House	Amendment NO
Offered By	
by inserting immediately after said line the fol "167.638. The department of health ar brochure relating to meningococcal disease that meningococcal disease [is] <u>are</u> available. The website and shall notify every public institution of the brochure. Each public institution of high all students and if the student is under eighteen Such information in the brochure shall include (1) The risk factors for and symptoms and its possible consequences if untreated;	at states that [an immunization] immunizations again department shall make the brochure available on its n of higher education in this state of the availability ther education shall provide a copy of the brochure to years of age, to the student's parent or guardian.
effectiveness, including information on all merecommendation from the Advisory Committee (4) A statement that any questions or of the committee of the committe	n meningococcal disease immunization and its ningococcal vaccines receiving a Category A or B te on Immunization Practices; [and] concerns regarding immunization against
(5) A recommendation that the current	ontacting the individuals's health care provider; and t student or entering student receive meningococcal Committee on Immunization Practices of the Center."; and
Further amend said bill, Page 15, Section 173. line the following:	2520, Line 13, by inserting immediately after said
"174.335. 1. Beginning with the 2004 every public institution of higher education in campus housing to have received the meningo enrollment and in accordance with the latest restauration Practices of the Centers for Disstatement of medical or religious exemption is student shall be exempted from the immunizate certification by a physician licensed under characteristic would seriously endanger the student's health or laboratory evidence of immunity to the dise	on file with the institution's administration. A ion requirement of this section upon signed pter 334 indicating that either the immunization or life or the student has documentation of the disease. A student shall be exempted from the
immunization requirement of this section if he administration that immunization violates his a 2. Each public university or college in	
	Date
Select Action Taken	Date

meningococcal vaccination status of every student residing in on-campus housing at the university or college.

- 3. Nothing in this section shall be construed as requiring any institution of higher education to provide or pay for vaccinations against meningococcal disease.
- 4. For purposes of this section, the term "on-campus housing" shall include, but not be limited to, any fraternity or sorority residence, regardless of whether such residence is privately owned, on or near the campus of a public institution of higher education.
- 190.103. 1. One physician with expertise in emergency medical services from each of the EMS regions shall be elected by that region's EMS medical directors to serve as a regional EMS medical director. The regional EMS medical directors shall constitute the state EMS medical director's advisory committee and shall advise the department and their region's ambulance services on matters relating to medical control and medical direction in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The state EMS medical director shall be the chair of the state EMS medical director's advisory committee.
- 2. A medical director is required for all ambulance services and emergency medical response agencies that provide: advanced life support services; basic life support services utilizing medications or providing assistance with patients' medications; or basic life support services performing invasive procedures including invasive airway procedures. The medical director shall provide medical direction to these services and agencies in these instances.
- 3. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall have the responsibility and the authority to ensure that the personnel working under their supervision are able to provide care meeting established standards of care with consideration for state and national standards as well as local area needs and resources. The medical director, in cooperation with the ambulance service or emergency medical response agency administrator, shall establish and develop triage, treatment and transport protocols, which may include authorization for standing orders.
- 4. All ambulance services and emergency medical response agencies that are required to have a medical director shall establish an agreement between the service or agency and their medical director. The agreement will include the roles, responsibilities and authority of the medical director beyond what is granted in accordance with sections 190.001 to 190.245 and rules adopted by the department pursuant to sections 190.001 to 190.245. The agreement shall also include grievance procedures regarding the emergency medical response agency or ambulance service, personnel and the medical director.
- 5. The state EMS medical director's advisory committee shall be considered a peer review committee under section 537.035 and regional EMS medical directors shall be eligible to participate in the Missouri Patient Safety Organization as provided under the Patient Safety and Quality Improvement Act of 2005, 42 U.S.C. section 299 et seq, as amended.
- 6. When developing treatment protocols for special needs patients, regional EMS medical directors may promulgate such protocols on a regional basis across multiple political subdivisions' jurisdictional boundaries and such protocols may be used by multiple agencies including, but not limited to, ambulance services, emergency response agencies, and public health departments.
- 7. When regional EMS medical directors develop and implement treatment protocols for patients or provide online medical direction for such patients, such activity shall not be construed as having usurped local medical direction authority in any manner.
- 198.054. Each year between October first and March first, all long-term care facilities licensed under this chapter shall assist their health care workers, volunteers, and other employees who have direct contact with residents in obtaining the vaccination for the influenza virus by either offering the vaccination in the facility or providing information as to how they may independently

Page 2 of 3

- obtain the vaccination, unless contraindicated, in accordance with the latest recommendations of the
 Centers for Disease Control and Prevention and subject to availability of the vaccine. Facilities are
 encouraged to document that each health care worker, volunteer, and employee has been offered
 assistance in receiving a vaccination against the influenza virus and has either accepted or
 declined."; and
- 6
- Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.