, the employee should immediately report the matter to Controller. If the employee is unable for any reason to contact this person, or if the employee has not received an initial response within five (5) business days after reporting any incident of what the employee perceives to be harassment, the employee should contact the President. If the person toward whom the complaint is directed is one of the individuals indicated above, the employee should contact any higher-level manager in the reporting hierarchy.

Investigation Procedures

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. All employees must cooperate with all investigations conducted pursuant to this policy.

Retaliation Prohibited

In addition, the Company will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If the employee has been subjected to any such retaliation, the employee should report it in the same manner in which the employee would report a claim of perceived harassment under this policy.

Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including termination.

1-7. Job Postings and Referrals

National Health Transport provides employees an opportunity to indicate their interest in open positions and advance within the organization according to their skills and experience. In general, notices of all regular, full-time job openings are posted, although National Health Transport reserves its discretionary right to not post an opening.

Job openings will be posted on the employee bulletin board and normally remain open for 14 days. Each job posting notice will include the dates of the posting period, job title, department, location, grade level, job summary, essential duties, and qualifications (required skills and abilities).

To be eligible to apply for a posted job, employees must have performed competently for at least 6 months in their current position. Employees who have an active written warning on file or are on probation or suspension are not eligible to apply for posted jobs. Eligible employees can only apply for those posted jobs for which they possess the required skills, competencies, and qualifications.

To apply for an open position, employees should submit a job posting application to the Department Manager listing job-related skills and accomplishments. It should also describe how their current experience with National Health Transport and prior work experience and/or education qualifies them for the position.

National Health Transport recognizes the benefit of developmental experiences and encourages employees to talk with their supervisors about their career plans. Supervisors are encouraged to support employees' efforts to gain experience and advance within the organization.

An applicant's supervisor may be contacted to verify performance, skills, and attendance. Any staffing limitations or other circumstances that might affect a prospective transfer may also be discussed.

Job posting is a way to inform employees of openings and to identify qualified and interested applicants who might not otherwise be known to the hiring manager. Other recruiting sources may also be used to fill open positions in the best interest of the organization.

National Health Transport also encourages employees to identify friends or acquaintances who are interested in employment opportunities and refer qualified outside applicants for posted jobs. Employees should obtain permission from the individual before making a referral, share their knowledge of the organization, and not make commitments or oral promises of employment.

An employee should submit the referral's resume and/or completed application form to the Personnel Department for a posted job. If the referral is interviewed, the referring employee will be notified of the initial interview and the final selection decision.

1-8. Drug-Free and Alcohol-Free Workplace

To help ensure a safe, healthy and productive work environment for our employees and others, to protect Company property, and to ensure efficient operations, National Health Transport, Inc. has adopted a policy of maintaining a workplace free of drugs and alcohol. This policy applies to all employees and other individuals who perform work for the Company.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale or distribution of controlled substances (including medical marijuana), drug paraphernalia or alcohol by an individual anywhere on Company premises, while on Company business (whether or not on Company premises) or while representing the Company, is strictly prohibited. Employees and other individuals who work for the Company also are prohibited from reporting to work or working while they are using or under the influence of alcohol or any controlled substances, which may impact the employee's ability to perform their job or otherwise pose safety concerns, except when the use is pursuant to a licensed medical practitioner's instructions and the licensed medical practitioner authorized the employee or individual to report to work. However, this exception does not extend any right to report to work under the influence of medical marijuana or to use medical marijuana as a defense to a positive drug test, to the extent the employee is subject to any drug testing requirement, except as permitted by and in accordance with applicable law.

Violation of this policy will result in disciplinary action, up to and including discharge.

The Company maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid discipline for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them unable to perform the essential functions of their jobs, or jeopardizes the health and safety of any Company employee, including themselves.

1-9. Workplace Violence

National Health Transport, Inc. is strongly committed to providing a safe workplace. The purpose of this policy is to minimize the risk of personal injury to employees and damage to Company and personal property.

National Health Transport, Inc. does not expect employees to become experts in psychology or to physically subdue a threatening or violent individual. Indeed, National Health Transport, Inc. specifically discourages employees from engaging in any physical confrontation with a violent or potentially violent individual. However, National Health Transport, Inc. does expect and encourage employees to exercise reasonable judgment in identifying potentially dangerous situations.

Experts in the mental health profession state that prior to engaging in acts of violence, troubled individuals often exhibit one or more of the following behaviors or signs: over-resentment, anger and hostility; extreme agitation; making ominous threats such as bad things will happen to a particular person, or a catastrophic event will occur; sudden and significant decline in work performance; irresponsible, irrational, intimidating, aggressive or otherwise inappropriate behavior; reacting to questions with an antagonistic or overtly negative attitude; discussing weapons and their use, and/or brandishing weapons in the workplace; overreacting or reacting harshly to changes in Company policies and procedures; personality conflicts with co-workers; obsession or preoccupation with a co-worker or supervisor; attempts to sabotage the work or equipment of a co-worker; blaming others for mistakes and circumstances; or demonstrating a propensity to behave and react

irrationally.

Prohibited Conduct

Threats, threatening language or any other acts of aggression or violence made toward or by any Company employee WILL NOT BE TOLERATED. For purposes of this policy, a threat includes any verbal or physical harassment or abuse, any attempt at intimidating or instilling fear in others, menacing gestures, flashing of weapons, stalking or any other hostile, aggressive, injurious or destructive action undertaken for the purpose of domination or intimidation. To the extent permitted by law, employees and visitors are prohibited from carrying weapons onto Company premises.

Procedures for Reporting a Threat

All potentially dangerous situations, including threats by co-workers, should be reported immediately to any member of management with whom the employee feels comfortable. Reports of threats may be maintained confidential to the extent maintaining confidentiality does not impede National Health Transport, Inc.'s ability to investigate and respond to the complaints. All threats will be promptly investigated. All employees must cooperate with all investigations. No employee will be subjected to retaliation, intimidation or disciplinary action as a result of reporting a threat in good faith under this policy.

If the Company determines, after an appropriate good faith investigation, that someone has violated this policy, the Company will take swift and appropriate corrective action.

If the employee is the recipient of a threat made by an outside party, that employee should follow the steps detailed in this section. It is important for the Company to be aware of any potential danger in its offices. Indeed, the Company wants to take effective measures to protect everyone from the threat of a violent act by employees or by anyone else.

Section 2 - Operational Policies

2-1. Employee Classifications

For purposes of this handbook, all National Health Transport, Inc. employees fall within one of the classifications below.

Full-Time Employees - Employees who regularly work at least 36 hours per week who were not hired on a short-term basis.

Part-Time Employees - Employees who regularly work fewer than 36 hours per week who were not hired on a short-term basis.

Per Diem employee is someone whose work hours may vary from week to week depending on the employer's need and how much or little the employee wishes to work. Per Diem employees generally are not eligible for Company benefits, but are eligible to receive statutory benefits.

In addition to the above classifications, employees are categorized as either "**exempt**" or "**non-exempt**" for purposes of federal and state wage and hour laws. Employees classified as exempt do not receive overtime pay; they generally receive the same weekly salary regardless of hours worked. Such salary may be paid less frequently than weekly. The employee will be informed of these classifications upon hire and informed of any subsequent changes to the classifications.

2-2. Your Employment Records

In order to obtain their position, employees have provided personal information, such as address and telephone number. This information is contained in their personnel file.

Employees should keep their personnel file up to date by informing their Operations Supervisor of any changes. Employees also should inform the Operations Supervisor of any specialized training or skills they acquire, as well as any changes to any required visas. Unreported changes of address, marital status, etc. can affect withholding tax and benefit coverage. Further, an "out of date" emergency contact or an inability to reach employees in a crisis could cause a severe health or safety risk or other significant problem.

2-3. Trial Period

The first 90 days of employees' employment is an introductory period. This is an opportunity for National Health Transport, Inc. to evaluate the employee's performance. It also is an opportunity for employees to decide whether they are happy being employed by the Company. The Company may extend the introductory period if it desires. Completion of the introductory period does not alter the employee's at-will status.

National Health Transport, Inc. will conduct a formal performance review at the end of the introductory period.

2-4. Performance Review

Supervisors and employees are strongly encouraged to discuss job performance and goals on an informal, day-to-day basis. A formal written performance evaluation will be conducted annually, beginning at the calendar-year end; upon completion of the probationary period. Formal performance evaluations are conducted to provide both supervisors and employees the opportunity to discuss job tasks, identify and correct weaknesses, encourage and recognize strengths, and discuss positive, purposeful approaches for meeting goals.

2-5. Working Hours and Schedule

It is the goal of the management to have all crew members off duty at the designated time; however, the nature of our business frequently requires that a crew hold over and run a late call. All crew members are paid from the time they clock in until the time they clock out and will be compensated for the time it takes to run a late call.

Your supervisor will let you know your work schedule, including the times when you will be expected to start and finish work each day. Overtime is not permitted unless specifically authorized by your supervisor.

Shift/Time Exchange - all requests for shift/time exchange must be submitted through the EPro System no less than seventy-two (72) hours in advance. The employee may exchange with scheduling for an equal amount of time providing the request is submitted seventy-two (72) hours in advance, the time is available and there is no impact of overtime. Failure to submit a request without seventy-two (72) hours' notice shall cause the Scheduling Department to immediately deny the request. This includes part time employees committed to any shift. Shift/time exchange during holidays are subject to approval and will be based on staffing needs.

Personnel can be held for TWO HOURS PAST THEIR SCHEDULED FINISH TIME when calls are holding. No advance notice is required or necessary. You will be paid accordingly. Failure to remain is considered grounds for termination.

Employees must provide schedule availability to the Scheduler via ePro at least one week before the beginning of the new pay period.

2-6. Meal Periods

Certain full-time non-road position employees are provided with one meal period of 30 minutes in length each workday. Supervisors will schedule meal periods to accommodate operating requirements. Employees will be relieved of all active responsibilities and restrictions during meal periods and will not be compensated for that time.

National Health Transport premises and surroundings should always reflect a professional appearance. Eating at your desk is acceptable but should be done unobtrusively and in a manner so as to prevent damage to valuable Company equipment and other property. All employees are personally responsible for keeping the area around their workstation clean and presentable. Employees are also responsible for returning meeting areas to a clean and presentable condition after use.

2-7. Timekeeping Procedures

Accurately recording time worked is the responsibility of every employee. Federal and state laws require National Health Transport to keep an accurate record of time worked in order to calculate employee pay and benefits. Time worked is all the time spent on the job performing assigned duties.

Employees should accurately record the time they begin and end their work, as well as non-road positions must record the beginning and ending time of each meal period. They should also record the beginning and ending time of any split shift or departure from work for personal reasons. Non-road positions overtime work must always be approved before it is performed. Failure to acquire approval before working overtime will lead to disciplinary action, up to and including termination of employment.

Altering, falsifying, tampering with time records, or recording time on another employee's time record may result in disciplinary action, up to and including termination of employment.

If you are a nonexempt employee, you should not start working prior to your scheduled time unless requested to do so by a Supervisor.

You can only you can start earlier or work later when your supervisor approves it in advance.

Nonexempt employees must approve and/or sign their time records to say they are accurate. Each supervisor will review and initial the time record before submitting it for payroll processing. In addition, if corrections or changes are made to the time record, both you and your supervisor must initial the changes on the time record.

2-8. Overtime

Like most successful companies, National Health Transport, Inc. experiences periods of extremely high activity. During these busy periods, additional work is required from all of us. Supervisors are responsible for monitoring business activity and requesting overtime work if it is necessary. Effort will be made to provide employees with adequate advance notice in such situations.

Any non-exempt employee who works overtime will be compensated at the rate of one and one-half times (1.5) their normal hourly wage for all time worked in excess of 40 hours each week, unless otherwise required by law.

Employees may work overtime only with prior management authorization.

For purposes of calculating overtime for non-exempt employees, the workweek begins at 12 a.m. on Monday and ends 168 hours later at 12 a.m. on the following Monday.

2-9. Safe Harbor Policy for Exempt Employees

It is National Health Transport, Inc.'s policy and practice to accurately compensate employees and to do so in compliance with all applicable state and federal laws. To ensure proper payment and that no improper deductions are made, employees must review pay stubs promptly to identify and report all errors.

Those classified as exempt salaried employees will receive a salary which is intended to compensate them for all hours they may work for National Health Transport, Inc. This salary will be established at the time of hire or classification as an exempt employee. While it may be subject to review and modification from time to time,

such as during salary review times, the salary will be a predetermined amount that will not be subject to deductions for variations in the quantity or quality of the work performed.

Under federal and state law, salary is subject to certain deductions. For example, unless state law requires otherwise, salary can be reduced for the following reasons:

- full-day absences for personal reasons;
- full-day absences for sickness or disability if the deduction is made in accordance with a bona fide plan, policy or practice of providing wage replacement benefits for such absences (deductions also may be made for the exempt employee's full-day absences due to sickness or disability before the employee has qualified for the plan, policy or practice or after the employee has exhausted the leave allowance under the plan);
- full-day disciplinary suspensions for infractions of our written policies and procedures;
- Family and Medical Leave Act absences (either full- or partial-day absences);
- to offset amounts received as payment from the court for jury and witness fees or from the military as military pay;
- the first or last week of employment in the event the employee works less than a full week; and
- any full work week in which the employee does not perform any work.

Salary may also be reduced for certain types of deductions such as a portion of health, dental or life insurance premiums; state, federal or local taxes; social security; or voluntary contributions to a 401(k) or pension plan.

In any work week in which the employee performed any work, salary will not be reduced for any of the following reasons:

- partial day absences for personal reasons, sickness or disability;
- an absence because the Company has decided to close a facility on a scheduled work day;
- absences for jury duty, attendance as a witness, or military leave in any week in which the employee performed any work (subject to any offsets as set forth above); and
- any other deductions prohibited by state or federal law.

However, unless state law provides otherwise, deductions may be made to accrued leave for full- or partial-day absences for personal reasons, sickness or disability.

If employees believe they have been subject to any improper deductions, they should immediately report the matter to a supervisor. If the supervisor is unavailable or if the employee believes it would be inappropriate to contact that person (or if the employee has not received a prompt and fully acceptable reply), they should immediately contact Controller or any other supervisor in National Health Transport, Inc. with whom the employee feels comfortable.

2-10. Your Paycheck

All employees are paid every other Friday. Each paycheck will include earnings for all work performed through the end of the previous payroll period.

In the unlikely event that there is an error in the amount of pay, the employee should promptly bring the discrepancy to the attention of your supervisor so that corrections can be made as quickly as possible.

In the event that a regularly scheduled payday falls on a day off such as a holiday, employees will be paid on

the first day of work preceding the regularly scheduled payday.

If a regular payday falls during an employee's vacation, the employee's paycheck will be available upon his or her return from vacation.

Employees may have pay directly deposited into their bank accounts if they provide advance written authorization to National Health Transport. Employees will receive an itemized statement of wages when National Health Transport makes direct deposits.

2-11. Direct Deposit

National Health Transport, Inc. strongly encourages employees to use direct deposit. Authorization forms are available from Regis HR Group.

Section 3 - Benefits

3-1. Benefits Overview

In addition to good working conditions and competitive pay, it is National Health Transport, Inc.'s policy to provide a combination of supplemental benefits to all eligible employees. In keeping with this goal, each benefit program has been carefully devised. These benefits include time-off benefits, such as vacations and holidays, and insurance and other plan benefits. We are constantly studying and evaluating our benefits programs and policies to better meet present and future requirements. These policies have been developed over the years and continue to be refined to keep up with changing times and needs.

The next few pages contain a brief outline of the benefits programs National Health Transport, Inc. provides employees and their families. Of course, the information presented here is intended to serve only as guidelines.

The descriptions of the insurance and other plan benefits merely highlight certain aspects of the applicable plans for general information only. The details of those plans are spelled out in the official plan documents, which are available for review upon request from the CFO and/or CFO. Additionally, the provisions of the plans, including eligibility and benefits provisions, are summarized in the summary plan descriptions ("SPDs") for the plans (which may be revised from time to time). In the determination of benefits and all other matters under each plan, the terms of the official plan documents shall govern over the language of any descriptions of the plans, including the SPDs and this handbook.

Further, National Health Transport, Inc. (including the officers and administrators who are responsible for administering the plans) retains full discretionary authority to interpret the terms of the plans, as well as full discretionary authority with regard to administrative matters arising in connection with the plans and all issues concerning benefit terms, eligibility and entitlement.

While the Company intends to maintain these employee benefits, it reserves the absolute right to modify, amend or terminate these benefits at any time and for any reason.

If employees have any questions regarding benefits, they should contact the CFO and/or CFO.

3-2. Paid Holidays

National Health Transport will grant holiday time off or holiday pay to all eligible full-time office employees on the holidays listed below:

New Year's Day

Memorial Day

Independence Day

Labor Day

Thanksgiving Day

Christmas Day

National Health Transport will grant paid holiday time off to all eligible office employees who have completed

90 calendar days of service in an eligible employment classification.

Holiday pay will be calculated based on the employee's straight-time pay rate (as of the date of the holiday) times the number of hours the employee would otherwise have worked on that day.

Eligible employee classification(s):

- All full time employees

To be eligible for holiday pay, employees must work the last scheduled day immediately preceding and the first scheduled day immediately following the holiday.

If a recognized holiday falls during an eligible employee's paid absence (such as vacation or personal sick time off), holiday pay will be provided instead of the paid time off benefit that would otherwise have applied.

All other nonexempt employees who work on a recognized holiday will receive holiday pay plus their regular wages.

3-3. Paid Vacations

Vacation time off with pay is available to eligible employees to provide opportunities for rest, relaxation, and personal pursuits. Employees in the following employment classification(s) are eligible to earn and use vacation time as described in this policy:

- Regular full-time employees

Status changes from Full-time to Part-time will resort in forfeit of all accrued Vacation time.

The amount of paid vacation time employees receive each year increases with the length of their employment as shown in the following schedule:

- After 1 year of eligible service the employee is entitled to 40 hours of paid vacation.
- After 2 years of eligible service the employee is entitled 80 hours of paid vacation.

The length of eligible service is calculated on an Anniversary date. Your anniversary is one year from the full-time date of employment with National Health Transport.

Employees are eligible to request vacation time-off after they have completed one year of service.

Employees must submit their request for vacation at least two weeks in advance to their supervisor. All requests for vacation must be approved before taken. A holiday that falls during a vacation period is treated as a holiday and not as a day of vacation. National Health Transport reserves the right to assign "collective vacation days" which may be the day after a paid holiday and before a weekend.

