

County of Hernando

Procurement Department

Carla Rossiter-Smith, Chief Procurement Officer 15470 Flight Path Drive, Brooksville, FL 34604

PROPOSAL DOCUMENT REPORT

RFP No. 23-RFP00361/TPR

EMS Medical Director Services

RESPONSE DEADLINE: November 6, 2023 at 10:00 am Report Generated: Tuesday, January 30, 2024

SOS Care Solutions Proposal

CONTACT INFORMATION

Company:

SOS Care Solutions

Email:

roderick.bennett@sosmmc.com

Contact:

Roderick Bennett

Address:

7830 Gunn Highway Tampa, FL 33626

Phone:

(504) 648-7924

Website:

N/A

Submission Date:

Nov 6, 2023 7:29 AM

ADDENDA CONFIRMATION

No addenda issued

QUESTIONNAIRE

1. E-VERIFY CERTIFICATION*

Pass

Vendor/Contractor shall utilize the U.S. Department of Homeland Security's E-Verify system, in accordance with the terms governing use of the system, to confirm the employment eligibility of:

All persons employed by the Vendor/Contractor during the term of the contract to perform employment duties within Florida; and

All persons, including Sub-Contractors, assigned by the Vendor/Contractor to perform work pursuant to the contract with the department.

Confirmed

2. ACH electronic payment *

Pass

An ACH electronic payment method is offered as an alternative to a payment by physical check.

Please check Option 1 if you accept the ACH electronic payment method.

(Recommended and Preferred)

Yes, ACH electronic payment method is acceptable.

3. PROPOSER'S CERTIFICATION*

Pass

I have carefully examined the Request for Proposals (RFP), instructions to Proposers, general and/or special conditions, specifications, RFP proposal and any other documents accompanying or made a part of this invitation.

I hereby propose to furnish the goods or services specified in the Request for Proposals at the prices or rates quoted in my proposal. I agree that my RFP will remain firm for a period of up to one hundred and eighty (180) days in order to allow the County adequate time to evaluate the proposals. Furthermore, I agree to abide by all conditions of the proposal.

I certify that all information contained in this RFP is truthful to the best of my knowledge and belief. I further certify that I am a duly authorized to submit this RFP on behalf of the Consultant/Firm as its act and deed and that the Consultant/Firm is ready, willing and able to perform if awarded the contract.

I further certify that this RFP is made without prior understanding, agreement, connection, discussion, or collusion with any person, firm or corporation submitting a RFP for the same product or service; no officer, employee or agent of the Hernando County BOCC or of any other Proposer interested in said RFP; and that the undersigned executed this Proposer's certification with full knowledge and understanding of the matters therein contained and was duly authorized to do so.

I further certify that having read and examined the specifications and documents for the designated services and understanding the general conditions for contract under which services will be performed, does hereby propose to furnish all labor, equipment, and material to provide the services set forth in the RFP.

I hereby declare that the following listing states any clarifications, any and all variations from and exceptions to the requirements of the specifications and documents. The undersigned further declares that the "work" will be performed in strict accordance with such requirements and understands that any exceptions to the requirements of the specifications and documents may render the Proposer's proposal non-responsive.

NO EXCEPTIONS ALLOWED AFTER THE RFP IS SUBMITTED:

Please check one:

I take NO exceptions

4. Exceptions

If you selected "Exceptions" in the preceding question, please enter any exceptions to this RFP No response submitted

5. Drug Free Workplace Certification

Pass

I have read and attest to, in accordance with Florida Statute 287.087 (current version), hereby certify that,

Publishes a written statement notifying that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace named above, and specifying actions that will be taken against violations of such prohibition.

Informs employees about the dangers of drug abuse in the workplace, the firm's policy of maintaining a drug free working environment, and available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug use violations.

Gives each employee engaged in providing commodities or contractual services that are under proposal a copy of the statement specified above.

Notifies the employees that as a condition of working on the commodities or contractual services that are under proposal, the employee will abide by the terms of the statement and will notify the employer of any conviction of, pleas of guilty or nolo contendere to, any violation of Chapter 893, or of any controlled substance law of the State of Florida or the United States, for a violation occurring in the workplace, no later than five (5) days after such conviction, and requires employees to sign copies of such written statement to acknowledge their receipt.

Imposes a sanction on, or requires the satisfactory participation in, a drug abuse assistance or rehabilitation program, if such is available in the employee's community, by any employee who is so convicted.

Makes a good faith effort to continue to maintain a drug free workplace through the implementation of the Drug Free Workplace Program.

