

**CHAPTER 33-11-01.2**  
**NORTH DAKOTA GROUND AMBULANCE SERVICES**

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**SECTION 1.** Section 33-11-01.2-14 is amended as follows:

**33-11-01.2-14. Transporting of patients.**

Ambulance services shall transport patients to the nearest appropriate licensed health care facility according to their hospital transport plan except for:

1. Interfacility transports must be made in accordance with the referring physician's orders.
2. In the following specific instances transport must be made to a licensed health care facility with specific capabilities or designations. This may result in bypassing a closer licensed health care facility for another located farther away. An ambulance service may deviate from these rules contained in this

section on a case-by-case basis if online medical control is consulted and concurs.

- a. Trauma patients must be transported to a designated trauma center as per article 33-38 or to an Indian health service facility which has entered into a memorandum of understanding with the department to certify that it meets the requirements of a designated trauma center pursuant to article 33-38.
  - b. A patient suffering acute chest pain that is believed to be cardiac in nature or an acute myocardial infarction determined by a twelve-lead electrocardiograph must be transported to a licensed health care facility capable of performing primary percutaneous coronary intervention or fibrinolytic therapy pursuant to the North Dakota cardiac system ST-elevation myocardial infarction, non-ST elevation myocardial infarction, and acute coronary syndrome guide.
  - c. A patient suffering a suspected stroke must be transported to a designated acute stroke ready hospital, primary stroke center, or a comprehensive stroke center pursuant to the North Dakota acute stroke treatment guidelines.
  - d. In cities with multiple hospitals an ambulance service may bypass one hospital to go to another hospital with equal or greater services if the additional transport time does not exceed ten minutes.
3. An officer, employee, or agent of any emergency medical services operation may refuse to transport an individual to a licensed health care facility for which transport is not medically necessary and may recommend an alternative course of action to that individual, including transportation to an alternative destination such as an urgent care center, clinic, physician's office, or other appropriate destination identified by the emergency medical services operation's medical director, if the emergency medical service operation has developed protocols to refuse transport of an individual and recommend an alternative course of action.

**History:** Effective January 1, 2008; amended effective July 1, 2010; April 1, 2024; August 22, 2024.

**General Authority:** NDCC 23-27-04

**Law Implemented:** NDCC 23-27-04