Vacation time off is paid at the employee's base pay rate at the time of vacation. It does not include overtime or any special forms of compensation such as incentives, commissions, bonuses, or shift differentials.

As stated above, employees are encouraged to use available paid vacation time for rest, relaxation, and personal pursuits. Any accrued and unused vacation time will not carry over to future years.

No Vacation time off will be approved for the last two (2) weeks in December.

Upon termination of employment, employees will be paid for unused vacation time. However, if National Health Transport, in its sole discretion, terminates employment for cause, forfeiture of unused vacation time may result.

3-4. Sick Days

Commencing January 2014

After the initial ninety (90) day introductory period, all full-time employees will be granted paid sick leave as follows:

Initial year of employment:

Month employment began	
January	3 days after initial 90 days have been completed
February	3 days after initial 90 days have been completed
March	3 days after initial 90 days have been completed
April	2 days after initial 90 days have been completed
May	2 days after initial 90 days have been completed
June	2 days after initial 90 days have been completed
July	1 day after initial 90 days have been completed
August	1 day after initial 90 days have been completed
September	1 day after initial 90 days have been completed
October	0 days. Will be eligible the following year
November	0 days. Will be eligible the following year
December	0 days. Will be eligible the following year

After the initial year of employment, sick leave is accumulated on a calendar year basis. Meaning that every January after the initial year of employment, all full-time employees will be granted three (3) paid sick days.

Sick days are based on a twelve (12) hour work-day. Therefore, three (3) paid sick days a year will be the equivalent of 36 hours.

- All sick day must be taken in full day intervals.
- A maximum of five (5) consecutive days may be taken during a one-year span.
- If an employee resigns or is terminated, the unused sick leave will be lost.
- Sick leave may be carried-over from year to year.
- After working at NHT for ten (10) consecutive years, employee will be able to cash out 72 hours of unused sick leave per year at their current hourly rate at the time of cashing out.
- On your 20th year anniversary employees may cash out all available sick hours.
- Sick leave may be utilized by employees when they are unable to perform their duties because of:

1. Sickness or injury;
2. Medical, dental or optical examinations and/or treatment;
3. Required care of a sick or injured member of their immediate family in compliance with FMLA.

Employees are required to contact their direct supervisor no later than three (3) hours before the time they were scheduled to report for duty. However, it is preferred that the employee contacts their immediate supervisor as soon as they foresee a possible call-out. Leaving messages with other employees or on a voicemail is considered improper notification and is not acceptable. Failure to notify your immediate supervisor directly will result in an unexcused absence for the day.

Status changes from Full-time to Part-time will resort in forfeit of all accrued Sick/PTO.

National Health Transport, Inc. reserves the right to require medical statements to support the use of sick leave. Failure to provide requested documentation may result in disciplinary actions up to and including termination.

3-5. Lactation Breaks

National Health Transport, Inc. will provide a reasonable amount of break time to accommodate employees desiring to express breast milk for their infant child, in accordance with and to the extent required by applicable law. The break time, if possible, must run concurrently with rest and meal periods already provided. If the break time cannot run concurrently with rest and meal periods already provided, the break time will be unpaid, subject to applicable law.

The Company will make reasonable efforts to provide employees with the use of a room or location other than a toilet stall to express milk in private. This location may be the employee's private office, if applicable. The Company may not be able to provide additional break time if doing so would seriously disrupt the Company's operations, subject to applicable law. Please consult the CFO and/or CFO with questions regarding this policy.

Employees should advise management if they need break time and an area for this purpose. Employees will not be discriminated against or retaliated against for exercising their rights under this policy.

3-6. Workers' Compensation

On-the-job injuries are covered by National Health Transport, Inc.'s Workers' Compensation Insurance Policy, which is provided at no cost. If employees are injured on the job, no matter how slightly, they should report the incident immediately to their supervisor. Failure to follow Company procedures may affect the ability of employees to receive Workers Compensation benefits.

This is solely a monetary benefit and not a leave of absence entitlement. Employees who need to miss work due to a workplace injury must also request a formal leave of absence. See the Leave of Absence sections of this handbook for more information.

3-7. Jury Duty

National Health Transport, Inc. realizes that it is the obligation of all U.S. citizens to serve on a jury when summoned to do so. All employees will be allowed time off to perform such civic service as required by law. Employees are expected, however, to provide proper notice of a request to perform jury duty and verification of their service.

Employees also are expected to keep management informed of the expected length of jury duty service and to

report to work for the major portion of the day if excused by the court. If the required absence presents a serious conflict for management, employees may be asked to try to postpone jury duty.

Employees on jury duty leave will be paid for their jury duty service in accordance with state law; however, exempt employees will be paid their full salary for any week in which time is missed due to jury duty if work is performed for the Company during such week.

3-8. Bereavement Leave

The death of a family member is a time when employees wish to be with their families. If the employee is full-time and loses a close relative, the employee will be allowed paid time off of up to two (2) days to assist in attending to obligations and commitments. For the purposes of this policy, a close relative includes a spouse, domestic/civil union partner, child, parent, sibling, grandchildren, grandparents or any other relation required by applicable law. Paid leave days only may be taken on regularly scheduled, consecutive workdays following the day of death. Employees must inform their supervisor prior to commencing bereavement leave. In administering this policy, National Health Transport, Inc. may require verification of death.

3-9. Voting Leave

In the event employees do not have sufficient time outside of working hours to vote in a statewide election, if required by state law, the employee may take off enough working time to vote. Such time will be paid if required by state law. This time should be taken at the beginning or end of the regular work schedule. Where possible, supervisors should be notified at least two (2) days prior to the voting day.

3-10. Insurance Programs

Full-time employees may participate in National Health Transport, Inc.'s insurance programs. Under these plans, eligible employees will receive comprehensive health and other insurance coverage for themselves and their families, as well as other benefits.

The following benefit programs are available to eligible employees:

- Dental Insurance
- Life Insurance
- Medical Insurance
- Short-Term Disability
- Supplemental Life Insurance
- Vision Care Insurance
- 401 (k) Plan

Some benefit programs require contributions from the employee.

Upon becoming eligible to participate in these plans, employees will receive summary plan descriptions (SPDs) describing the benefits in greater detail. Please refer to the SPDs for detailed plan information. Of course, feel free to contact the CFO with any further questions.

3-11. Retirement Plan

Eligible employees are able to participate in National Health Transport, Inc.'s retirement plan. Plan participants may make pre-tax contributions to a retirement account.

Upon becoming eligible to participate in this plan, employees will receive an SPD describing the plan in greater detail. Please refer to the SPD for detailed plan information. Of course, feel free to speak to the CFO if there are any further questions.

Section 4 - Leaves of Absence

4-1. Military Leave

If employees are called into active military service or enlist in the uniformed services, they will be eligible to receive an unpaid military leave of absence. To be eligible for military leave, employees must provide management with advance notice of service obligations unless they are prevented from providing such notice by military necessity or it is otherwise impossible or unreasonable to provide such notice. Provided the absence does not exceed applicable statutory limitations, employees will retain reemployment rights and accrue seniority and benefits in accordance with applicable federal and state laws. Employees should ask management for further information about eligibility for Military Leave.

If employees are required to attend yearly Reserves or National Guard duty, they can apply for an unpaid temporary military leave of absence not to exceed the number of days allowed by law (including travel). They should give management as much advance notice of their need for military leave as possible so that National Health Transport, Inc. can maintain proper coverage while employees are away.

4-2. Family and Medical Leave

The Leave Policy

Employees may be entitled to a leave of absence under the Family and Medical Leave Act (FMLA). This policy provides employees information concerning FMLA entitlements and obligations employees may have during such leaves. If employees have any questions concerning FMLA leave, they should contact Controller.

I. Eligibility

FMLA leave is available to "eligible employees." To be an "eligible employee," the employee must: 1) have been employed by the Company for at least 12 months (which need not be consecutive); 2) have been employed by the Company for at least 1,250 hours of service during the 12-month period immediately preceding the commencement of the leave; and 3) be employed at a worksite where 50 or more employees are located within 75 miles of the worksite.

Special hours of service eligibility requirements apply to airline flight crew employees.

II. Entitlements

As described below, the FMLA provides eligible employees with a right to leave, health insurance benefits and, with some limited exceptions, job restoration.

A. Basic FMLA Leave Entitlement

The FMLA provides eligible employees up to 12 workweeks of unpaid leave for certain family and medical reasons during a 12-month period. The 12-month period is determined based on a rolling 12-month period measured backward from the date the employee uses their FMLA leave. Leave may be taken for any one, or for a combination, of the following reasons:

- To care for the employee's child after birth or placement for adoption or foster care;
- To care for the employee's spouse, son, daughter or parent (but not in-law) who has a **serious health**

condition;

- For the employee's own serious health condition (including any period of incapacity due to pregnancy, prenatal medical care or childbirth) that makes the employee unable to perform one or more of the essential functions of the employee's job; and/or
- Because of any **qualifying exigency** arising out of the fact that the employee's spouse, son, daughter or parent is a military member on covered active duty or called to covered active duty status (or has been notified of an impending call or order to covered active duty) in the Reserves component of the Armed Forces for deployment to a foreign country in support of contingency operation or Regular Armed Forces for deployment to a foreign country.

A **serious health condition** is an illness, injury, impairment or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents employees from performing the functions of their job, or prevents the qualified family member from participating in school or other daily activities. Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, caring for the parents of the military member on covered active duty and attending post-deployment reintegration briefings.

B. Additional Military Family Leave Entitlement (Injured Servicemember Leave)

In addition to the basic FMLA leave entitlement discussed above, an eligible employee who is the spouse, son, daughter, parent or next of kin of a **covered servicemember** is entitled to take up to 26 weeks of leave during a single 12-month period to care for the servicemember with a serious injury or illness. Leave to care for a servicemember shall only be available during a single-12 month period and, when combined with other FMLA-qualifying leave, may not exceed 26 weeks during the single 12-month period. The single 12-month period begins on the first day an eligible employee takes leave to care for the injured servicemember.

A "**covered servicemember**" is a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status or is on the temporary retired list, for a serious injury or illness. These individuals are referred to in this policy as "current members of the Armed Forces." **Covered servicemembers** also include a veteran who is discharged or released from military services under condition other than dishonorable at any time during the five years preceding the date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation or therapy for a serious injury or illness. These individuals are referred to in this policy as "covered veterans."

The FMLA definitions of a "serious injury or illness" for current Armed Forces members and covered veterans are distinct from the FMLA definition of "serious health condition" applicable to FMLA leave to care for a covered family member.

C. Intermittent Leave and Reduced Leave Schedules

FMLA leave usually will be taken for a period of consecutive days, weeks or months. However, employees also are entitled to take FMLA leave intermittently or on a reduced leave schedule when medically necessary due to a serious health condition of the employee or covered family member or the serious injury or illness of a

covered servicemember. Qualifying exigency leave also may be taken on an intermittent basis.

D. No Work While on Leave

The taking of another job while on family/medical leave or any other authorized leave of absence is grounds for immediate discharge, to the extent permitted by law.

E. Protection of Group Health Insurance Benefits

During FMLA leave, eligible employees are entitled to receive group health plan coverage on the same terms and conditions as if they had continued to work.

F. Restoration of Employment and Benefits

At the end of FMLA leave, subject to some exceptions including situations where job restoration of "key employees" will cause the Company substantial and grievous economic injury, employees generally have a right to return to the same or equivalent positions with equivalent pay, benefits and other employment terms. The Company will notify employees if they qualify as "key employees," if it intends to deny reinstatement, and of their rights in such instances. Use of FMLA leave will not result in the loss of any employment benefit that accrued prior to the start of an eligible employee's FMLA leave.

G. Notice of Eligibility for, and Designation of, FMLA Leave

Employees requesting FMLA leave are entitled to receive written notice from the Company telling them whether they are eligible for FMLA leave and, if not eligible, the reasons why they are not eligible. When eligible for FMLA leave, employees are entitled to receive written notice of: 1) their rights and responsibilities in connection with such leave; 2) Company's designation of leave as FMLA-qualifying or non-qualifying, and if not FMLA-qualifying, the reasons why; and 3) the amount of leave, if known, that will be counted against the employee's leave entitlement.

The Company may retroactively designate leave as FMLA leave with appropriate written notice to employees provided the Company's failure to designate leave as FMLA-qualifying at an earlier date did not cause harm or injury to the employee. In all cases where leaves qualify for FMLA protection, the Company and employee can mutually agree that leave be retroactively designated as FMLA leave.

III. Employee FMLA Leave Obligations

A. Provide Notice of the Need for Leave

Employees who take FMLA leave must timely notify the Company of their need for FMLA leave. The following describes the content and timing of such employee notices.

1. Content of Employee Notice

To trigger FMLA leave protections, employees must inform their Manager of the need for FMLA-qualifying leave and the anticipated timing and duration of the leave, if known. Employees may do this by either requesting FMLA leave specifically, or explaining the reasons for leave so as to allow the Company to determine that the leave is FMLA-qualifying. For example, employees might explain that:

- a medical condition renders them unable to perform the functions of their job;
- they are pregnant or have been hospitalized overnight;
- they or a covered family member are under the continuing care of a health care provider;
- the leave is due to a qualifying exigency caused by a military member being on covered active duty or called to covered active duty status to a foreign country; or

- if the leave is for a family member, that the condition renders the family member unable to perform daily activities or that the family member is a covered servicemember with a serious injury or illness.

Calling in "sick," without providing the reasons for the needed leave, will not be considered sufficient notice for FMLA leave under this policy. Employees must respond to the Company's questions to determine if absences are potentially FMLA-qualifying.

If employees fail to explain the reasons for FMLA leave, the leave may be denied. When employees seek leave due to FMLA-qualifying reasons for which the Company has previously provided FMLA-protected leave, they must specifically reference the qualifying reason for the leave or the need for FMLA leave.

2. Timing of Employee Notice

Employees must provide 30 days' advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days' notice is not possible, or the approximate timing of the need for leave is not foreseeable, employees must provide the Company notice of the need for leave as soon as practicable under the facts and circumstances of the particular case. Employees who fail to give 30 days' notice for foreseeable leave without a reasonable excuse for the delay, or otherwise fail to satisfy FMLA notice obligations, may have FMLA leave delayed or denied.

B. Cooperate in the Scheduling of Planned Medical Treatment (Including Accepting Transfers to Alternative Positions) and Intermittent Leave or Reduced Leave Schedules

When planning medical treatment, employees must consult with the Company and make a reasonable effort to schedule treatment so as not to unduly disrupt the Company's operations, subject to the approval of the employee's health care provider. Employees must consult with the Company prior to the scheduling of treatment to work out a treatment schedule that best suits the needs of both the Company and the employees, subject to the approval of the employee's health care provider. If employees providing notice of the need to take FMLA leave on an intermittent basis for planned medical treatment neglect to fulfill this obligation, the Company may require employees to attempt to make such arrangements, subject to the approval of the employee's health care provider.

When employees take intermittent or reduced work schedule leave for foreseeable planned medical treatment for the employee or a family member, including during a period of recovery from a serious health condition or to care for a covered servicemember, the Company may temporarily transfer employees, during the period that the intermittent or reduced leave schedules are required, to alternative positions with equivalent pay and benefits for which the employees are qualified and which better accommodate recurring periods of leave.

When employees seek intermittent leave or a reduced leave schedule for reasons unrelated to the planning of medical treatment, upon request, employees must advise the Company of the reason why such leave is medically necessary. In such instances, the Company and employee shall attempt to work out a leave schedule that meets the employee's needs without unduly disrupting the Company's operations, subject to the approval of the employee's health care provider.

C. Submit Medical Certifications Supporting Need for FMLA Leave (Unrelated to Requests for Military Family Leave)

Depending on the nature of FMLA leave sought, employees may be required to submit medical certifications supporting their need for FMLA-qualifying leave. As described below, there generally are three types of FMLA medical certifications: an **initial certification**, a **recertification** and a **return to work/fitness for duty certification**.

It is the employee's responsibility to provide the Company with timely, complete and sufficient medical certifications. Whenever the Company requests employees to provide FMLA medical certifications, employees must provide the requested certifications within 15 calendar days after the Company's request, unless it is not practicable to do so despite the employee's diligent, good faith efforts. The Company will inform employees if submitted medical certifications are incomplete or insufficient and provide employees at least seven calendar days to cure deficiencies. The Company will deny FMLA leave to employees who fail to timely cure deficiencies or otherwise fail to timely submit requested medical certifications.

With the employee's permission, the Company (through individuals other than the employee's direct supervisor) may contact the employee's health care provider to authenticate or clarify completed and sufficient medical certifications. If employees choose not to provide the Company with authorization allowing it to clarify or authenticate certifications with health care providers, the Company may deny FMLA leave if certifications are unclear.

Whenever the Company deems it appropriate to do so, it may waive its right to receive timely, complete and/or sufficient FMLA medical certifications.

1. Initial Medical Certifications

Employees requesting leave because of their own, or a covered relation's, serious health condition, or to care for a covered servicemember, must supply medical certification supporting the need for such leave from their health care provider or, if applicable, the health care provider of their covered family or service member. If employees provide at least 30 days' notice of medical leave, they should submit the medical certification before leave begins. A new initial medical certification will be required on an annual basis for serious medical conditions lasting beyond a single leave year.

If the Company has reason to doubt initial medical certifications, it may require employees to obtain a second opinion at the Company's expense. If the opinions of the initial and second health care providers differ, the Company may, at its expense, require employees to obtain a third, final and binding certification from a health care provider designated or approved jointly by the Company and the employee.

2. Medical Recertifications

Depending on the circumstances and duration of FMLA leave, the Company may require employees to provide recertification of medical conditions giving rise to the need for leave. The Company will notify employees if recertification is required and will give employees at least 15 calendar days to provide medical recertification.

3. Return to Work/Fitness for Duty Medical Certifications

Unless notified that providing such certifications is not necessary, employees returning to work from FMLA leaves that were taken because of their own serious health conditions that made them unable to perform their jobs must provide the Company with medical certification confirming they are able to return to work and the employees' ability to perform the essential functions of the employees' position, with or without reasonable accommodation. The Company may delay and/or deny job restoration until employees provide return to work/fitness for duty certifications.

D. Submit Certifications Supporting Need for Military Family Leave

Upon request, the first time employees seek leave due to qualifying exigencies arising out of the covered active duty or call to covered active duty status of a military member, the Company may require employees to provide: 1) a copy of the military member's active duty orders or other documentation issued by the military indicating the military member is on covered active duty or call to covered active duty status and the dates of

the military member's covered active duty service; and 2) a certification from the employee setting forth information concerning the nature of the qualifying exigency for which leave is requested. Employees shall provide a copy of new active duty orders or other documentation issued by the military for leaves arising out of qualifying exigencies arising out of a different covered active duty or call to covered active duty status of the same or a different military member.