"As a person authorized to sign this statement, I certify that the above named business, firm or corporation complies fully with the requirements set forth herein".

Please confirm that you have read and attest to the Drug Free Workplace Certificate

Confirmed

6. Statement of No Proposal *

Pass

Specifications unclear (explain below)

7. "No Proposal" Explanation

Pass

Please provide any necessary explanation as to why you chose not to participate.

WE ARE DEFINITELY SUBMITTING A PROPOSAL. THERE WAS NO WAY TO GET PAST QUESTION 6 WITHOUT SELECTING AN ANSWER

8. VENDOR/CONTRACTOR SURVEY *

Pass

Please provide information on where you received the knowledge of the bid/request for proposals (mark all that apply):

OpenGov Procurement

9. VENDOR/CONTRACTOR SURVEY (OTHER)

If you answered "Referred" or "Other" in the Survey, please specify:

No response submitted

10. Sub-Contractors/Sub-consultants:

The Hernando County BOCC reserves the right to approve all Sub-Contractors and/or Sub-Consultants for this contract. If Sub-Contractors are to be utilized, their names and references must be included within this initial Proposal.

Proposers shall list all proposed Sub-Contractors to be used, regardless of racial or gender grouping. Include names, addresses, phone numbers, type of work sub-contracted (discipline, trade or commodity) and proposed percentage of work for each firm.

No response submitted

11. Local Vendor Affidavit - 12 Month Minimum

Vendor/Individual has been in business in Hernando County for a minimum of twelve (12) months prior to date of bid or quote?

Not confirmed

12. VENDOR/CONTRACTOR INFORMATION*

Pass

Please Provide the following Information:

- 1. Respondent/Vendor Contractor Name
- 2. Vendor/Contractor FEIN
- 3. Vendor/Contractor's Authorized Representative Name and Title
- 4. Address
- 5. Phone Number
- 6. Email Address

SOS Care Solutions

92-1249741

Roderick Bennett MD, CEO and CMO

7830 Gunn Highway Tampa, FL 33626

504-648-7924

roderick.bennett@sosmmc.com

PROPOSAL DOCUMENT REPORT undefined - EMS Medical Director Services Page 7

13. Confirm 180 days proposal validity

Pass

Any proposals shall constitute an irrevocable offer (including pricing), for a period of one hundred eighty (180) days, to provide to the County the services set forth in this Request for Proposals, or until one (1) or more of the proposals have been awarded.

Confirmed

14. **VENDOR/CONTRACTOR CERTIFICATION REGARDING SCRUTINIZED COMPANIES*

Pass

Section 287.135 (Current Edition), Florida Statutes, prohibits agencies from contracting with companies for goods or services of \$1,000,000.00 or more, that are on either the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector Lists which are created pursuant to s. 215.473 F.S. (Current Edition), or the Scrutinized Companies that Boycott Israel List, crated pursuant to s. 215.4725 F.S. (Current Edition), or companies that are engaged in a boycott of Israel or companies engaged in business operations in Cuba or Syria.

As the person authorized to submit bids on behalf of respondent, I hereby certify that the company identified above in the section entitled "Respondent Vendor Name" is not listed on either the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, or the Scrutinized Companies that Boycott Israel List. I further certify that the company is not engaged in a boycott of Israel. I understand that pursuant to section 287.135 (Current Edition), Florida Statutes, the submission of a false certification may subject company to civil penalties, attorney's fees, and/or costs and does not have business operations in Cuba or Syria.

Confirmed

15. Proposal Principals *

Pass

Please name all persons or entities interested in the proposal as principals.

Provide name, title, mailing address, email address and phone number.

SOS Care Solutions LLC Principals.pdf

16. Affidavit of Non Collusion and of Non-Interest of Hernando County Employees* *Pass*

Affidavit of Non Collusion and of Non-Interest of Hernando County Employees

Certification that Vendor/Contractor affirms that the bid/proposal presented to the Owner is made freely, and without any secret agreement to commit a fraudulent, deceitful, unlawful or wrongful act of collusion.

I have read and attest that I am the Vendor/Contractor in the above bid/proposal, that the only person or persons interested in said proposal are named therein; that no officer, employee or agent of the Hernando County Board of County Commissioners (BOCC) or of any other Vendor/Contractor is interested in said bid/proposal; and that affiant makes the above bid/proposal with no past or present collusion with any other person, firm or corporation.