When leave is taken to care for a covered servicemember with a serious injury or illness, the Company may require employees to obtain certifications completed by an authorized health care provider of the covered servicemember. In addition, and in accordance with the FMLA regulations, the Company may request that the certification submitted by employees set forth additional information provided by the employee and/or the covered servicemember confirming entitlement to such leave.

E. Substitute Paid Leave for Unpaid FMLA Leave

Employees may use any accrued paid time while taking unpaid FMLA leave.

The substitution of paid time for unpaid FMLA leave time does not extend the length of FMLA leave and the paid time will run concurrently with the employee's FMLA entitlement.

Leaves of absence taken in connection with a disability leave plan or workers' compensation injury/illness shall run concurrently with any FMLA leave entitlement. Upon written request, the Company will allow employees to use accrued paid time to supplement any paid disability benefits.

F. Pay Employee's Share of Health Insurance Premiums

During FMLA leave, employees are entitled to continued group health plan coverage under the same conditions as if they had continued to work. Unless the Company notifies employees of other arrangements, whenever employees are receiving pay from the Company during FMLA leave, the Company will deduct the employee portion of the group health plan premium from the employee's paycheck in the same manner as if the employee was actively working.

If FMLA leave is unpaid, employees must pay their portion of the group health premium through a method determined by the Company upon leave.

IV. Questions and/or Complaints about FMLA Leave

If you have questions regarding this FMLA policy, please contact Controller. The Company is committed to complying with the FMLA and, whenever necessary, shall interpret and apply this policy in a manner consistent with the FMLA.

The FMLA makes it unlawful for employers to: 1) interfere with, restrain or deny the exercise of any right provided under FMLA; or 2) discharge or discriminate against any person for opposing any practice made unlawful by FMLA or involvement in any proceeding under or relating to FMLA. If employees believe their FMLA rights have been violated, they should contact Controller immediately. The Company will investigate any FMLA complaints and take prompt and appropriate remedial action to address and/or remedy any FMLA violation. Employees also may file FMLA complaints with the United States Department of Labor or may bring private lawsuits alleging FMLA violations.

V. Coordination of FMLA Leave with Other Leave Policies

The FMLA does not affect any federal, state or local law prohibiting discrimination, or supersede any State or local law that provides greater family or medical leave rights. For additional information concerning leave entitlements and obligations that might arise when FMLA leave is either not available or exhausted, please consult the Company's other leave policies in this handbook or contact Controller.

Section 5 - General Standards of Conduct

5-1. Workplace Conduct

National Health Transport, Inc. endeavors to maintain a positive work environment. Each employee plays a role in fostering this environment. Accordingly, we all must abide by certain rules of conduct, based on honesty, common sense and fair play.

Because everyone may not have the same idea about proper workplace conduct, it is helpful to adopt and enforce rules all can follow. Unacceptable conduct may subject the offender to disciplinary action, up to and including discharge, in the Company's sole discretion. The following are examples of some, but not all, conduct which can be considered unacceptable:

1. Obtaining employment on the basis of false or misleading information.
2. Stealing, removing or defacing National Health Transport, Inc. property or a co-worker's property, and/or disclosure of confidential information.
3. Completing another employee's time records.
4. Violation of safety rules and policies.
5. Violation of National Health Transport, Inc.'s Drug and Alcohol-Free Workplace Policy.
6. Fighting, threatening or disrupting the work of others or other violations of National Health Transport, Inc.'s Workplace Violence Policy.
7. Failure to follow lawful instructions of a supervisor.
8. Failure to perform assigned job duties.
9. Violation of the Punctuality and Attendance Policy, including but not limited to irregular attendance, habitual lateness or unexcused absences.
10. Gambling on Company property.
11. Willful or careless destruction or damage to Company assets or to the equipment or possessions of another employee.
12. Wasting work materials.
13. Performing work of a personal nature during working time.
14. Violation of the Solicitation and Distribution Policy.
15. Violation of National Health Transport, Inc.'s Harassment or Equal Employment Opportunity Policies.
16. Violation of the Communication and Computer Systems Policy.
17. Unsatisfactory job performance.
18. Any other violation of National Health Transport, Inc. policy.

Obviously, not every type of misconduct can be listed. Note that all employees are employed at-will, and National Health Transport, Inc. reserves the right to impose whatever discipline it chooses, or none at all, in a particular instance. The Company will deal with each situation individually and nothing in this handbook should be construed as a promise of specific treatment in a given situation. However, National Health Transport, Inc. will endeavor to utilize progressive discipline but reserves the right in its sole discretion to terminate the employee at any time for any reason.

The observance of these rules will help to ensure that our workplace remains a safe and desirable place to work.

5-2. Progressive Discipline

The purpose of this policy is to state National Health Transport's position on administering equitable and consistent discipline for unsatisfactory conduct in the workplace. The best disciplinary measure is the one that does not have to be enforced and comes from good leadership and fair supervision at all employment levels.

National Health Transport's own best interest lies in ensuring fair treatment of all employees and in making certain that disciplinary actions are prompt, uniform, and impartial. The major purpose of any disciplinary action is to correct the problem, prevent recurrence, and prepare the employee for satisfactory service in the future.

Although employment with National Health Transport is based on mutual consent and both the employee and National Health Transport have the right to terminate employment at will, with or without cause or advance notice, National Health Transport may use progressive discipline at its discretion.

Disciplinary action may call for any of four steps -- verbal warning, written warning, suspension with or without pay, or termination of employment -- depending on the severity of the problem and the number of occurrences. There may be circumstances when one or more steps are bypassed.

Progressive discipline means that, with respect to most disciplinary problems, these steps will normally be followed: a first offense may call for a verbal warning; a next offense may be followed by a written warning; another offense may lead to a suspension; and, still another offense may then lead to termination of employment.

National Health Transport recognizes that there are certain types of employee problems that are serious enough to justify either a suspension, or, in extreme situations, termination of employment, without going through the usual progressive discipline steps.

While it is impossible to list every type of behavior that may be deemed a serious offense, the Employee Conduct and Work Rules policy includes examples of problems that may result in immediate suspension or termination of employment. However, the problems listed are not all necessarily serious offenses, but may be examples of unsatisfactory conduct that will trigger progressive discipline.

By using progressive discipline, we hope that most employee problems can be corrected at an early stage, benefiting both the employee and National Health Transport.

5-3. Punctuality and Attendance

STATEMENT OF POLICY:

To fulfill our obligations to our patients and to our communities, the Company must operate 24 hours a day, 7 days a week. The Company expects all employees to assume diligent responsibility to their attendance and promptness.

DETAILS OF POLICY:

Regular Attendance:

- Regular attendance of all employees is mandatory. Absenteeism that is excessive in the judgment of the Company will result in disciplinary action up to and including discharge.

- When calling out for a shift, employees are required to call in directly to their Operations Supervisor a minimum of four hours prior to the start of the assigned shift. Failure to make contact within the minimum of four hours prior to the beginning of the shift may be considered a No Call/No Show.
 - If you are scheduled to work a twenty or twenty-four-hour shift, employees are required to call in directly to their Operations Supervisor a minimum of eight hours prior to the start of the assigned shift. Failure to make contact within the minimum of four hours prior to the beginning of the shift may be considered shift abandonment.
- Any employee that calls in sick for their shift will be relieved for the entire shift.
- If an employee knows that their illness will be such duration that more than one shift will be missed, the employee must advise their On- Duty Operation Supervisor.
- If an employee is off shift due to illness for (3) three or more consecutive shifts, the employee must provide a medical release to the Human Resources Department prior to returning to work. The employee should also contact the Human Resources Department regarding any available LOA's.
- The employee is required to call the On-Duty Supervisor if the employee becomes too ill or has a true emergency while on shift and cannot continue in a safe and effective manner.
- If the employee advises that they are too ill to work an assigned shift and is later found to have not been ill, the employee will be subject to disciplinary action for a No Call/ No Show, up to and including discharge.
- Employees may be required to produce medical documentation prior to returning to work and may also be required to be evaluated and cleared for duty by the Company Physician.

Tardiness or Absenteeism:

1. All employees shall not punch in any sooner than 3 minutes prior to their scheduled start time. Proper approval must be obtained from an authorized member of management for any exceptions. If an employee finds they are going to be late for their shift, they should call their Operations Supervisor as soon as they know they will be late.
2. Reporting for duty 5 minutes later than the scheduled start time of the shift will be considered tardy. For the purposes of determining the current time, the E-Bio Clock time clock shall have control.

Mandatory Overtime:

1. The Company may call employees in with little or no notice for unscheduled shifts, based on Company, customer, or emergency needs.
2. The Company will notify an affected employee as soon as possible whenever it is known that involuntary overtime will be required.
3. No employee may refuse to work overtime in an emergency or critical situation. The Chief Operating Officer or designee may excuse an employee from involuntary overtime work for good and verifiable reasons.

*Excessive absenteeism and tardiness will lead to disciplinary action.

No Call/No Show:

1. Failure to notify the On-Duty Operations Supervisor or Operations Manager within the authorized time frame prior to calling out may be considered a No Call/No Show. The On-Duty Supervisor can be reached 24 hours a day/ 7 days a week.

- If you receive a voice mail when contacting your Supervisor, you must leave a call back number where you can be reached.

2. If the employee advises that they are too ill to work an assigned shift and are later found to have not been ill, this will have considered a No Call/No Show.

3. A shift will be considered abandoned if an employee leaves without proper relief or expressed permission of a Manager or Supervisor.

4. Failure to arrive for an assigned shift without proper notification may be considered No Call/No Show.

5. No Call/No Show is a serious infraction, which may result in disciplinary action up to, and including discharge.

Employee Responsibilities:

1. Employees are responsible for being in their work area and ready to work by their scheduled start time.
2. If an employee is a No Call/No Show for two consecutive days, it will be **considered job abandonment**.
3. If an employee misses three (3) consecutive shifts, a doctor's note is required before they are permitted to return to work.

This program is **NOT** intended to give employees additional time off or work without being subject to disciplinary action. It is also not intended to eliminate your responsibilities, as the employee, to notify your supervisor when you will be late, absent or need to leave early. Employees may be subject to the disciplinary process for excessive tardiness or call offs.

Statement of Policy:

The Company will utilize a progressive disciplinary process in a fair and consistent manner with all employees. The application of the disciplinary process will be implemented by management taking into account the severity of the infraction, frequency of occurrence, potential liability, and the impact to the organization caused by such infractions.

Details of Policy:

1. Disciplinary actions may include, but not be limited to, one or more of the following.
 - Record of Discussion: A Disciplinary warning or counseling discussion of the employee on substandard job performance with recommendations and/or directions for change.
 - Verbal Warning: A Verbal warning of the employee on substandard job performance with recommendations and/or directions for change.
 - Written Warning: A written statement of substandard job performance detailing the
 - Substandard job performance and required improvements needed in that job performance. The written warning may, but is not required to, detail further disciplinary actions should the employee fail to perform future job actions in an acceptable manner.
 - Letter of Termination Warning: A time limited period in which the employee must demonstrate acceptable job performance or be subject to further disciplinary action or discharge.
 - Termination: The discharge of the employee from the Company

2. Statement of Policy:

Shift Trades are designed to offer employees flexibility in acquiring time away from work.

Details of Policy:

Shift Trade

1. A Shift Trade is defined as an hour for hour exchange with another employee of like certification and qualification.
2. A Shift Trade must occur in the same pay week (Sunday a.m. to Saturday p.m.).
3. A Shift Trade must be submitted at least 3 business days prior to the start of the first shift in the trade. A Shift Trade request must be approved by the Shift Supervisor.
4. It is the responsibility of the employee requesting the trade to confirm the approval to notify all parties involved.
5. A Shift Trade cannot result more than 36 consecutive hours worked.
6. Both Parties must agree to the shift trade.
7. Upon approval of the Shift Trade by a Operations Supervisor or Operations Manager, the employees that have agreed to specific shifts will be responsible for working those shifts. Failure to work the specific shift will be treated as shift abandonment.
8. If the employee finds a qualified employee who is willing to accept the hours, the request for trade shall not be unreasonably denied.

5-4. Use of Communications and Computer Systems

National Health Transport, Inc.'s communication and computer systems are intended primarily for business purposes; however limited personal usage is permitted if it does not hinder performance of job duties or violate any other Company policy. This includes the voice mail, e-mail and Internet systems. Users have no legitimate expectation of privacy in regard to their use of the National Health Transport, Inc. systems.

National Health Transport, Inc. may access the voice mail and e-mail systems and obtain the communications within the systems, including past voice mail and e-mail messages, without notice to users of the system, in the ordinary course of business when the Company deems it appropriate to do so. The reasons for which the Company may obtain such access include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that Company operations continue appropriately during the employee's absence.

Further, National Health Transport, Inc. may review Internet usage to ensure that such use with Company property, or communications sent via the Internet with Company property, are appropriate. The reasons for which the Company may review employees' use of the Internet with Company property include, but are not limited to: maintaining the system; preventing or investigating allegations of system abuse or misuse; assuring compliance with software copyright laws; complying with legal and regulatory requests for information; and ensuring that Company operations continue appropriately during the employee's absence.

The Company may store electronic communications for a period of time after the communication is created. From time to time, copies of communications may be deleted.

The Company's policies prohibiting harassment, in their entirety, apply to the use of Company's

communication and computer systems. No one may use any communication or computer system in a manner that may be construed by others as harassing or offensive based on race, national origin, sex, sexual orientation, age, disability, religious beliefs or any other characteristic protected by federal, state or local law.

Further, since the Company's communication and computer systems are intended for business use, all employees, upon request, must inform management of any private access codes or passwords.

Unauthorized duplication of copyrighted computer software violates the law and is strictly prohibited.

No employee may access, or attempt to obtain access to, another employee's computer systems without appropriate authorization.

Violators of this policy may be subject to disciplinary action, up to and including discharge.

5-5. Use of Social Media

National Health Transport, Inc. respects the right of any employee to maintain a blog or web page or to participate in a social networking, Twitter or similar site, including but not limited to Facebook and LinkedIn. However, to protect Company interests and ensure employees focus on their job duties, employees must adhere to the following rules:

Employees may not post on a blog or web page or participate on a social networking platform, such as Twitter or similar site, during work time or at any time with Company equipment or property.

All rules regarding confidential and proprietary business information apply in full to blogs, web pages and social networking platforms, such as Twitter, Facebook, LinkedIn or similar sites. Any information that cannot be disclosed through a conversation, a note or an e-mail also cannot be disclosed in a blog, web page or social networking site.

Whether the employees are posting something on their own blog, web page, social networking, Twitter or similar site or on someone else's, if the employee mentions the Company and also expresses either a political opinion or an opinion regarding the Company's actions that could pose an actual or potential conflict of interest with the Company, the poster must include a disclaimer. The poster should specifically state that the opinion expressed is his/her personal opinion and not the Company's position. This is necessary to preserve the Company's good will in the marketplace.

Any conduct that is impermissible under the law if expressed in any other form or forum is impermissible if expressed through a blog, web page, social networking, Twitter or similar site. For example, posted material that is discriminatory, obscene, defamatory, libelous or violent is forbidden. Company policies apply equally to employee social media usage.

National Health Transport, Inc. encourages all employees to keep in mind the speed and manner in which information posted on a blog, web page, and/or social networking site is received and often misunderstood by readers. Employees must use their best judgment. Employees with any questions should review the guidelines above and/or consult with their manager. Failure to follow these guidelines may result in discipline, up to and including discharge.

5-6. Personal and Company-Provided Portable Communication Devices

National Health Transport, Inc.-provided portable communication devices (PCDs), including cell phones and personal digital assistants, should be used primarily for business purposes. Employees have no reasonable expectation of privacy in regard to the use of such devices, and all use is subject to monitoring, to the maximum extent permitted by applicable law. This includes, as permitted, the right to monitor personal communications as necessary.

Some employees may be authorized to use their own PCD for business purposes. These employees should work with the IT department to configure their PCD for business use. Communications sent via a personal PCD also may be subject to monitoring if sent through the Company's networks and the PCD must be provided for inspection and review upon request.

All conversations, text messages and e-mails must be professional. When sending a text message or using a PCD for business purposes, whether it is a Company-provided or personal device, employees must comply with applicable Company guidelines, including policies on sexual harassment, discrimination, conduct, confidentiality, equipment use and operation of vehicles. Using a Company-issued PCD to send or receive personal text messages is prohibited at all times and personal use during working hours should be limited to emergency situations.

If employees who use a personal PCD for business resign or are discharged, they will be required to submit the device to the IT department for resetting on or before their last day of work. At that time, the IT department will reset and remove all information from the device, including but not limited to, Company information and personal data (such as contacts, e-mails and photographs). The IT department will make efforts to provide employees with the personal data in another form (e.g., on a disk) to the extent practicable; however, the employee may lose some or all personal data saved on the device.

Employees may not use their personal PCD for business unless they agree to submit the device to the IT department on or before their last day of work for resetting and removal of Company information. This is the only way currently possible to ensure that all Company information is removed from the device at the time of termination. The removal of Company information is crucial to ensure compliance with the Company's confidentiality and proprietary information policies and objectives.

Please note that whether employees use their personal PCD or a Company-issued device, the Company's electronic communications policies, including but not limited to, proper use of communications and computer systems, remain in effect.

Portable Communication Device Use While Driving

Employees who drive on Company business must abide by all state or local laws prohibiting or limiting PCD (cell phone or personal digital assistant) use while driving. Further, even if usage is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while driving, and permitted by law, employees must use a hands-free option and advise the caller that they are unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a cell phone while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

5-7. Camera Phones/Recording Devices

Due to the potential for issues such as invasion of privacy, sexual harassment and loss of productivity, as well as inappropriate disclosure of confidential information, no employee may use a camera phone function on any phone on National Health Transport, Inc. property or while performing work for the Company.

The use of tape recorders, Dictaphones or other types of voice recording devices anywhere on Company property, including to record conversations or activities of other employees or management, or while performing work for the Company, is also strictly prohibited, unless the device was provided to you by the Company and is used solely for legitimate business purposes.

5-8. Inspections

National Health Transport, Inc. reserves the right to require employees while on Company property, or on client property, to agree to the inspection of their persons, personal possessions and property, personal vehicles parked on Company or client property, and work areas. This includes lockers, vehicles, desks, cabinets, work stations, packages, handbags, briefcases and other personal possessions or places of concealment, as well as personal mail sent to the Company or to its clients. Employees are expected to cooperate in the conduct of any search or inspection.

5-9. Smoking

In keeping with National Health Transport intent to provide a safe and healthful work environment, smoking is prohibited throughout the workplace and in any National Health Transport vehicle.

This policy applies equally to all employees, customers, and visitors.

5-10. Personal Visits and Telephone Calls

Disruptions during work time can lead to errors and delays. Therefore, personal telephone calls must be kept to a minimum, and only be made or received after working time, or during lunch or break time.

For safety and security reasons, employees are prohibited from having personal guests visit or accompanying them anywhere in National Health Transport, Inc. facilities other than the reception areas.

5-11. Solicitation and Distribution

To avoid distractions, solicitation by the employee of another employee is prohibited while either employee is on work time. "Work time" is defined as the time the employee is engaged, or should be engaged, in performing his/her work tasks for National Health Transport, Inc. Solicitation of any kind by non-employees on Company premises is prohibited at all times.

Distribution of advertising material, handbills, printed or written literature of any kind in working areas of the Company is prohibited at all times. Distribution of literature by non-employees on Company premises is prohibited at all times.

5-12. Bulletin Boards

Important notices and items of general interest are continually posted on National Health Transport, Inc. bulletin boards. Employees should make it a practice to review bulletin boards frequently. This will assist employees in keeping up with what is current at National Health Transport, Inc. To avoid confusion, employees should not post or remove any material from the bulletin board unless they have approval from the COO or CFO.

5-13. Confidential Company Information

During the course of work, employees may become aware of confidential information about National Health Transport, Inc.'s business, including but not limited to information regarding Company finances, pricing, products and new product development, software and computer programs, marketing strategies, suppliers and customers and potential customers. Employees also may become aware of similar confidential information belonging to the Company's clients. It is extremely important that all such information remain confidential, and particularly not be disclosed to National Health Transport, Inc.'s competitors. Any employee who improperly copies, removes (whether physically or electronically), uses or discloses confidential information to anyone outside of the Company may be subject to disciplinary action up to and including termination. Employees may be required to sign an agreement reiterating these obligations.

5-14. Conflict of Interest and Business Ethics

It is National Health Transport, Inc.'s policy that all employees avoid any conflict between their personal interests and those of the Company. The purpose of this policy is to ensure that the Company's honesty and integrity, and therefore its reputation, are not compromised. The fundamental principle guiding this policy is that no employee should have, or appear to have, personal interests or relationships that actually or potentially conflict with the best interests of the Company.

It is not possible to give an exhaustive list of situations that might involve violations of this policy. However, the situations that would constitute a conflict in most cases include but are not limited to:

1. holding an interest in or accepting free or discounted goods from any organization that does, or is seeking to do, business with the Company, by any employee who is in a position to directly or indirectly influence either the Company's decision to do business, or the terms upon which business would be

- done with such organization;
2. holding any interest in an organization that competes with the Company;
 3. being employed by (including as a consultant) or serving on the board of any organization which does, or is seeking to do, business with the Company or which competes with the Company; and/or
 4. profiting personally, e.g., through commissions, loans, expense reimbursements or other payments, from any organization seeking to do business with the Company.

A conflict of interest would also exist when a member of the employee's immediate family is involved in situations such as those above.

This policy is not intended to prohibit the acceptance of modest courtesies, openly given and accepted as part of the usual business amenities, for example, occasional business-related meals or promotional items of nominal or minor value.

It is the employee's responsibility to report any actual or potential conflict that may exist between the employee (and the employee's immediate family) and the Company.

5-15. Use of Facilities, Equipment and Property, Including Intellectual Property

Equipment essential in accomplishing job duties is often expensive and may be difficult to replace. When using property, employees are expected to exercise care, perform required maintenance, and follow all operating instructions, safety standards and guidelines.

Employees should notify their supervisor if any equipment, machines, or tools appear to be damaged, defective or in need of repair. Prompt reporting of loss, damages, defects and the need for repairs could prevent deterioration of equipment and possible injury to employees or others. Supervisors can answer any questions about the employees' responsibility for maintenance and care of equipment used on the job.

Employees also are prohibited from any unauthorized use of the Company's intellectual property, such as audio and video tapes, print materials and software.

Improper, careless, negligent, destructive, or unsafe use or operation of equipment can result in discipline, up to and including discharge.

Further, the Company is not responsible for any damage to employees' personal belongings unless the employee's supervisor provided advance approval for the employee to bring the personal property to work.

5-16. Health and Safety

The health and safety of employees and others on Company property are of critical concern to National Health Transport, Inc. The Company intends to comply with all health and safety laws applicable to our business. To this end, we must rely upon employees to ensure that work areas are kept safe and free of hazardous conditions. Employees are required to be conscientious about workplace safety, including proper operating methods, and recognize dangerous conditions or hazards. Any unsafe conditions or potential hazards should be reported to management immediately, even if the problem appears to be corrected. Any suspicion of a concealed danger present on the Company's premises, or in a product, facility, piece of equipment, process or business practice for which the Company is responsible should be brought to the attention of management immediately.

Periodically, the Company may issue rules and guidelines governing workplace safety and health. The Company may also issue rules and guidelines regarding the handling and disposal of hazardous substances and waste. All employees should familiarize themselves with these rules and guidelines, as strict compliance will be expected.

In the case of accidents that result in injury, regardless of how insignificant the injury may appear, employees should immediately notify the Shift Commander and COO or the immediate supervisor.

Such reports are necessary to comply with laws and initiate insurance and workers' compensation benefits procedures.

5-17. Hiring Relatives/Employee Relationships

A familial relationship among employees can create an actual or at least a potential conflict of interest in the employment setting, especially where one relative supervises another relative. To avoid this problem, National Health Transport, Inc. may refuse to hire or place a relative in a position where the potential for favoritism or conflict exists.

In other cases, such as personal relationships where a conflict or the potential for conflict arises, even if there is no supervisory relationship involved, the parties may be separated by reassignment or discharged from employment, at the discretion of the Company. Accordingly, all parties to any type of intimate personal relationship must inform management.

If two employees marry, become related, or enter into an intimate relationship, they may not remain in a reporting relationship or in positions where one individual may affect the compensation or other terms or conditions of employment of the other individual. The Company generally will attempt to identify other available positions, but if no alternate position is available, the Company retains the right to decide which employee will remain with the Company.

For the purposes of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

5-18. Employee Dress and Personal Appearance

Dress, grooming, and personal cleanliness standards contribute to the morale of all employees and affect the business image National Health Transport presents to the community.

During business hours or when representing National Health Transport, you are expected to present a clean, neat, and tasteful appearance. You should dress and groom yourself according to the requirements of your position and accepted social standards.

Your supervisor or department head is responsible for establishing a reasonable dress code appropriate to the job you perform. Consult your supervisor if you have questions as to what constitutes appropriate appearance. Where necessary and appropriate, a reasonable accommodation may be made based on a disability, religious belief, or other legally protected characteristic.

The standard uniform for field personnel is as follows:

All personnel, while on duty shall carry a valid CPR card, First Aid, a valid class E license, hack license and/or all other state certifications that apply to his or her position. In lieu of carrying the original certificates,

personnel may carry a photocopy of the certificates. Each employee must provide National Health Transport with a copy of each certification for inclusion in their personnel file.

Male employees are not allowed to have goatees or excessive sideburns. Mustaches must be trimmed at the corner of the lips and must comply with OSHA standards and regulations, finger nails must be trimmed, hair cut is to be at collar length and above ear line. NO PONY TAILS.

Female employees must have their hair picked-up in a ponytail or in a bun. Females may wear one set of post type earrings but are not permitted to wear earrings that dangle (hoops) etc., no nose, eyebrow, lip or tongue rings are allowed. Male earrings are not permitted. No braids are permitted for men or women. Field personnel are not permitted to wear necklaces while on duty for safety reasons.

National Health Transport will provide a polo type shirt with short sleeves. Reasonable personal tailoring is permitted.

Only navy-blue trousers approved by the company will be allowed to be worn.

All EMT's and paramedics are required to wear an operating watch with a second hand.

A belt must be worn. The belt must be black leather with a silver buckle. Reasonable variations in buckle styles are permitted.

Black shoes or boots shall be worn with the uniform. Boots or shoes with steel toe are preferable for safety. All boots and shoes shall have rubber soles and heels. Boots and shoes shall be cleaned and polished periodically to present a clean and professional appearance. Under no circumstances will trousers be tucked inside the boots.

White, Black, Navy Blue socks shall be worn with the uniform.

Uniforms shall always be kept neat . Uniforms shall only be worn in their entirety, even if the employee is off duty. If the employee is off duty and is wearing a company uniform it must be in a professional environment. Therefore; it must not be worn where intoxicants are consumed, except in restaurants where you are consuming food, but no alcoholic beverages. Remember while you are in uniform you are representing the Company.

Wearing insignia pins such as AHA (American Heart Association) pins and symbols relating to the profession is permitted but must be approved by administration. Other items such as caps, dangling earrings or anything that tends to distract from the uniform are not permitted to be worn in an exposed fashion.

Uniform Issue Procedures:

All field personnel shall be issued the following uniforms:

- A) Two (2) Polo shirts
- B) Company picture ID
- C) Company Jacket

Each prospective employee completing the training program will be authorized to pick up the company uniform from the authorized suppliers. The issuing of the uniforms shall be coordinated through the Operations Manager. Uniform suppliers will not issue any uniform parts without prior authorization by the Operations Manager.

Replacement of uniform parts is the responsibility of the employee.

Upon termination of employment, personnel will return all company property to the Shift Commander or Operations Manager prior to receiving their final paycheck. The cost of any unreturned property will be deducted from the final paycheck.

5-19. Publicity/Statements to the Media

All media inquiries regarding the position of the Company as to any issues must be referred to the President. Only the President is authorized to make or approve public statements on behalf of the Company. No employees, unless specifically designated by the President, are authorized to make those statements on behalf of Company. Any employee wishing to write and/or publish an article, paper, or other publication on behalf of the Company must first obtain approval from the President.

5-20. Operation of Vehicles

All employees authorized to drive Company-owned or leased vehicles or personal vehicles in conducting Company business must possess a current, valid driver's license and an acceptable driving record. Any change in license status or driving record must be reported to management immediately.

Employees must have a valid driver's license in their possession while operating a vehicle off or on Company property. It is the responsibility of every employee to drive safely and obey all traffic, vehicle safety, and parking laws or regulations. Drivers must demonstrate safe driving habits at all times.

Company-owned or leased vehicles may be used only as authorized by management.

Portable Communication Device Use While Driving

Employees who drive on Company business must abide by all state or local laws prohibiting or limiting portable communication device (PCD) use, including cell phones or personal digital assistants, while driving. Further, even if use is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while driving, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while the employees are driving, and permitted by law, they must use a hands-free option and advise the caller that they are unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a PCD while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Texting and e-mailing while driving is prohibited in all circumstances.

5-21. Operating Incidents

Operating Incidents

National Health Transport provides quality and professional service with the patient's best interest at all time. Should a situation that questions quality or professional services arise, a fact finding investigation will be initiated immediately and a resolution forth coming.

All personnel are required to notify the appropriate Dispatcher, Supervisor or Manager immediately with any incident involving patient care, protocols, customer service, vehicles or any type of grievance.

Listed below are 4 areas identified with steps to follow should any of the above be reported. This list is not all inclusive and may require other forms of investigating, notification and resolution at any time by any manager of National Health Transport.

Violations of Protocols

National Health Transport uses EMS protocols under the instruction of its medical director for the transportation and treatment of all patients. All EMT's and Paramedics are required to work within the Florida Regional Common EMS Protocols. In the unlikely event of a protocol variation whether intentional or accidental the following actions must be taken:

- A supervisor will be notified immediately
- A supervisor or COO will be assigned to conduct and direct the investigation.
- The medical director will be notified of initial findings and make recommendations of whether the employee will be removed from the schedule pending investigation or not
- If the employee is removed by the Medical Director from the schedule, the Scheduling Department will be notified by the supervisor or Manager conducting the investigation
- All parties involved will be interviewed by the Supervisor or Manager conducting the investigation. Written incident reports will be submitted and reviewed by the supervisor or COO conducting the investigation
- The COO will be notified of the initial investigation and concluding results
- The Medical Director will be informed of all findings in the investigation.
- Closing documentation, a resolution and disciplinary action, if warranted, will be recorded and administered by the Supervisor or COO and placed in the employee's personnel file

Patient Incidents

National Health Transport treats and moves patients with quality equipment, job knowledge and the patient's safety in mind. Should a situation that questions quality, equipment failure or misuse and/or anything or anyone that caused harm to the patient arise, a fact finding investigation will be initiated immediately. In the unlikely event of a patient incident the following actions must be taken:

- A supervisor will be notified immediately
- A supervisor or Manager will be assigned to conduct and direct the investigation.
- If the employee is removed by the supervisor or Manager from the schedule, Scheduling Department will be notified conducting the investigation
- All parties involved will be interviewed by the Supervisor or Manager conducting the investigation. Written incident reports will be submitted and reviewed by the supervisor or Manager conducting the

investigation

- Closing documentation, a resolution and disciplinary action, if warranted, will be recorded and administered by the Supervisor or Manager and placed in the employee's personnel file

Vehicle Incident with or Without Damage

National Health Transport has a fleet of ambulances that are on a regular maintenance program to ensure high quality performance. Should a situation that questions quality, equipment failure or operator misuse that causes damage to a vehicle or harm to a patient a fact finding investigation will be initiated immediately using the following actions:

- A Dispatcher will be notified immediately
- A Dispatcher or Manager will be assigned to conduct and direct the investigation.
- If the employee is removed by the supervisor or Manager from the schedule, Scheduling Department will be notified conducting the investigation
- All parties involved will be interviewed by the Dispatcher or Manager conducting the investigation. Written incident reports will be submitted and reviewed by the supervisor or Manager conducting the investigation
- The supervisor or Manager conducting the investigation will review all facts and will make a decision on Disciplinary Action up to and including termination.
- Removal of driving status may be permanent or temporary depending on the findings of the investigation. The Dispatcher or Manager conducting the investigation will notify the employee, scheduling and Human Resources of their decision
- Closing documentation, a resolution and disciplinary action, if warranted, will be recorded and administered by the Dispatcher or Manager and placed in the employee's personnel file
- Note: If an accident is involved, post-accident drug testing will be conducted as well. Positive results will result in immediate termination

Driving and Vehicle Procedures

Seat belts - All persons riding in any company owned vehicle must use seat belts and shoulder restraints (where available) at all times when the vehicle is in motion. If you are involved in an accident while riding in a company vehicle and do not have your seat belt on, you may not be covered by worker's compensation and will be subject to disciplinary action.

- Fueling - due to the emergency nature of the ambulance service, and the possibility of traveling long distances, it is necessary to ensure that all vehicles always have adequate fuel supplies . Each vehicle shall be refueled as soon as possible after reaching the one-half full mark on the vehicle's fuel gauge or at the end of each shift.
 - When refueling, crews are to use self-service pumps and are to be aware of the type of fuel that their vehicle uses. Refueling with the wrong fuel is an inexcusable offense and disciplinary action will follow.
 - Vehicles are to be turned off while refueling.
- Company vehicles are to be used for official purposes while conducting company business. Employee's family members, friends or any other unauthorized personnel are not permitted to drive or

ride in the vehicle. When transporting a patient to a receiving facility, one family member may accompany the patient either in the front cab or patient compartment and must wear a seat belt. The employee performing patient care may prevent family members from riding in the patient compartment. Personnel must avoid overcrowding the vehicle, keeping the care of the patient in mind when allowing relatives to accompany the patient.

- Drivers are personally responsible for any violation, citation or parking tickets issued either directly to the driver or to the vehicle while in the driver's possession. Drivers should not expect company vehicles to receive special parking consideration except as provided by the law.
 - All personnel shall report any change in driver license status to management immediately. This shall include citations received while off-duty.
- Insurance and Accident Reports:
 - It is required that all vehicular accidents, either while in motion or while parked, be promptly reported and fully documented regardless of the amount of damage and/or personal injury to either party. This report shall be completed immediately and submitted to a Manager on the appropriate form.
 - In the event of a vehicular accident, care of injured persons must take the highest priority. If there are no injuries, company personnel are to attempt to locate witnesses to the accident.
 - In the event of a vehicular accident, a police report **MUST** be completed in addition to the company accident report form. The reports will be reviewed by management and forwarded to the insurance carrier.
 - The driver of a company vehicle involved in a vehicular accident may be relieved of duty, pending investigation. The driver may be required to take a drug test by the supervisor.
 - In the event of a personal injury, the employee will complete the company's Injury Report immediately or within twenty-four (24) hours of the injury or when practical and submit the report to management. If the employee is in need of medical attention, he shall coordinate obtaining this
- In order to prevent careless backing accidents, it shall be standing procedure for the attendant to dismount the vehicle and guide the driver in all instances when a company vehicle is being backed. If the driver is alone, he shall dismount from the vehicle and survey the area behind the vehicle prior to carefully and slowly backing up. The driver is cautioned to receive backing instructions only from his/her partner and not from other individuals who may not give the driver their complete attention. These same procedures will be used when maneuvering the vehicle in small spaces.
- Response codes:
 - Code 3 - Emergency response. Emergency lights and siren are employed throughout the entire run. Shutdown lights and siren upon approaching the scene. If a patient's condition deteriorates while transporting to a receiving facility and the attendant has determined that non-emergency response to the facility will further jeopardize the condition, then code 3 responses shall be warranted. Dispatch must be notified anytime a unit is responding or transporting a patient Code 3. Dispatch will contact the on-duty Supervisor.
 - Code 1 - Non-emergency response or routine response. Comply with all posted speed, traffic signs and traffic devices. Emergency lights and siren will not be used, as no life hazard exists.

Any unauthorized use of lights and sirens and/or PA system will be subject to Administrative Action up to and including termination.

- When responding to an emergency scene with emergency lights and siren being used, all traffic laws, signs and signals will be obeyed including school zones. When approaching a signal-controlled intersection with a red light, stop, or yield sign, the vehicle is required to come to a FULL STOP. Only after a complete stop may you proceed cautiously once you and you partner (if present in the front seat) have cleared all lanes of oncoming traffic. Always be prepared to stop at any time. Continuous use of defensive driving techniques is mandatory. Remember that the use of emergency warning equipment does not relieve the driver of his/her obligation to drive in a safe manner. Under no circumstances should an emergency vehicle closely follow another vehicle when the other vehicle is using its emergency lights and siren.
- When transporting a patient from the airport to a hospital or hospital to the airport the physician and flight crew may from time to time request a code 3 response. This is no different than any other situation; the code 3 response must be cleared through dispatch and management.
- For security purposes anytime a vehicle is to be parked anywhere and left unattended the engine and batteries are to be turned off and all doors and compartments are to be locked. Batteries must be turned on before the unit is started.