Please confirm that you have read and attest to Affidavit of Non Collusion and of Non-Interest of Hernando County Employees Confirmed

17. Proposal Format

The following information shall be submitted in all Proposer responses in the format as specified herein. Failure to submit the requested information in this format will result in a reduction in the evaluation points assigned to your proposal. *Pages exceeding the stated number (TAB 1 through TAB 3) will not be included for review by the evaluation committee.*

TAB 1 - MEDICAL DIRECTOR QUALIFICATIONS* Pass

The respondent will provide a letter, not exceeding two (2) pages, which serves as a statement of interest and introduction to the submittal. This letter will summarize in a brief and concise manner, the Respondent's understanding of the Scope of Work and qualifications to perform the services.

17.1_Medical_Director_Qualifications.pdf

TAB 2 EXPERIENCE AND EXPERTISE*

Pass

Identify key personnel and any alternates to be directly involved with providing the day-to-day services and indicate the years of experience and training in Emergency Medical Services.

Provide description of experience serving as an EMS Medical Director, EMS Assistant Director or Hospital Emergency Department/Room Medical Director. Indicate experience interacting with Fire and/or EMS personnel while instructing, demonstrating or testing EMS skills.

Resumes, licenses/certifications, and any applicable previous experience.

 $17.2_Tab_2_Experience_and_Expertise.pdfrbennettcv_10-2023.pdfUlatowski_CV.pdf$

TAB 3 APPROACH TO MEDICAL PROTOCOLS, QUALITY ASSURANCE, AND REPORTING*

Pass

Section 1: Requirements and Qualifications -

Section 2: Duties and Responsibilities -

Section 3: Special Operations Programs -

Section 4: Local Disaster/Emergency Protocols -

Section 5: Health Promotion and Wellness Activities -

Section 6: In-Service Training/Continuing Education -

Section 7: Reporting -

17.3_Tab_3_Approach_to_Medical_Protocols.pdfPain_Excited_Delirium_PDF.pdfSample_Activity_Report.pdfI_Gel_Airway_protocol.pdf

TAB 4. COST PROPOSAL*

Pass

Upload price proposal inclusive of insurance requirements. Costs should be itemized for clarity of proposed fees. Total cost should be per year for providing services to Hernando County.

17.4 Tab 4 Cost Proposal.pdf

TAB 5 - LOCATION AND AVAILABILITY*

Pass

Provide address of Physician's primary work location in proximity to Hernando County and availability to attend meetings and observe paramedic and EMT job performance.

17.5 TAB 5 Location and Availability.pdf

TAB 6 – PROPOSED IMPLEMENTATION TIMELINE BEGINNING AT THE DATE OF CONTRACT APPROVAL.* Pass

Proposer should also include any additional detail regarding how transition from current provider will be handled.

Dr. Bennett was fortunate enough to have been selected to provide interim medical director services for HCFR. In this interim position, he has had time to familiarize himself with HCFR staff, policies, procedures, and operations. The transition of services to a permanent position would be nearly seamless. The only potential delays would be in the contracting process, and in reality, there would be no disruption of services as Dr. Bennett would still be providing services in his interim role during the transition process.

ATTACH REQUIRED LICENSES, REGISTRATIONS, AND CERTIFICATIONS AS INDICATED IN ATTACHMENT A - EMS MEDICAL DIRECTOR SERVICES, SCOPE OF WORK, SECTION 1 - REQUIREMENTS AND QUALIFICATIONS.*

Pass

PALS_Instructor_2022_Card.pdfDEA_23-26.pdfACLS_Instructor_2022_Card.pdfFL_Med_License_23-25.jpegResidency_Training_Cert.jpegABEM_Cert.pdfEMS_Fellowship_Cert.jpegBennett_DEA_and_ABEM.pdfACLS_Bennett.pdfABEM_Certification_Bennett.pdfFL_License_Verification_Bennett.pdf

Certification_Bennett.pdf

Certification_Bennett.pdf

Certification_Bennett.pdf

Certification_Bennett.pdf

18. Sworn Statement

SWORN STATEMENT SECTION 287.133 (3) (A)* Pass

I have read and attest that I understand that a "public entity crime" as defined in Paragraph 287.133 (1)(g), Florida Statutes (current version), means a violation of any public entity or with an agency or political subdivision of any other state or of the United States, including, but not limited to, any proposal or contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.

I have read and attest that I understand that "convicted" or "conviction" as defined in Paragraph 287.133 (1)(b), Florida Statutes (current version), means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, non-jury trial, or entry of a plea of guilty or nolo contendere.

I have read and attest that I understand that an "affiliate" as defined in Paragraph 287.133 (1)(a), Florida Statutes (current version), means:

- A. A predecessor or successor of a person convicted of a public entity crime; or
- B. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one (1) person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one (1) person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding thirty-six (36) months shall be considered an affiliate.