5-22. Business Expense Reimbursement

National Health Transport will reimburse employees for reasonable National Health Transport expenses incurred while on assignments away from the normal work location. All National Health Transport travel must be approved in advance by an immediate supervisor.

Employees whose travel plans have been approved are responsible for making their own travel arrangements.

When approved, the actual costs of travel, meals, lodging, and other expenses directly related to accomplishing National Health Transport objectives will be reimbursed by National Health Transport. Employees are expected to limit expenses to reasonable amounts.

Employees who are involved in an accident while traveling on business must promptly report the incident to their immediate supervisor. Vehicles owned, leased, or rented by National Health Transport may not be used for personal use without prior approval.

When travel is completed, employees should submit completed travel expense reports within 30 days. Reports should be accompanied by receipts for all individual expenses.

Employees should contact their supervisor for guidance and assistance on procedures related to travel arrangements, expense reports, reimbursement for specific expenses, or any other National Health Transport issues.

Abuse of this National Health Transport expenses policy, including falsifying expense reports to reflect costs not incurred by the employee, can be grounds for disciplinary action, up to and including termination of employment.

5-23. Recycling

National Health Transport supports environmental awareness by encouraging recycling and waste management in its business practices and operating procedures. This support includes a commitment to the purchase, use, and disposal of products and materials in a manner that will best utilize natural resources and minimize any negative impact on the earth's environment.

Special recycling receptacles have been set up to promote the separation and collection of the following recyclable materials at National Health Transport:

- computer paper
- white high grade or bond paper

National Health Transport encourages reducing and, when possible, eliminating the use of disposable products. Source reduction decreases the consumption of valuable resources through such workplace practices as:

* turning off lights when not in use

Whenever possible, employees of National Health Transport are encouraged to purchase products for the workplace that contain recycled or easily recyclable materials. Buying recycled products supports recycling and increases the markets for recyclable materials.

By recycling, National Health Transport is helping to solve trash disposal and control problems facing all of us today.

5-24. References

National Health Transport, Inc. will respond to reference requests through the Human Resources Department. The Company will provide general information concerning the employee such as date of hire, date of discharge, and positions held. Requests for reference information must be in writing, and responses will be in writing. Please refer all requests for references to the Human Resources Department.

Only the Human Resources Department may provide references.

5-25. If You Must Leave Us

Should any employees decide to leave the Company, we ask that they provide a Supervisor with at least two (2) weeks advance notice of departure. Thoughtfulness will be appreciated. All Company property including, but not limited to, keys, security cards, parking passes, laptop computers, fax machines, uniforms, etc., must be returned at separation. Employees also must return all of the Company's Confidential Information upon separation. To the extent permitted by law, employees will be required to repay the Company (through payroll deduction, if lawful) for any lost or damaged Company property. As noted previously, all employees are employed at-will and nothing in this handbook changes that status.

5-26. A Few Closing Words

This handbook is intended to give employees a broad summary of things they should know about National Health Transport, Inc. The information in this handbook is general in nature and, should questions arise, any member of management should be consulted for complete details. While we intend to continue the policies, rules and benefits described in this handbook, National Health Transport, Inc., in its sole discretion, may always amend, add to, delete from or modify the provisions of this handbook and/or change its interpretation of any provision set forth in this handbook. Employees should not hesitate to speak to management if they have any questions about the Company or its personnel policies and practices.

Section 6 - Florida Addendum

6-1. Domestic Violence Leave

Employees who have worked for the Company for at least three (3) months may be granted up to three (3) days of unpaid leave in any 12-month period if the employee or a family or household member of the employee is the victim of domestic violence.

Leave may be used to:

- seek an injunction for protection against domestic violence or an injunction for protection in cases of repeat violence, dating violence or sexual violence;
- obtain medical care or mental health counseling, or both, for the employee or a family or household member to address physical or psychological injuries resulting from the act of domestic violence;
- obtain services from a victim-services organization, including, but not limited to, a domestic violence shelter or program or a rape crisis center as a result of the act of domestic violence;
- make their home secure from the perpetrator of the domestic violence or to seek new housing to escape the perpetrator; or
- seek legal assistance in addressing issues arising from the act of domestic violence.

"Family or household member" means spouses, former spouses, persons related by blood or marriage, persons who are presently residing together as if a family or who have resided together in the past as if a family, and persons who are parents of a child in common regardless of whether they have been married. With the exception of persons who have a child in common, the family or household members must be currently residing or have in the past resided together in the same single dwelling unit.

Except in cases of imminent danger to the health or safety of the employees or their family or household member, three (3) days advance notice of the need for leave is required. Sufficient documentation of the act of domestic violence, such as a restraining order, police report or order to appear in court, is also required. Requests for leave and documents in connection with this leave will be kept confidential to the extent permitted by law.

Section 7 - Maryland Addendum

7-1. Pregnancy Accommodations

In compliance with Maryland law, if a pregnant employee requests an accommodation for a disability caused or contributed to by pregnancy, National Health Transport, Inc. will explore reasonable accommodations with the pregnant employee, and it will endeavor to provide a reasonable accommodation unless doing so would impose an undue hardship on National Health Transport, Inc. Such accommodations may include:

1. changing the employee's job duties;
2. changing the employee's work hours, relocating the employee's work area;
3. providing mechanical or electrical aids;
4. transferring the employee to a less strenuous or less hazardous position;
5. providing leave.

The Company may require a certification from the employee's health care provider concerning the medical advisability of a reasonable accommodation to the same extent a certification is required for other temporary disabilities. A certification should include:

1. the date the reasonable accommodation became medically advisable;
2. the probable duration of the reasonable accommodation; and
3. an explanatory statement as to the medical advisability of the reasonable accommodation.

Employees with questions or concerns regarding this policy or who would like to request an accommodation should contact the Employee's Manager.

7-2. Earned Sick and Safe Leave

Eligibility

The Company provides paid Earned Sick and Safe Leave (ESSL) to eligible employees who regularly work at least 12 hours per week in Maryland pursuant to the Maryland Healthy Working Families Act. For employees who work in Maryland who are eligible for sick time under the general paid Sick Days policy, this policy applies solely to the extent it provides greater benefits/rights on any specific issue or issues than the general paid Sick Days policy.

Accrual

Employees begin to accrue ESSL pursuant to this policy on February 11, 2018, or at the start of employment, whichever is later. Employees accrue ESSL at a rate of one (1) hour for every 30 hours worked, up to a maximum accrual of 40 hours of paid ESSL per calendar year, and 64 hours of paid ESSL at any time.

Employees will not accrue ESSL during any: 1) two- (2-) week pay period in which the employee worked fewer than 24 hours total; 2) one- (1-) week pay period if the employee worked fewer than a combined total of 24 hours in the current and the immediately preceding pay period; or 3) pay period in which the employee is paid twice a month regardless of the number of weeks in a pay period and the employee worked fewer than 26

hours in the pay period.

Exempt employees are assumed to work 40 hours in each workweek unless their normal workweek is less than 40 hours, in which case ESSL accrues based upon that normal workweek.

For purposes of this policy, the calendar year is the consecutive 12-month period beginning January 1 and ending on December 31.

Usage

Employees may begin using ESSL under this policy after the 106th calendar day of employment. Employees may use ESSL in the smallest increment that the Company's payroll system uses to account for absences or work time, and no employee will be required to take ESSL in an increment of more than four (4) hours. The employee may not use more than 64 hours of accrued ESSL per calendar year.

The Employee may use ESSL under this policy for the following reasons:

1. to care for or treat the employee's mental or physical illness, injury or condition or to obtain preventive medical care;
2. to care for a family member with a mental or physical illness, injury or condition, or to obtain preventive medical care for a family member;
3. for maternity or paternity leave; or
4. if the absence from work is due to domestic violence, sexual assault or stalking committed against the employee or the employee's family member and the leave is used either during the time that the employee has temporarily relocated due to domestic violence, sexual assault or stalking, or to obtain (for the employee or the employee's family) any of the following:
 - medical or mental health attention that is related to the domestic violence, sexual assault or stalking;
 - services from a victim services organization related to the domestic violence sexual assault or stalking; or
 - legal services or proceedings related to the domestic violence sexual assault or stalking.

For purposes of this policy, family member means: 1) a biological, adopted, foster or stepchild of the employee; a child for whom the employee has legal or physical custody or guardianship; or a child for whom the employee stands in loco parentis, regardless of child's age; 2) a biological, adoptive, foster or stepparent of the employee or the employee's spouse; legal guardian of the employee; or an individual who acted as a parent or stood in loco parentis to the employee or the employee spouse when the employee or the employee's spouse was a minor; 3) spouse of the employee; 4) a biological, adoptive, foster or stepgrandparent of the employee; 5) a biological, adoptive, foster or stepgrandchild of the employee; or 6) a biological, adopted, foster or stepsibling of the employee.

Unless the employee advises otherwise, the Company will assume, subject to applicable law, that employees want to use available earned sick and safe leave for absences for reasons set forth above, and employees will be paid for such absences to the extent they have ESSL available.

Employees will be notified of available ESSL each time wages are paid.

Notice and Documentation

To use ESSL, the employee must request leave from the Company as soon as practicable after determining the

need for leave and provide notification of the anticipated duration of the leave. When requesting ESSL that is foreseeable, employees must provide advance notice of seven (7) days before the date the ESSL will begin. When requesting ESSL that is not foreseeable, employees must provide notice as soon as practicable. Failure to provide such notice may result in denial of the employee's request for ESSL if the absence will cause a disruption to the Company.

The Company may require the employees to provide verification that the leave was used in accordance with applicable law when they use ESSL:

- for more than two (2) consecutive scheduled shifts; or
- between the first 107th and 120th calendar days of employment and the employee agreed to provide verification at the time of hire.

If the employees fail to provide such verification, the Company may deny any subsequent request from them to take ESSL for the same reason.

The employee's use of ESSL will not be conditioned upon searching for or finding a replacement worker.

Payment

ESSL under this policy will be calculated based on the employee's wage rate at the time of absence.

Carryover and Payout

The employee may carry over up to 40 hours of accrued, unused ESSL under this policy. Accrued but unused ESSL under this policy will not be paid at separation.

Enforcement and Retaliation

The Company prohibits retaliatory or adverse action against employees who exercise their rights in good faith concerning this policy. Employees have the right to file a complaint with the Commissioner of Labor and Industry, or bring a civil action to enforce an order against the Company if their rights are restrained.

Employees with questions regarding this policy can contact the CFO and/or CFO.

7-3. Witness Leave

Employees called to serve as a witness in a judicial proceeding must notify their supervisor as soon as possible.

Employees will not be compensated for time away from work to participate in a court case, but may use available vacation and personal time to cover the period of absence.

Employees attending judicial proceedings in response to a subpoena will not be terminated for their absence.

General Handbook Acknowledgment

This Employee Handbook is an important document intended to help employees become acquainted with National Health Transport, Inc. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the Company's operations may change, the contents of this Handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of management.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Handbook.

I have received and read a copy of National Health Transport, Inc.'s Employees Handbook. I understand that the policies, rules and benefits described in it are subject to change at the sole discretion of the Company at any time.

I further understand that my employment is terminable at will, either by myself or the Company, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.

I understand that no representative of National Health Transport, Inc. other than the President may alter "at will" status and any such modification must be in a signed writing.

I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the Company's Employee Handbook.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this acknowledgment should be given to management - it will be filed in your personnel file.

Receipt of Non-Harassment Policy

It is National Health Transport, Inc.'s policy to prohibit intentional and unintentional harassment of or against job applicants, contractors, interns, volunteers or employees by another employee, supervisor, vendor, customer or any third party on the basis of actual or perceived race, color, creed, religion, national origin, ancestry, citizenship status, age, sex or gender (including pregnancy, childbirth and pregnancy-related conditions), gender identity or expression (including transgender status), sexual orientation, marital status, military service and veteran status, physical or mental disability, genetic information or any other characteristic protected by applicable federal, state or local laws (referred to as "protected characteristics"). Such conduct will not be tolerated by National Health Transport, Inc.

The purpose of this policy is not to regulate our employees' personal morality, but to ensure that no one harasses another individual in the workplace, including while on Company premises, while on Company business (whether or not on Company premises) or while representing the Company. In addition to being a violation of this policy, harassment or retaliation based on any protected characteristic as defined by applicable federal, state, or local laws also is unlawful. For example, sexual harassment and retaliation against an individual because the individual filed a complaint of sexual harassment or because an individual aided, assisted or testified in an investigation or proceeding involving a complaint of sexual harassment as defined by applicable federal, state, or local laws are unlawful.

Harassment Defined

Harassment generally is defined in this policy as unwelcome verbal, visual or physical conduct that denigrates or shows hostility or aversion towards an individual because of any actual or perceived protected characteristic or has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Harassment can be verbal (including slurs, jokes, insults, epithets, gestures or teasing), visual (including offensive posters, symbols, cartoons, drawings, computer displays, text messages, social media posts or e-mails) or physical conduct (including physically threatening another, blocking someone's way, etc.). Such conduct violates this policy, even if it does not rise to the level of a violation of applicable federal, state or local laws. Because it is difficult to define unlawful harassment, employees are expected to behave at all times in a manner consistent with the intended purpose of this policy.

Sexual Harassment Defined

Sexual harassment can include all of the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities and other verbal, visual or physical conduct of a sexual nature when:

- submission to that conduct or those advances or requests is made either explicitly or implicitly a term or condition of an individual's employment; or
- submission to or rejection of the conduct or advances or requests by an individual is used as the basis for employment decisions affecting the individual; or
- the conduct or advances or requests have the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Examples of conduct that violate this policy include:

1. unwelcome flirtations, leering, whistling, touching, pinching, assault, blocking normal movement;
2. requests for sexual favors or demands for sexual favors in exchange for favorable treatment;
3. obscene or vulgar gestures, posters or comments;
4. sexual jokes or comments about a person's body, sexual prowess or sexual deficiencies;
5. propositions or suggestive or insulting comments of a sexual nature;
6. derogatory cartoons, posters and drawings;
7. sexually-explicit e-mails, text messages or voicemails;
8. uninvited touching of a sexual nature;
9. unwelcome sexually-related comments;
10. conversation about one's own or someone else's sex life;
11. conduct or comments consistently targeted at only one gender, even if the content is not sexual; and
12. teasing or other conduct directed toward a person because of the person's gender.

Reporting Procedures

If the employee has been subjected to or witnessed conduct which violates this policy, the employee should immediately report the matter to Controller. If the employee is unable for any reason to contact this person, or if the employee has not received an initial response within five (5) business days after reporting any incident of what the employee perceives to be harassment, the employee should contact the President. If the person toward whom the complaint is directed is one of the individuals indicated above, the employee should contact any higher-level manager in the reporting hierarchy.

Investigation Procedures

Every report of perceived harassment will be fully investigated, and corrective action will be taken where appropriate. All complaints will be kept confidential to the extent possible, but confidentiality cannot be guaranteed. All employees must cooperate with all investigations conducted pursuant to this policy.

Retaliation Prohibited

In addition, the Company will not allow any form of retaliation against individuals who report unwelcome conduct to management or who cooperate in the investigations of such reports in accordance with this policy. If the employee has been subjected to any such retaliation, the employee should report it in the same manner in which the employee would report a claim of perceived harassment under this policy.

Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including termination.

I have read and I understand National Health Transport, Inc.'s Non-Harassment Policy.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this receipt should be given to management - it will be filed in your personnel file.

NATIONAL HEALTH TRANSPORT

TREATMENT PROTOCOLS

FROM THE MEDICAL DIRECTOR:

The following document is designed to enhance the delivery of state of the art emergency care to all those we serve. It reflects the latest in pre-hospital research as well as guidelines promulgated by local, state and national organizations, including the American Heart Association.

The general and cardiac treatment protocols once again use icons for rapid scanning. The icons indicate Signs and Symptoms, Basic and Advanced Life Support intervention, Physician Consult indications, Pediatric Care, Cautions, and Contraindications for procedures and medication administration.

Field personnel are reminded that “patients do not know protocols.” More precisely, patients often present with an injury or illness which dictates the use of multiple protocols at one time. Each patient should be evaluated thoroughly to assure the most prudent use of the appropriate protocol(s). Key information during the initial physical evaluation, medical questioning, and the scene survey are all-important components of a patient care plan. Areas of concern regarding the patient’s surroundings, questionable history and/or other “red flags” should always be reported to the receiving hospital personnel.

I hereby authorize use of these protocols by EMT's and Paramedics working for National Health Transport.

In addition, National Health Transport will utilize Miami-Dade County’s Trauma Transport Protocol (TTP) whenever applicable.

Michael J. Zappa, M.D., FACEP

Medical Director

September 2015

HOW TO USE ICON PROTOCOLS

The protocols use an icon system, which places all the treatment modalities for each problem in the same location. BLS, ALS, adult and pediatric protocols are grouped together by topic.



Information listed under this icon points out signs, symptoms, and other pertinent points relating to the specific protocol.



BASIC LIFE SUPPORT

Information listed under this icon indicates the treatment that is authorized for EMT's and Paramedics to use either when arriving first on scene or in conjunction with the ALS rescue crew.



ADVANCED LIFE SUPPORT

Information listed under this icon indicates the treatment that is authorized for Paramedics to use without having to contact medical control.



PHYSICIAN CONSULT

Treatments listed under this icon require physician's orders prior to treatment either from the receiving facility or Medical Director.



PEDIATRIC

This icon indicates treatments for pediatric patients



CAUTION

Information under this icon serves as cautionary notes related to that particular protocol.



DANGER CONTRAINDICATIONS

Information under this icon identifies treatments or conditions, which are contraindicated for that particular protocol.

BLS STANDARD REQUIREMENTS

SECURE AIRWAY

- Positioning:
 - Recovery position: Altered mental status, seizures (Contraindicated in cervical spine injuries).
 - Head tilt chin lift
 - Modified jaw thrust (Cervical spine injury)
 - Nasal pharyngeal airway for conscious patients
 - Oral pharyngeal airway for unconscious patients

ASSESS BREATHING/VENTILATION

- Low flow oxygen: For all patients not requiring high flow oxygen or assisted ventilation's
- High flow oxygen: For patients with a ventilatory rate greater than 24 breaths per minute
- BVM: respiratory arrest or an altered mental status with a respiratory rates less then 8 breaths per minute
- EOA: after hyperventilation if ALS crew is delayed

CIRCULATION

- Carotid & radial: rate & quality

VITAL SIGNS

- Blood pressure
- Pulse: rate & quality
- Respiration's: rate & quality
- Pulse ox: on room air, prior to oxygen administration

Apply AED on all unconscious patients.