I have read and attest that I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes (current version), means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which proposals or applies to proposal on contracts for the provisions of goods or services let by a public entity,

or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

I have read and attest that based on information and belief, the statement which I have confirmed below is true in relation to the entity submitting this sworn statement:

_____ [attach a copy of the final order].

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH ONE (1) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31, OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT.

Neither the entity submitting this sworn statement, nor any of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

IF YOU CHOOSE OPTION 3, PLEASE ATTACH A COPY OF THE FINAL ORDER

The entity submitting this sworn statement, or one (1) or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted Vendor/Contractor list

Please attach a copy of the final order

No response submitted

19. Authorized Signatures/Negotiators

AUTHORIZED SIGNATURES/NEGOTIATORS * Pass

Please provide the information to support the statement below:

The Vendor/Contractor represents that the following persons are authorized to sign and/or negotiate contracts and related documents to which the Vendor/Contractor will be duly bound:

Name(s)
Title(s)
Phone Number (s)
Roderick Bennett, CEO and CMO, 504-648-7924

TYPE OF ORGANIZATION *

Pass

Select your organization's type below

Sole Proprietorship

COMPANY ID*

Pass

Please Provide Your:

Company name

Address

Phone

Email

State of Incorporation and

Federal I.D. Number

PROPOSAL DOCUMENT REPORT undefined - EMS Medical Director Services Page 14

PROPOSAL DOCUMENT REPORT RFP No. 23-RFP00361/TPR EMS Medical Director Services

Please state if you collect Florida sales Tax.

SOS Care Solutions LLC, 7830 Gunn Highway, Tampa, FL 33626, 504-648-7924, roderick.bennett@sosmmc.com, Incorporated in Florida, 92-1249741, We do not collect Florida Sales Tax

W-9*

Pass

Please attach your W-9

W9.pdf

SOS Care Solutions LLC Principals

Roderick Bennett MD, MBA, FACEP

Chief Executive Officer and Chief Medical Officer

4909 Summit View Drive

Brooksville, FL 34601

roderick.bennett@sosmmc.com

(504)648-7924



SOSMMC.COM • 844.SOS.MED1 • 844.767.6331

November 6, 2023

Dear Hernando County Board of County Commissioners,

SOS Care Solutions would like to formally submit our proposal to provide medical direction services for Hernando County Fire Rescue (HCFR). This proposal is submitted by Roderick Bennett MD on behalf of SOS Care Solutions LLC as the organization's Chief Executive Officer and Chief Medical Officer and sole owner. This proposal is made without collusion with any other person or entity submitting a proposal pursuant to this RFP. We understand that the medical director position is responsible for providing oversight of delivery of medical care by HCFR paramedics and EMTs. We also understand that the medical director will be responsible for ensuring the quality and compliance of the agency's medical performance. We have read the duties and responsibilities as outlined in Section 2 of the EMS Medical Director Services Scope of Work and understand each of these duties and responsibilities implicitly as we currently provide EMS medical director services in Citrus County.

SOS Care Solutions is a medical practice dedicated to providing up-to-date solutions to improve patient care in today's ever changing healthcare environment. The members of SOS Care Solutions possess a diverse set of skills, and we have selected two members of our group with extensive EMS experience to accept the responsibility of medical direction for HCFR. Together, Dr. Roderick Bennett and Dr. Chanteil Ulatowski possess over 35 years of experience in the field of emergency medicine, and each physician would be more than capable of providing excellent medical direction on their own. Their combined expertise creates a supervisory team whose collective talents will ensure that HCFR's EMS services are of the highest quality and are driven by the latest evidence-based and cost-conscious best practice guidelines.

Both Dr. Bennett and Dr. Ulatowski meet the requirements and qualifications outlined in Section 1 of the EMS Medical Director Services Scope of Work. Both physicians hold the degree of MD and both have active, unrestricted licenses to practice in the state of Florida. Both physicians hold board certification in Emergency Medicine from the American Board of Emergency Physicians. Additionally, Dr. Bennett is a fellow of the American Board of Emergency Physicians and Dr. Ulatowski has completed a fellowship in Emergency Medical Services. Both physicians hold ACLS certification, and Dr. Ulatowski is an ACLS and PALS instructor. Dr. Ulatowski is a member of the Florida Association of EMS Medical Directors and the NAEMSP.