ALS STANDARD REQUIREMENTS

To be performed on all ALS patients

Primary Survey

- Airway: secure airway as appropriate
- Breathing
- Circulation: check carotid and radial pulses
- Disability: AVPU
- Neurological Exam: level of consciousness, gross motor & sensory

Oxygen

- Pulse ox: pre & post oxygen administration
- Ventilation: support as needed

Lung Sounds

ECG

- ECG monitoring
- 12 lead when applicable

Vital Signs

- Blood pressure
- Pulse: rate & quality
- Respiration: rate & quality
- Skin: color, condition, temperature

IV

Blood Glucose level

- known diabetics and altered mental status patients

History & Physical Exam

- see protocol

Patients will be transported to the most appropriate facility as directed by the patient's condition.

HISTORY AND PHYSICAL EXAM

When applicable the following history and physical exam should be performed on all medical patients. Refer to BTLS for trauma patients.

History

- Chief Complaint
- History of the present illness: **O, P, Q, R, S, T, A**
 - **O-** On set (time/ gradual or sudden)
 - **P-** Provoke (palliative, previous episodes)
 - **Q-** Quality (of pain)
 - **R-** Region (radiation)
 - **S-** Severity (1-10)
 - **T-** Time (frequency, duration)
 - **A-** Associated (signs & symptoms)
- Past medical History
 - Allergies to medications
 - Medications (prescription & non-prescription)

Limited Physical Exam

- General:* position, level of distress
- Neck:* Jugular Venous Distension (JVD), trachea midline
- Chest:* lung sounds (presence, type)
- Heart:* (rate/rhythm)
- Abdomen:* soft or firm, tenderness, distended, palpable masses
- Extremities:* distal pulses, edema, cyanosis
- Neurological:* level of consciousness, gross motor & sensory
- Skin:* color, temperature, rashes, lesions, bites & lacerations

CARDIAC TREATMENT

PROTOCOLS

CHEST PAIN



S/S

- A cardiac alert is called when ST elevation > 1mm exists in 2 or more contiguous leads. Inferior leads- II, III or AVF, Anterior leads- V1-V4, Lateral leads- I, AVL, V5 –V6



BASIC LIFE SUPPORT

- BLS standard requirements.
- Allow patient to sit to maintain their own airway.
- EMT's may assist patient in taking their own prescribed nitroglycerin providing their BP is greater than 110mm/hg systolic and they have not taken more than 3 prior to our arrival.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- 12 lead EKG. Perform a V4r if ST elevation is noted in II, III or AVF. If noted in V4r run IV @ 250cc/hr.
- Aspirin 162 mg PO (if not contraindicated).
- Nitroglycerin 0.4mg S/L. May repeat to a total of 3 doses as long as systolic remains above 100mm/hg. If patient is a cardiac alert you may go directly to IV Nitro.
- If ST elevation is noted in 2 or more contiguous leads or pain is not fully relieved with sublingual Nitro:
 - IV Nitroglycerin 10 mcg/min via IV pump. Increase 10mcg/min every 3-5 mins until pain is relieved or minimum BP is met. (Min. BP is 100mm/hg sys. Must have saline line primed and hanging in case hypotension ensues).



PEDIATRIC

- Call for orders for treatment of pediatric chest pain.



CAUTION

- Administration of nitrates should be accomplished with caution in patients with right ventricular infarct. These patients may be sensitive to nitrates.
- Other forms of nitroglycerin should be discontinued when IV Nitroglycerin is initiated.
- While IV Nitro is being administered monitor patients blood pressure to ensure the BP does not fall below 100mm/hg systolic.
- Morphine Sulfate for pain control. Can be given concurrently with Nitro. 3mg slow IVP. May repeat twice for a total of 9mg. (B/P > 100 mm/hg systolic)



DANGER CONTRAINDICATIONS

- Baby aspirin is contraindicated in patients 16 or younger, if the patient has a history of ulcers, recent abdominal surgery or is allergic to aspirin based products.
- Do not use nitroglycerin in any form in patients who have taken erectile dysfunction meds, e.g. Viagra, Levitra or Cialis in the past 24 hours.

VENTRICULAR FIBRILLATION / PULSELESS VENTRICULAR TACHYCARDIA



BASIC LIFE SUPPORT

- ❑ Attach AED and analyze rhythm. Follow AED instructions.
- ❑ Open patient's airway.
- ❑ Assess breathing. Assist with BVM if necessary.
- ❑ Check for a pulse. Initiate compressions if absent.



ADVANCED LIFE SUPPORT

- ❑ Defibrillate patient @ 200j, 300j and 360j. Repeat defibrillation 30-60 secs after each drug is administered or as appropriate. If patient converts after initial set of defibrillations no antiarrhythmic should be given. If patient returns to V-fib then administer antiarrhythmic upon successful conversion.
- ❑ Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- ❑ Initiate IV access (preferably large bore).
- ❑ Vasopressin 40 units IVP. Single one time dose only.
- ❑ Epinephrine 1 mg IVP every 3-5 minutes. If vasopressin was given wait 10 minutes before giving epinephrine.
- ❑ Amiodarone 300mg IVP (if available) Or/then Lidocaine 1.5 mg/kg IVP
Amiodarone 150 mg IVP (5 mins after 1st dose) Lidocaine 1.5 mg/kg IVP
- ❑ Initiate drip of antiarrhythmic that terminated rhythm
 - Amiodarone Maintenance drip: Using a mini drip mix 150 mg in 100cc's D5W (1.5mg/cc) run @ 1mg/min (40gtts/min)
- ❑ Sodium Bicarbonate 1meq/kg after 20 minutes of resuscitation.
- ❑ Magnesium Sulfate 2gms IVP for Torsade's.



PEDIATRIC

- ❑ Defibrillate patient up to 3 times @ 2j/kg, 4j/kg, 4j/kg. Repeat defibrillation after 30-60 secs after each drug is administered or as appropriate.
- ❑ Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- ❑ Epinephrine 0.1mg/kg (1:1000 solution) via ETT if IV access is not available after intubation.
- ❑ Initiate IV access. If IV cannot be established in 3 attempts or 90 sec's initiate an IO.
- ❑ Epinephrine 0.01mg/kg (0.1cc/kg) 1:10,000 solution IV or IO
0.1mg/kg 1:1000 solution 2nd and subsequent doses. Every 3-5 minutes
- ❑ Amiodarone 5mg/kg IVP Or/then Lidocaine 1.0 mg/kg IVP

VENTRICULAR TACHYCARDIA



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- 12 lead EKG if time permits.
- Initiate IV access (preferably large bore).
- If Stable:
 - Amiodarone Infusion.150mg over 10 mins (150mg/100mls: 150gtts/min on a macro)
- If Unstable: (Hypotension, Altered LOC, CP, SOB, CHF/Pulmonary Edema)
 - May give a trial period of medications.
 - Sedate patient (refer to SEDATION GUIDELINE).
 - Synchronize cardiovert patient at 100j, 200j, 300j and 360j



PEDIATRIC

- If Stable:
 - Amiodarone 5mg/kg IV bolus over 20 mins **Or** Lidocaine 1mg/kg IVP. Repeat every 5-10 minutes to a total of 3mg/kg. Initiate maintenance drip 20-50 mcg/min if rhythm terminates after bolus.
- If Unstable:
 - May give a trial period of medications.
 - Sedate patient (refer to SEDATION GUIDELINE).
 - Synchronize cardiovert patient at 0.5j/kg, subsequent shocks at 1.0j/kg.
 - Lidocaine 1 mg/kg IVP. Initiate Maintenance drip at 20-50mcg/kg/min when arrhythmia terminates.



CAUTION

- Although the loading dose of lidocaine does not need to be reduced, the maintenance dose should be decreased by 50% in the presence of impaired hepatic blood flow, acute MI, CHF or in patients older than 70 years of age to prevent lidocaine toxicity.
- Rates of less than 150 BPM usually do not require immediate cardioversion.

ASYSTOLE



S/S

- Consider the following causes when treating Asystole:
 - Drug Overdose
 - Hypokalemia
 - Hypothermia
 - Hypoxia
 - Pre-existing acidosis
 - Hyperkalemia



BASIC LIFE SUPPORT

- Attach AED and analyze the rhythm. Follow AED instructions.
- Open patient's airway.
- Assess breathing. Assist with BVM if needed.
- Check for a pulse. Initiate compressions if absent.



ADVANCED LIFE SUPPORT

- Confirm asystole in 2 leads
- Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- Initiate IV access (preferably large bore).
- Consider Transcutaneous Pacing early along with drug therapy.
- Epinephrine 1 mg IVP every 3-5 minutes.
- Atropine 1mg IVP every 3-5 minutes to a maximum of 3mg.
- Perform appropriate procedures to reverse possible cause of the Asystole.



PHYSICIAN CONSULT

- Call Medical Director for possible termination of efforts if following criteria is met: 1) Documented asystole for 10 mins. 2) All ALS interventions have been correctly completed. 3) 2 paramedics have confirmed proper tube placement. 4) Social support group is in place for the family.



PEDIATRIC

- Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- Initiate IV access. If IV cannot be established in 3 attempts or 90 sec's initiate an IO.
- Epinephrine
 - 0.01 mg/kg (0.1cc/kg) 1:10,000 IV or IO
 - 0.1 mg/kg 1:1000 IV/IO 2nd. & subsequent doses
 - 0.1 mg/kg (0.1cc/kg) 1:1000 ETT
- Atropine 0.02mg/kg IVP every 3-5minutes to a maximum of 0.04mg/kg.
 - Minimum dose 0.1mg.
 - Maximum single dose 0.5mg for a child, 1.0mg for an adolescent.

PULSELESS ELECTRICAL ACTIVITY



BASIC LIFE SUPPORT

- Attach AED and analyze the rhythm. Follow AED instructions.
- Open patients Airway.
- Assess Breathing. Assist with BVM if absent.
- Check for a pulse. Initiate compressions if absent.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- Perform appropriate procedures to reverse possible cause of the PEA.
- Epinephrine 1 mg IVP every 3-5 minutes.
- May try Transcutaneous pacing and fluid boluses.



PEDIATRIC

- Intubate patient. Verify tube placement via 2 means. Secure tube using approved method.
- Initiate IV access. If IV cannot be established in 3 attempts or 90 sec's initiate an IO.
- Epinephrine 0.01mg/kg (0.1cc/kg) 1:10,000 IV or IO
0.1 mg/kg 1:1000 IV/IO 2nd. & Subsequent doses
0.1 mg/kg (0.1cc/kg) 1:1000 ETT



CAUTION

- Consider the following causes when treating PEA:
 - Hypovolemia
 - Hypothermia
 - Hypoxia
 - Hydrogen Ions (acidosis)
 - Hyper/Hypokalemia
 - Tablets (drug overdoses)
 - Tension Pneumothorax
 - Tamponade, cardiac
 - Thrombosis, Coronary
 - Thrombosis, Pulmonary

SUPRAVENTRICULAR TACHYCARDIA



BASIC LIFE SUPPORT

- BLS standard requirements
- Set up EKG
- Set up IV



ADVANCED LIFE SUPPORT

- ALS standard requirements
- 12 lead EKG
- Vagal maneuver
- If Stable:
 - Adenosine 6mg rapid IVP
 - Adenosine 12 mg rapid IVP. May repeat once if no conversion.
 - Monitor patient throughout transport.
- If Unstable: (Hypotension, Altered LOC, CP, SOB, CHF/Pulmonary Edema)
 - May attempt trial bolus of adenosine 6mg rapid IVP if time permits.
 - Sedate patient (refer to SEDATION GUIDELINE) as needed.
 - Synchronize cardiovert patient at 100j, 200j, 300j and 360j.
 - May try adenosine (6mg, 12mg and 12mg).



PHYSICIAN CONSULT

- Cardizem 15mg slow IVP over 2 minutes for the stable patient or for the unstable patient after other treatments have failed. If no response in 15 minutes repeat @ 20 mg slow IVP. (B/P > 100mmhg).



PEDIATRIC

- If Stable:
 - Adenosine 0.1mg/kg rapid IVP (max initial dose of 6mg)
 - Adenosine 0.2mg/kg rapid IVP if initial dose fails (max of 12mg)
- If Unstable:
 - May give a trial period of medications.
 - Sedate patient (refer to SEDATION GUIDELINE).
 - Synchronize cardiovert patient at 0.5j/kg, subsequent shocks at 1.0j/kg.



CAUTION

- Carotid sinus massage is contraindicated in adults but may be used in pediatric patients.
- PSVT in pediatrics is considered rates over 220 bpm.
- Minimum blood pressure must be greater than 100mm/hg systolic for Cardizem to be administered.
- Use Cardizem with caution in patients on beta blockers or oral calcium channel blockers



CONTRAINDICATIONS

- Do not use Cardizem in patients that have a history of WPW, or sick sinus syndrome.

BRADYCARDIA



S/S

- ❑ Symptomatic bradycardia, otherwise known as unstable bradycardia, exists with a slow heart rate (<60 beats/min) and hypotension (systolic BP<90mm/hg).



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ If Stable:
 - Monitor patient during transport to the ER.
- ❑ If Unstable: (Hypotension <90mm/hg systolic)
 - Atropine 0.5mg IVP, repeat q 3-5 min prn, maximum dose 3mg, *if unsuccessful then*:
 - Transcutaneous pacing (consider sedation), *or*
 - Dopamine 5-20 mcg/kg/min. Titrate to desired heart rate, *or*
 - Epinephrine Infusion 2-10mcg/min, titrate to heart rate >60.



PEDIATRIC

- ❑ Chest compressions if HR< 60 after oxygenation. As appropriate.
- ❑ Epinephrine 0.01mg/kg IVP every 5 minutes as needed.
- ❑ Atropine 0.02mg/kg to a total of 0.04 mg/kg. (minimum single dose 0.1mg)



CAUTION

- ❑ Bradycardia in children is usually secondary to a respiratory problem and hypoxia. Ensure good oxygenation prior to administering any medication.
- ❑ Do not use atropine in children less than 1 year of age.



DANGER

CONTRAINDICATIONS

- ❑ Never treat bradycardia with PVC's with anti-arrhythmic drugs.

ATRIAL FIBRILLATION / ATRIAL FLUTTER



BASIC LIFE SUPPORT

- BLS standard requirements.
- Scene survey to identify cause of overdose.
- Protect patient's airway and monitor for vomiting.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- 12 lead EKG.
- Vagal maneuver (have patient bare down only).
- If Stable:
 - Monitor patient throughout transport
- If Symptomatic and Normotensive (with rate > 150bpm):
 - Cardizem (diltiazem) 15 mg slow IVP over 2 minutes. If no response in 15 minutes repeat @ 20mg slow IVP. (BP > 100mm/hg).
- If Symptomatic and Hypotensive (with rate >150bpm):
 - Sedate patient (refer to SEDATION GUIDELINE).
 - Synchronize cardiovert patient at 100j, 200j, 300j and 360j.
 - If cardioversion fails Cardizem (diltiazem) 15 mg slow IVP over 2 minutes. If no response in 15 minutes repeat @ 20mg slow IVP. (BP > 100mm/hg).



PHYSICIAN CONSULT

- If cardioversion fails Cardizem (diltiazem) 15 mg slow IVP over 2 minutes. If no response in 15 minutes repeat @ 20mg slow IVP. (BP > 100mm/hg).



CAUTION

- Use with caution in patients who are taking oral beta-blockers or oral calcium channel blockers.
- Carotid sinus massage is contraindicated in adults but may be used in pediatric patients.



DANGER CONTRAINDICATIONS

- Do not use Cardizem (diltiazem) in patients that have a history of WPW, sick sinus syndrome. Carotid sinus massage is contraindicated in adults but may be used in pediatrics.

HYPERTENSIVE CRISIS



S/S

- ❑ Patients are considered to be having a hypertensive crisis when the BP is greater than 200 systolic or 120 diastolic and is accompanied by: Headache, Epistaxis, Nausea and Vomiting or Visual disturbances.



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Check the blood pressure in the other arm if the initial reading is abnormal.
- ❑ Set up EKG.
- ❑ Set up IV



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements
- ❑ 0.4 mg nitroglycerin S/L. May repeat every 5 minutes to a total of 3 doses or until a drop of 30% of the original systolic or diastolic pressure



CAUTION

- ❑ Patients who maintain a chronic hypertensive status may require a higher than normal systolic pressure to maintain cerebral perfusion. This should be considered when administering treatment to lower the blood pressure.
- ❑ Monitor blood pressure every 5 minutes.
- ❑ Do not treat B/P if patient exhibits S&S of a stroke, see stroke protocol.
- ❑ If patient is pregnant, see Eclampsia protocol.

CONGESTIVE HEART FAILURE/ PULMONARY EDEMA



BASIC LIFE SUPPORT

- BLS standard requirements.
- Allow patient to sit up supine to maintain their own airway.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- 12 lead EKG. Perform a V4r if ST elevation is noted in II, III or AVF.
- If patient is in mild/moderate distress place patient on CPAP while other therapies are being initiated. If patient is in severe respiratory distress, prepare to intubate.
- Nitroglycerin 0.4mg S/L. May repeat to a total of 3 doses as long as systolic remains above 100mm/hg.
- Lasix (furosemide)
 - 40 mg IVP if patient is not taking Lasix
 - 80 mg IVP if patient is taking Lasix or has a hx of renal insufficiency.
- Morphine Sulfate 3mg slow IVP. Can be given concurrently with Nitro. May repeat twice for a total of 9mg. (B/P > 100 mmhg systolic)
- Use PEEP for intubated patients.



PHYSICIAN CONSULT

- Lasix (furosemide) with a patient who is febrile.



PEDIATRIC

- Lasix (furosemide) 1.0mg/kg slow IVP.
- Morphine sulfate 0.1mg/kg slow IVP.



CAUTION

- Administration of nitrates should be done with caution in patients with right ventricular infarct. These patients may be sensitive to nitrates.



DANGER CONTRAINDICATIONS

- Do not use NTG in any form in patients who have taken erectile dysfunction meds, e.g.: Viagra, Levitra or Cialis in the past 24 hours.

CARDIOGENIC SHOCK



BASIC LIFE SUPPORT

- BLS standard requirements.
- Allow patient to sit to maintain their own airway.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- 12 lead EKG. Perform a V4r if ST elevation is noted in II, III or AVF.
 - If patient has elevation in V4r, and patient is hypotensive (<90mm/hg systolic) administer fluid boluses of up to 2000 cc's of fluid (contraindicated if lung sounds are not clear).
- Dopamine 5-20mcg/kg/minute titrated to a BP of 100mm/hg systolic.
- Nitrates for chest pain after BP has been increased.



PEDIATRIC

- Dopamine 5-20mcg/kg/min.



DANGER

CONTRAINDICATIONS

- Withhold all fluid boluses if patient has pulmonary edema.

GENERAL

TREATMENT PROTOCOLS

ALLERGIC REACTIONS



S/S

- Generalized allergic reactions are characterized by: Itching, urticaria rash, shortness of breath, difficulty swallowing, edema of the tongue and facial swelling.
- If the patient is hypotensive and/or has severe shortness of breath follow the anaphylaxis guideline.



BASIC LIFE SUPPORT

- BLS standard requirements.
- Try to determine the cause of the reaction.
- EMT's may help patient self administer their own EPI-PEN.
- Set up EKG monitor
- Set up IV



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Benadryl 25mg IVP or 50 mg IM. Benadryl may be given IM if no IV access. Max. 50 mg.
- Albuterol 2.5mg via nebulizer for bronchospasm or sensation of throat closing.
- Epinephrine 0.3cc SQ.



PEDIATRIC

- ALS standard requirements.
- Benadryl 1.5 mg/kg IVP. May be given IM if no IV access.
- Albuterol (proventil); for bronchospasm
 - >2 years old- 2.5 mg via neb.
 - < 2 years old – 1.25 mg (1.5 cc) in 1.5 cc NaCl via neb.
- Epinephrine 0.01 cc/kg SQ (max dose 0.3cc SQ).



CAUTION

- If EMT's are going to help patient administer their EPI-PEN, verify that the pen is prescribed for that patient and that it has not expired.
- Epinephrine should be avoided in patients over 40 years of age.



DANGER

CONTRAINDICATIONS

- Do not give epinephrine to patients with allergic reactions who have a known hx of heart disease.

ALTERED MENTAL STATUS



BASIC LIFE SUPPORT

- BLS standard requirements.
- Scene survey for possible causes.
- Give oral glucose if patient has one or more of the following and Rescue is not on scene:
 - Pt has intact gag reflex
 - Altered mental status
 - Blood sugar < 60 mg/dl
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- Narcan 2.0mg IVP (may give IM if no IV access). May repeat q 2-3 min prn.
- Sedation for the violent patient (refer to SEDATION GUIDELINE).



PEDIATRIC

- ALS standard requirements.
- Blood glucose level (refer to PEDIATRIC DIABETIC EMERGENCIES GUIDELINE).
- Narcan 0.1mg/kg. Maximum single dose 2mg. May repeat q 2-3 min prn.



CAUTION

- Consider possible causes for patient's condition i.e. Trauma, OD, Diabetes, Stroke.

ANAPHYLAXIS



S/S

- Anaphylaxis is defined as a severe allergic reaction with respiratory distress and/or hypotension.



BASIC LIFE SUPPORT

- BLS standard requirements.
- Try to determine the cause of the reaction.
- EMT's may help patient self administer their EPI-PEN.
- Set up EKG monitor.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Epinephrine 1:1000 0.3 mg SQ (withhold if patient used epi-pen).
 - If cardiac arrest is imminent or patient is in profound shock give Epinephrine 1:10,000 in 1ml increments up to a maximum of 5ml's.
- Benadryl 50 mg IVP. May give IM if no IV access.
- Albuterol (proventil) 2.5 mg via nebulizer for wheezing or absent breath sounds.
- If hypotensive refer to HYPOTENSIVE GUIDELINE.



PHYSICIAN CONSULT

- Physician orders should be obtained for Epinephrine if: Pulse rate is greater than 140 or systolic BP is greater than 200 mm/hg.



PEDIATRIC

- ALS standard requirements.
- Epinephrine 1:1000 - 0.01mg/kg SQ. Maximum dose of 0.3mg.
- Benadryl 1.5mg/kg IVP. Maximum dose of 50 mg. May give IM if no IV access.
- Albuterol (proventil) for bronchospasm:
 - >2 years old- 2.5 mg via neb
 - < 2 years old – 1.25 mg in 1.5 cc NaCl via neb.
- If hypotensive refer to PEDIATRIC HYPOTENSION GUIDELINE.



CAUTION

- If EMT's are going to help patient administer their EPI-PEN, verify that the pen is prescribed for that patient and that it has not expired.

BETA BLOCKER OVERDOSE



S/S

- Patients who have overdosed on Beta Blockers may present with: Decreased LOC, Bradycardia, Hypotension, and Diaphoresis.
- Common Beta Blockers are: blocadren (timolol), breviblock (esmolol), cartrol (carteolol), corgard (nadolol), inderal (propranolol), sectral (acebutolol), tenormin (atenolol), trandate/normodyne (labetolol) and visken (pindolol).
- Poison Control Center-1-800-282-3171



BASIC LIFE SUPPORT

- BLS standard requirements.
- Scene survey to identify cause of overdose.
- Protect patient's airway and monitor for vomiting.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- Glucagon 5mg IVP over 2-5 minutes if patient is unresponsive or hypotensive.
- Follow appropriate arrhythmia protocol if initial treatment does not work.



PEDIATRIC

- Glucagon 1mg IVP over 2-5 minutes if patient is unresponsive or hypotensive.
- Follow appropriate arrhythmia protocol if initial treatment does not work.

CALCIUM CHANNEL BLOCKER OVERDOSE



S/S

- ❑ Patients who have overdosed on Calcium Channel Blockers may present with: hypotension, bradycardia, altered mental status, decreased capillary refill.
- ❑ Common Calcium Channel Blockers are: cardizem (diltazem), calan/isoptin (verapmil), norvasc (amiodipine), procardia/adalat (nifedipine), and cardene (nicardipine).



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Scene survey to identify cause of overdose.
- ❑ Protect patient's airway and monitor for vomiting.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- ❑ Calcium Chloride 1gm slow IVP.
- ❑ Follow appropriate arrhythmia protocol if initial treatment fails.



PHYSICIAN CONSULT

- ❑ Additional Calcium Chloride.



PEDIATRIC

- ❑ Calcium Chloride 20mg/kg slow IVP.

CARBON MONOXIDE EXPOSURE



S/S

- ❑ Signs and symptoms include: headache, irritability, vomiting, chest pain, confusion, loss of coordination, loss of consciousness and seizures. Cherry red skin or lips is a late sign.



BASIC LIFE SUPPORT

- ❑ Remove patient from the source/area.
- ❑ BLS standard requirements.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- ❑ High Flow oxygen and transport to a facility with a hyperbaric chamber.



PEDIATRIC

- ❑ High Flow oxygen and transport to a facility with a hyperbaric chamber.



CAUTION

- ❑ Remove patient from the hazardous atmosphere prior to treatment.
- ❑ Due to CO having an attraction for Hemoglobin that is 200 times that of Oxygen patients with CO poisoning may have good pulse ox readings and still be hypoxic.

COCAINE OVERDOSE



S/S

- ❑ Patients who have overdosed on cocaine may present with the following: agitation, HTN, psychosis, anxiety, PVC's, hyperthermia, dysrhythmias, dilated pupils, seizures, tachycardia, chest pain.



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Scene survey to identify cause of overdose.
- ❑ Protect patient's airway and monitor for vomiting.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- ❑ For seizures or combativeness:
 - Valium (diazepam) 5mg slow IVP, may repeat once to a max.of 10mg. (B/P > 100mm/hg systolic).
OR
 - Versed (midazolam) 1-2mg slow IVP. May repeat to a max of 4mg. BP must be > 100mm/hg.



PHYSICIAN CONSULT

- ❑ Call for orders for Lidocaine (xylocaine) for ventricular arrhythmias.

DECOMPRESSION SICKNESS



S/S

- Try to obtain accurate history of the dive i.e. number of dives, depth of dives, interval between dives and type of air mixture in tanks etc.
- Some signs of Decompression sickness are: SOB, altered LOC, joint pain neurological deficits, and rash.
- If possible bring dive log, dive computer and associated equipment to the hospital.



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG.
- Set up IV.
- Spinal immobilization if trauma is suspected.
- Place patient supine.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- If patient is **normotensive**:
 - 500cc bolus 0.9% NaCl followed by a 200cc/hr infusion unless SOB.
- If patient is **hypotensive**:
 - Rapid 500cc bolus 0.9% NaCl then 250 cc boluses every 5 minutes until a minimum systolic of 100mm/hg.
- Once BP has stabilized: infuse at 250cc's/hr if lungs clear.
- Aspirin 324mg PO
- Transport to a facility with a hyperbaric chamber.



PEDIATRIC

- As above with boluses based on body weight.

DIABETIC EMERGENCIES



S/S

- Hypoglycemia:** rapid onset, altered LOC, dizziness, slurred speech, cool clammy skin, intoxication-like symptoms.
- Hyperglycemia:** gradual onset (12-24hrs), with polyuria, polydypsia, polyphagia, dehydration, dry, warm skin. If there is also N/V, abdominal pain, fruity breath odor, confusion, tachycardia, tachypnea, and/or hypotension consider DKA (diabetic ketoacidosis).



BASIC LIFE SUPPORT

- BLS standard requirements.
- Give oral glucose if patient has intact gag reflex with one or more of the following:
 - Altered mental status
 - Blood glucose < 60 mg/dl
- Set up EKG monitor.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Check Blood Glucose Level.
 - **If Blood glucose level is <60mg/dl:**
 - D50 25g IVP or
 - Glucagon 1mg IM if no IV access.
 - **If Blood sugar level is >300mg/dl:**
 - 500 cc bolus NaCl. If DKA is suspected give 1000cc bolus. May repeat if needed.
- Consider Zofran (ondansetron) 4mg IVP over 1 min for nausea and vomiting.
- Repeat Blood Glucose Level.



PEDIATRIC

- Hypoglycemia**
 - >12 years old: D50 25g IVP.
 - < 12 years old: D25 2-4cc/kg IVP.
 - < 30 days (neonate): D10 2-4cc/kg IVP.
- If no IV access is available:
 - < 20kg: Glucagon 0.5mg SQ or IM.
 - >20kg: Glucagon 1mg SQ or IM.



CAUTION

- Care should be taken when administering glucose to patients who could be suffering a stroke.
- Glucagon is intended for use only when IV access cannot be established. It is not intended to replace IV administration of dextrose.

DROWNING / NEAR DROWNING



BASIC LIFE SUPPORT

- BLS standard requirements.
- C-spine if applicable.
- CPR if no pulse.
- Keep patient warm.
- Set up EKG
- Set up IV



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- If patient is **hypotensive**:
 - Rapid 250cc bolus 0.9% NaCl every 5 minutes until a minimum systolic of 100mm/hg.
- If no response to fluid bolus:
 - Dopamine drip beginning at 5mcg/kg/min and titrate to effect.
- Treat the appropriate arrhythmia.



PEDIATRIC

- ALS standard requirements.
- If patient is **hypotensive**:
 - 20cc/kg fluid bolus of 0.9% NaCl.



CAUTION

- Consider possible C-spine injury.
- If patient is in cardiac arrest follow appropriate arrhythmia protocol.
- No drowning victim is to be pronounced dead at the scene if the possibility of hypothermia exists.
- All near drowning patients must be transported to the hospital. Contact the Medical Director for assistance, as needed.

ECLAMPSIA AND SEVERE PRE-ECLAMPSIA



S/S

- Severe pre-eclampsia usually begins in the third trimester and is characterized by: hypertension, generalized edema, altered mental status, visual disturbances and headache (not all signs may be present).
- Eclampsia is characterized by the above signs along with seizures and possible coma.



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- For **Severe Pre-eclampsia**:
 - Magnesium sulfate 4gm bolus over 20 minutes (4g in 50cc NaCl, 38 gtts/min macro drip set, 150 gtts/min micro drip set).
- For **Eclampsia**: (patients actively seizing)
 - Magnesium sulfate 2gm IVP over 2 minutes. May repeat once if seizure persists. If seizure subsides after first dose establish a maintenance drip of magnesium sulfate 2g in 25cc's NaCl at 2.5 cc's/min (38gtts/minute using a macro drip set, 150 gtts/min micro drip set).



PHYSICIAN CONSULT

- Valium (diazepam) or Versed (midazolam) for seizures unresolved by magnesium sulfate.



CAUTIONS

- Do not exceed 4gm of magnesium sulfate unless directed by physician.

HAZARDOUS MARINE STINGS / BITES



BASIC LIFE SUPPORT

- BLS standard requirements.
- Irrigate area with 0.9% NaCl, seawater, vinegar or ammonia.



ADVANCED LIFE SUPPORT

- ALS standard requirements if necessary.
- If patient is having an allergic reaction refer to ALLERGIC REACTION GUIDELINE.



PHYSICIAN CONSULT

- Pain control:
 - Morphine sulfate 3mg IVP.



PEDIATRIC

- ALS standard requirements.
- If patient is having an allergic reaction refer to appropriate protocol.



CAUTION

- Observe patient for possible allergic reaction and follow appropriate protocol.



DANGER

CONTRAINDICATIONS

- Do not use fresh water on affected area.

HAZARDOUS MATERIAL EXPOSURE AND WEAPONS OF MASS DESTRUCTION

General Protocol

- ❑ Rapid extrication and transport are not the priority. Patient decontamination and personnel protection are of the utmost importance.

- ❑ When responding to a hazardous materials incident or possible weapons of mass destruction (WMD) call dispatch to ensure a hazardous materials team is responding as per the county wide hazardous materials response protocol.

- ❑ Medical treatment and patient preparation, including decontamination, will be based on information obtained from the Special Operations Team.

- ❑ The special operations team will brief EMS treatment personnel on the identity, type, quantity and hazard potential of the materials involved.

- ❑ Institute the appropriate personal protective measures for all personnel prior to patient contact.

- ❑ Paramedics, with special training in Hazardous Materials Toxicology, who are assigned to the responding Special Operations Team, will oversee the research, decontamination and medical treatment of the patients.

- ❑ BLS procedures according to the American Heart Association may be implemented when safe to do so and when the patient presents no risk of secondary contamination.

- ❑ Patients will be transported in the properly prepared ground transport units (usually Special Ops Rescue vehicles) to the appropriate facilities. If the number of patients overwhelms the amount of Special Ops transport units seek the advise of the Special Ops team about preparing the rescue unit for the transport of the patient.

HEAT EXPOSURE



BASIC LIFE SUPPORT

- BLS standard requirements.
- Remove from the heat if possible and cool. Remove excessive clothing.
- Apply ice packs to neck, axilla, and groin for heat stroke.
- Set up EKG
- Set up IV



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- If **normotensive**:
 - 250cc fluid bolus 0.9% NaCl.
- If **hypotensive**:
 - Rapid 250cc bolus 0.9% NaCl every 5 minutes until a minimum systolic of 100mm/hg.



PEDIATRIC

- If **hypotensive**:
 - 20cc/kg fluid bolus 0.9% NaCl every 5 minutes until an appropriate systolic is reached.



CAUTION

- Do not cool patient to the point of shivering.
- Assess lung sounds before and after each fluid bolus.

HYPERKALEMIA



S/S

- Suspect hyperkalemia in patients with lethal or potentially lethal arrhythmias, elevated T waves and depressed P waves, and muscular weakness, especially with a history of renal failure/dialysis.



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG monitor.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Calcium Chloride 1gm IVP.
- Sodium Bicarbonate 1 amp IVP.
- Follow appropriate arrhythmia Protocol.



CAUTION

- Flush IV line thoroughly between medications.

HYPOTENSION / SHOCK



BASIC LIFE SUPPORT

- BLS standard requirements.
- Place patient in the shock position unless SOB.
- Keep warm.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements
- 250 cc bolus of NaCl. May repeat 3 times or to a systolic of 100 mm/hg.
- 12 lead ECG to rule out right ventricular infarct.
- Dopamine 5-20 mcg/kg/minute titrated to a BP of 100mm/hg systolic.



PEDIATRIC

- ALS Standard requirements
- 20cc/kg bolus of NaCl. May repeat 3 times.



CAUTION

- Verify that the patient's lung sounds are clear prior to administering a fluid bolus or laying the patient supine.
- Assess lung sounds before and after each fluid bolus.
- Consider dehydration, sepsis, cardiac arrhythmias and cardiogenic shock.



DANGER CONTRAINDICATIONS

- No fluid boluses for patients with pulmonary edema.

NARCOTIC OVERDOSE



S/S

- ❑ Patients who have overdosed on narcotics can present with any of the following:
Constricted pupils, decreased LOC, decreased respirations, decreased BP, decreased heart rate, bradycardia, coma or pulmonary edema.
- ❑ Common Narcotics: codeine, darvon (propoxyphene), demerol (meperidine), dilaudid (hydromorphone), heroin, methadone (dolphine), morphine, oxycontin (oxycodone, percocet), talwin (pentazocine) and vicodin/lorcet/lortab (hydrocodone).
- ❑ Poison Control Center-1-800-282-3171



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Scene survey to identify cause of overdose.
- ❑ Protect patient's airway and monitor for vomiting.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- ❑ Narcan 2mg IVP. Titrate to respirations (may give IM if no IV access). May repeat q 2-3 minutes PRN.



PEDIATRIC

- ❑ Narcan 0.1mg/kg. Maximum single dose 2mg. May repeat q 2-3 minutes PRN.
- ❑ Blood glucose level (refer to PEDIATRIC DIABETIC EMERGENCIES GUIDELINE).

NAUSEA AND VOMITING



BASIC LIFE SUPPORT

- BLS standard requirements.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- If hypotensive refer to HYPOTENSION GUIDELINE.
- If normotensive 250 cc bolus of NaCl.
- Reglan (metoclopramide) 10 mg IVP or Zofran (ondansetron) 4mg IVP over 2 minutes.



PEDIATRIC

- If hypotensive refer to PEDIATRIC HYPOTENSION GUIDELINE.



CAUTION

- Prior to treating the nausea and vomiting rule out Angina, CVA, MI and HTN. If patient presents with any of these along with the N+V follow appropriate protocol.

OBSTETRICAL EMERGENCIES



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up OB kit.
- Set up IV.

- If **normal presentation** (head):
 - Slow controlled delivery of the head; apply gentle perineal pressure.
 - Observe for meconium staining and if present vigorously suction the oropharynx during delivery with a bulb syringe and immediately after with an ET tube and meconium aspirator.
 - Once body is delivered, double clamp the cord 10-12 inches from the abdomen.
 - Stimulate the baby and maintain body temperature.
 - Record a 1 and 5 minute APGAR score.
 - If mother is bleeding heavily or placenta will not deliver try fundal massage.

- If **breech presentation** (buttocks or feet):
 - If the head is not delivered within 3 minutes of the body, elevate the mother's hips and insert gloved fingers into the vagina and push the vaginal wall away from the baby's nose and mouth.
 - Expedite transport with the mother's hips elevated while maintaining the baby's airway.

- If **prolapsed cord**:
 - Place the mother in a knee to chest position with her hips elevated.
 - Check the umbilical cord for a pulse. If there is no pulse present insert a gloved hand into the vagina and push the baby up towards the uterus until a pulse returns.
 - Wrap the exposed cord with a moist sterile dressing and expedite transport.



ADVANCED LIFE SUPPORT

- ALS standard requirements for the mother.
- 250cc boluses of 0.9% NaCl if hypotensive.

OBSTETRICAL EMERGENCIES (cont.)

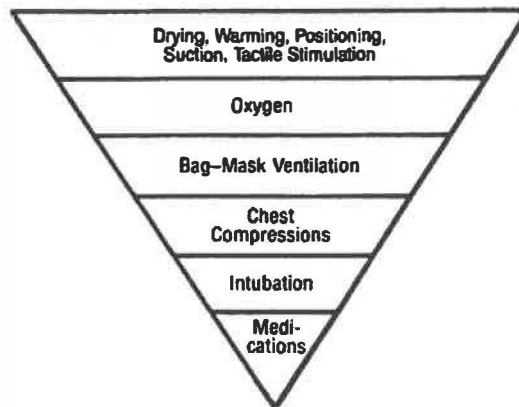


PEDIATRIC

- ❑ If resuscitation of the newborn is needed follow the Neonatal Inverted Pyramid and current NALS guidelines.

Score	0	1	2
Appearance	Blue, Pale	Body Pink, extremities blue	Completely pink
Pulse	Absent	Below 100	Above 100
Grimace	No response	Grimaces	Cries
Activity	Limp	Some flexion of extremities	Active motion
Respiration's	Absent	Slow or irregular	Good strong cry.

Total _____



CAUTION

- ❑ Try to obtain a accurate history of pregnancy including: Number of times pregnant (gravida), number of living children (parity), expected due date, possibility of multiple births, pre-natal care, whether her water has broken (if so was it clear or stained) and drug history.
- ❑ If labor is premature, prepare for the possibility of a respiratory depressed infant.
- ❑ If mother is not yet crowning, transport mother in position of comfort.
- ❑ If baby is crowning, and/or contractions are 2 minutes apart or less prepare for a field delivery.

ORGANOPHOSPHATE POISONING

Prior to entering a potentially contaminated area or making contact with a contaminated patient, request a Hazardous Material Team for decontamination. Ensure all personnel are adequately protected from all routes of exposure prior to treating patients.



S/S

- ❑ Patients exposed to organophosphates will present with: **Salivation, Lacrimation, Urination, Defecation, GI problems, Emesis (SLUDGE).**
- ❑ Poison Control [Center-1-800-282-3171](tel:18002823171)



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Protect patient's airway and monitor for vomiting.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Atropine Sulfate 1mg every 3-5 mins until atropinization occurs (reversal of symptoms).



PEDIATRIC

- ❑ Atropine 0.02mg/kg every 3-5 minutes until atropinization occurs. Minimum dose .1mg

PAIN MANAGEMENT



S/S

- Patients who have pain that is related to an isolated fracture, dislocation, musculoskeletal injury or burn may receive pain medication.
- Patient must have a normal mental status



BASIC LIFE SUPPORT

- BLS standard requirements
- Splint affected area.
- Set up IV.
- Set up EKG



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Morphine Sulfate 5mg IVP. May repeat once. (systolic >100mm/hg)



PEDIATRIC

- ALS standard requirements.
- Request orders for pain control.



CAUTION

- When administering pain medications patient must be on EKG monitor, and pulse oximetry.
- Monitor patient's blood pressure and respirations prior to and after administering M.S.



DANGER

CONTRAINDICATIONS

- Do not administer pain medications to patients with altered LOC, head injuries, multi-system trauma or abdominal pain.

RESPIRATORY DISTRESS/BRONCHOSPASM



S/S

- ❑ Respiratory distress:
 - Tachypnea, diaphoresis, use of accessory muscles, wheezing or diminished breath sounds, etc.
 - Asthma, COPD, Emphysema and Reactive Airway Disease (RAD)



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ 100-cc/hr infusion of NaCl. (asthma)
- ❑ Albuterol (proventil) for bronchospasm:
 - 2.5 mg via nebulizer. May repeat after 15-20 minutes.
- ❑ Epinephrine 1:1000 0.3cc SQ if not contraindicated (if < 40 y/o with no hx of CAD).
- ❑ Methylprednisolone (solumedrol) 125mg IVP.
- ❑ If patient has bilateral rales and is normotensive or hypertensive refer to **CHF guidelines**.
- ❑ If patient is hypotensive refer to **Cardiogenic Shock Guidelines**.
- ❑ Intubate if no improvement and patient is in marked respiratory distress. Refer to Sedation Guideline if necessary.



PHYSICIAN CONSULT

- ❑ Additional breathing treatments.
- ❑ Epinephrine SQ when above parameters is not met.
- ❑ Physician orders should be obtained for epinephrine if pulse rate is greater than 140 or systolic BP is greater than 200 mm/hg.
- ❑ Methylprednisolone (solumedrol) 125mg IVP for COPD



PEDIATRIC

- ❑ Albuterol (proventil) :> 2 years old- 2.5 mg via neb.
 - < 2 years old – 1.25 mg (1.5 ccs) in 1.5 cc NaCl via neb.

- EPI 1:1000 0.01mg/kg up to 0.3 mg SQ
- Bolus of 2cc/kg NaCl (asthma)
- Methylprednisolone (solumedrol) 2mg/kg
- If patient appears to have croup or epiglottitis do not stress patient and transport in the position of comfort with blow - by oxygen if tolerated.



CAUTION

- Care must be taken to rule out wheezes that are secondary to CHF or Pulmonary edema (cardiac asthma). If in doubt request orders prior to administration of epinephrine.
- Use caution when administering high flow oxygen to patients with COPD; however, never withhold oxygen to patients with severe shortness of breath.
- **Do not sedate asthmatics unless necessary to facilitate intubation.**



CONTRAINDICATIONS

- No epinephrine for patients over 40 years old or for patients with a history of cardiovascular disease.

PEDIATRIC UPPER AIRWAY OBSTRUCTION



S/S

- ❑ Stridor, tripod positioning & drooling as well as the typical signs and symptoms of respiratory distress.
- ❑ Consider Croup, Epiglottitis, or a foreign body in the upper airway.



BASIC LIFE SUPPORT

- ❑ Administer blow by oxygen if tolerated and transport with caregiver or parent if possible
- ❑ Do not touch or stress patient.
- ❑ Expedite transport.

SEDATION PROTOCOL



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- For Combative patients:
 - Ativan (Lorazepam) 2mg slow IVP. May repeat once to a total of 4mg (B/P > 100 mm/hg systolic required)
 - OR
 - Versed (Midazolam) 1mg IVP per minute up 5mg total. (B/P > 100mm/hg systolic required).
- For Cardioversion / Pacing or Airway Management:
 - Versed (Midazolam) 1mg IVP per minute up 5mg total. (B/P > 100mm/hg systolic required).
 - OR
 - Ativan (Lorazepam) 2mg slow IVP. May repeat once for a total of 4mg. (B/P > 100mmhg systolic required).



PEDIATRIC

- Ativan (Lorazepam) 0.1mg/kg slow IVP to a max single dose of 2 mg. For blood pressures consult Broselow Tape.
- Versed (Midazolam) 0.1 mg/kg slow IVP to a max single dose of 5mg. For blood pressures consult Broselow Tape.



CAUTION

- Ativan (Lorazepam) and Versed (Midazolam) may cause respiratory depression or respiratory arrest. If airway management is unsuccessful administer Romazicon to reverse the effects of Ativan.

SEIZURES



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Set up EKG.
- ❑ Set up IV.
- ❑ Protect from injury.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements.
- ❑ Versed (Midazolam) 1mg IVP per minute up 5mg total. (B/P > 100mm/hg systolic required).

OR

- ❑ Ativan (Lorazepam) 2mg slow IVP. May repeat once to a max of 4mg. BP must be > 100mm/hg.
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).



PHYSICIAN CONSULT

- ❑ Additional Ativan (Lorazepam) or Versed (Midazolam) to control seizures.



PEDIATRIC

- ❑ ALS standard requirements.
- ❑ Non-febrile seizures: Versed (Midazolam) 0.1 mg/kg slow IVP to a max single dose of 5mg. For blood pressures consult Broselow Tape.

OR

Ativan (Lorazepam) 0.1mg/kg slow IVP. Maximum single dose of 2mg.

- ❑ Febrile seizures: Cool Patient by sponging with tepid water.
- ❑ Blood Glucose Level (refer to DIABETIC EMERGENCIES GUIDELINE).



CAUTION

- ❑ Use caution not to over cool a febrile patient to the point of shivering. For seizures associated with pregnancy refer to ECLAMPSIA PROTOCOL.
- ❑ If seizures are due to a possible cyclic antidepressant OD, treat seizures with Sodium bicarb.

SNAKE BITE



BASIC LIFE SUPPORT

- BLS standard requirements.
- Set up EKG.
- Set up IV.
- Mark area of initial edema.
- Remove any constrictive jewelry or clothing.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- If patient is having an allergic reaction refer to ALLERGIC REACTION GUIDELINE.
- If patient is hypotensive, follow hypotension protocol.



PHYSICIAN CONSULT

- Pain control. Morphine sulfate 3 mg IVP.



PEDIATRIC

- ALS standard requirements.
- If patient is having an allergic reaction refer to PEDIATRIC ALLERGIC REACTION GUIDELINE.



CAUTION

- If a tourniquet is applied prior to arrival, physician consult is indicated prior to removing the tourniquet.



CONTRAINDICATIONS

- The use of ice, tourniquets or constricting bands is contraindicated.

STROKE



S/S

- ❑ Signs and symptoms of a stroke are unilateral paralysis and/or paresthesia, visual or speech disturbances,



BASIC LIFE SUPPORT

- ❑ BLS standard requirements.
- ❑ Set up EKG.
- ❑ Set up IV.



ADVANCED LIFE SUPPORT

- ❑ ALS standard requirements
- ❑ Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE)
- ❑ Perform Stroke Scale and if no exclusionary criteria are met transport as a "Stroke Alert".
- ❑ Expedite transport.



PHYSICIAN CONSULT

- ❑ Treatment of hypertension



CAUTION

- ❑ If patient is hypertensive (>200 systolic and/or 110 diastolic) call for orders prior to treating the blood pressure.
- ❑ If patient does not appear to have difficulty breathing use low flow oxygen via cannula. Do not withhold high flow oxygen if patient is SOB.
- ❑ Rule out head trauma.
- ❑ Rule out **Stroke Alert Exclusion Criteria**: 1) Stroke > 3hrs old. 2) Prior stroke or serious head injury within the past 3 months. 3) Major surgery within the past 14 days. 4) Seizure prior to the onset of stroke symptoms. 5) Known history of intracranial hemorrhage. 6) Gastrointestinal or urinary tract hemorrhage within the past 21 days.



DANGER

CONTRAINDICATIONS

- ❑ Do not administer aspirin.

PREHOSPITAL STROKE SCALE

FACIAL DROOP		
Have patient smile or show teeth	NORMAL	Both sides of face move equally.
	ABNORMAL	One side of the face does not move as well as the other side.
ARM DRIFT		
Patient closes eye and holds out arms for a 10 second period	NORMAL	Both arms move the same or not at all.
	ABNORMAL	One arm drifts when compared to the other.
SPEECH		
Have the patient say "you can't teach an old dog new tricks"	NORMAL	Patient uses correct words with no slurring.
	ABNORMAL	Words slur, inappropriate or no speech.

TRICYCLIC ANTIDEPRESSANT OVERDOSE



S/S

- Patients that have overdosed on Cyclic Antidepressants (formerly TCA's) may present with: CNS depression, tachycardia, dilated pupils, respiratory depression, slurred speech, twitching, jerking, seizures, AV blocks, lethal arrhythmias,

HOT AS HELL (Elevated skin temperature)	RED AS A BEET (Flushed Skin)
DRY AS A BONE (Dry skin and mucous membranes)	BLIND AS A BAT (Visual disturbances)
MAD AS A HATTER (Hallucinations and altered LOC)	

- Common TCA's are: Asendin (Amoxapine), Elavil (Amitriptyline), Norpramin (Desipramine), Pamelor (Nortriptyline), Sinequan (Doxepin), Tofranil (Imipramine), Triavil (Amitriptyline with Perphenazine).



BASIC LIFE SUPPORT

- BLS standard requirements.
- Scene survey to identify cause of overdose.
- Protect patient's airway and monitor for vomiting.
- Set up EKG.
- Set up IV.



ADVANCED LIFE SUPPORT

- ALS standard requirements.
- Blood glucose level (refer to DIABETIC EMERGENCIES GUIDELINE).
- Sodium Bicarbonate 1 amp every 5 minutes until symptoms resolve or 3 amps are given.



PHYSICIAN CONSULT

- Additional Sodium Bicarbonate



PEDIATRIC

- Sodium Bicarbonate 1meq/kg



CONTRAINDICATIONS

- Administration of procainamide, magnesium sulfate and calcium chloride is contraindicated in tricyclic antidepressant overdose.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Willis Towers Watson Southeast, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: Willis Towers Watson Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com	
	INSURER(S) AFFORDING COVERAGE	
INSURED National Health Transport Inc 2290 NW 110th Avenue Sweetwater, FL 33172	INSURER A: Old Republic Insurance Company NAIC# 24147	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** W21100274 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY		MWTB 313612-21	06/01/2021	06/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N NO	MWC 313611 21	06/01/2021	06/01/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

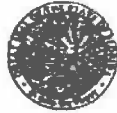
CERTIFICATE HOLDER Proof of Insurance	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

Vehicles

Make	Model	Year	Manufacturer	Mileage	Vin #	Tag	ALS/BLS
DODGE	2500	2021	DODGE	1145	3C6ERVDG6ME502256	MIV18E	DUAL CERT
DODGE	2500	2021	DODGE	6610	3C6ERVDG1ME502259	MIV20E	DUAL CERT
FORD	TRANSIT	2016	FORD	135344	1FDYR2CMXGKA54516	MIP12A	DUAL CERT
FORD	TRANSIT	2016	FORD	127767	1FDYR2CM0GKA66044	MIP10L	DUAL CERT

Personnel Roster

Last name	First Name	Driver License	Expiration Date	EMT/Paramedic	Expiration of Certification	EVOG
DeSouza	Michael	D220-541-60-016-0	1/16/2027	Paramedic	12/1/2022	Yes
REYES	JANET	R200-96077-702-0	6/2/2029	Paramedic	12/1/2022	NO
PORTELL	KENNY	P634-513-89-053-1	2/13/2022	Paramedic	12/1/2022	Yes
CANO	JONATHAN	C500-420-90-126-0	4/6/2022	Paramedic	12/1/2022	Yes
LESENTIER	GEOFFROY	L253-283-72-011-0	1/11/2022	Paramedic	12/1/2022	Yes
LEHMANN	REX	L550-735-56-021-0	1/21/2026	Paramedic	12/1/2022	Yes
GONZALEZ	JUSTIN	G524-421-98-383-0	10/23/2023	EMT DRIVER	12/1/2022	Yes
GONZALEZ	ROY	G524-720-00-271-0	2/27/2023	EMT DRIVER	12/1/2022	Yes
FULLWOOD	KIMBERLY	F430-512-95-752-0	7/12/2028	EMT DRIVER	12/1/2022	Yes
ADAMS	TERRANCE	A352-804-72-390-0	10/30/2022	EMT DRIVER	12/1/2022	Yes
ARNOLD	BRIAN	A654-067-87-293-0	8/12/2025	EMT DRIVER	12/1/2022	Yes



STATE OF FLORIDA
DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL OVERSIGHT

ADVANCED LIFE SUPPORT SERVICE LICENSE

This is to certify that NATIONAL HEALTH TRANSPORT, INC. Provider Number # 4410
Name of Provider

2290 NORTHWEST 110TH AVENUE, SWEETWATER, FLORIDA 33712
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Advanced Life Support Service subject to any and all limitations specified in the applicable Certificate(s) of Public Convenience and Necessity and/or Mutual Aid Agreements for the County(s) listed below:

BROWARD, MARTIN, MIAMI-DADE, MONROE
County (s)

Steve A. McCoy
Emergency Medical Services Administrator
Florida Department of Health

THIS CERTIFICATE EXPIRES ON: 10/09/2021

This certificate shall be posted in the above mentioned establishment



Schedule of Rates for Non-Emergency Ambulance Transports

A0428 Basic Life Support Base Fee \$338.10

A0426 Advanced Life Support Base Fee \$488.30

A0433 Advanced Life Support II Base Fee \$878.40

A0434 Specialty Care Transport Base Fee \$900.00

A0422 Oxygen \$50.90

A0425 Mileage \$11.10

A0420 Waiting time per hour is \$188.80 for ALS and \$169.10 for BLS

V. NOTARIZED STATEMENTS Fill in Statements as applicable.

E or E1 APPLICANTS

I, _____, the representative of
Applicant Name

_____, do hereby attest that the
Business Name of Service
above named service meets all the requirements of, and that I agree to comply with, all applicable provisions of Chapter 304, Life Support and Wheelchair Services.

A-D APPLICANTS

I, Raul Rodriguez, the representative of
Applicant Name

National Health Transport, Inc, do hereby attest that
Business Name of Service

the above named service will provide continuous service on a 24-hour, 7-day week basis. I do hereby attest that the above named service meets all the requirements for operation of an ambulance service in the State of Florida as provided in Chapter 401, Part III, Florida Statutes, Chapter 64E-2, Florida Administrative Code, and that I agree to comply with all the provisions of Chapter 304, Life Support Services.

ALL APPLICANTS

I further acknowledge that discrepancies discovered during the effective period of the Certificate of Public Convenience and Necessity will subject this service and its authorized representatives to corrective action and penalty provided in the referenced authority and that to the best of my knowledge, all statements on this application are true and correct.

[Signature] 5-26-2021
APPLICANT SIGNATURE DATE

Before me personally appeared the said Raul Rodriguez who says that he/she executed the above instrument of his/her own free will and accord, with full knowledge of the purpose thereof. Sworn and subscribed in my presence this 26 day of May, 2021

[Signature]
NOTARY PUBLIC

My commission expires: _____