We would like to humbly thank the citizens of Hernando County for the opportunity to submit a proposal. We have great confidence in our ability to serve the citizens of Hernando County, as the members of our organization are not only distinctly qualified, but as residents of Hernando County and practicing Emergency Physicians in Hernando County, Dr. Bennett and Dr. Ulatowski are also unquestionably dedicated to improving the timeliness and quality of emergency care delivered by Hernando County Fire Rescue.

Sincerely,

Roderick Bennett, MD, MBA FACEP

CEO and CMO SOS Care Solutions

17.2. TAB 2 Experience and Expertise

SOS Care Solutions has chosen Dr. Roderick Bennett and Dr. Chanteil Ulatowski to perform the medical director services outlined in our proposal. Dr. Bennett and Dr. Ulatowski bring complementary skill sets that cover the broad spectrum of expertise needed to successfully manage an EMS program the size of Hernando County Fire Rescue (HCFR). With a dual degree of MD/MBA and over 30 years of experience in the field of Emergency Medicine and Emergency Medicine administration, Dr. Bennett brings a wealth of real-world knowledge and experience. Dr. Ulatowski is comparatively new to the world of Emergency Medicine, having started her training 5 years ago, but her dedication to the field of EMS led her to complete a fellowship in EMS providing a fresh new perspective with up-to-date knowledge of the latest advances in equipment, guidelines and research. In their roles providing medical direction for Citrus County Fire Rescue, Dr. Bennett handles the more administrative tasks such as interacting with the Board of County Commissioners, analyzing budgetary implications, and weighing the impact of new initiatives such as the opioid recovery program. Dr. Ulatowski manages the more clinical tasks such as protocol review, training classes, and evaluation of new equipment. The two medical directors share in the responsibilities of testing Citrus County Fire Rescue paramedics, and all medics must pass a one-on-one scenario test with one of the medical directors before they are cleared to work as a lead paramedic.

After residency, Dr. Bennett quickly ascended through the ranks of emergency department administration and in 2010 was named medical director of the emergency department at Brandon Regional Hospital in Florida which at that time was the largest volume emergency department in the HCA system. In 2013, Dr. Bennett took a position as regional president for ApolloMD, one of the largest Emergency Medicine staffing companies in the United States. In that role, Dr. Bennett managed the operations of twelve emergency departments in five states. In 2017, he founded Hernando County Emergency Physicians, a private group of Emergency Physicians providing services at two of the three hospitals in Hernando County.

In 2019, Dr. Bennett's group was selected to assume the medical director role for Citrus County Fire Rescue. Dr. Bennett managed the transition of Citrus County Fire Rescue from an ALS to a BLS service, and in less than 2 years' time, all stations were converted to ALS. As this transition was occurring, Dr. Bennett was also selected to serve as the medical director for Nature Coast EMS in Citrus County. He was retained as the medical director when Nature Coast EMS was absorbed by Citrus County Fire Rescue, and he continues to serve as the medical director currently.

In 2022, Dr. Ulatowski joined Dr. Bennett as the associate medical director for Citrus County Fire Rescue. In addition to her training and board certification in Emergency Medicine. Dr. Ulatowski also completed a fellowship in Emergency Medical Services. The training during this fellowship put Dr. Ulatowski at the forefront of the field of EMS as she participated in the latest research and creation of evidence-based guidelines. She served as the assistant medical director for Alachua County Fire Rescue and the assistant medical director of Ben Griffin Stadium. She has extensive training in protocol development, credentialing new paramedics, and remediation of paramedics when necessary. She is currently in the process of re-writing the Citrus County protocols to make them more user friendly and to convert them into an application that can be accessed on any smart device. She has a passion for teaching, whether in the field, bedside in the ER or in a dedicated training session. Currently she bears responsibility for the development of the training materials as well as organizing and conducting training days for CCFR. She is also a certified ACLS and PALS instructor and completed the ICS 300 course on incident command.

Roderick N. Bennett MD, MBA, FACEP

4909 Summit View Drive, Brooksville, FL 34601 roderick.bennett@sosmmc.com (504)648-7924

Board Certification

11/08 - 11/28 CERTIFIED DIPLOMAT OF THE AMERICAN BOARD OF EMERGENCY MEDICINE

Current Employment

7/23 - present HERNANDO COUNTY FIRE RESCUE – HERNANDO COUNTY, FL

Interim Medical Director

Serve an interim medical director overseeing the current medical protocols and medical activities of the fire-based EMS system while awaiting the selection of a permanent director.

9/21 - present S.O.S. CARE SOLUTIONS - TAMPA, FL

CMO/CEO/Laboratory Director

Manage the operations and supervise the medical care of a mobile medical service delivering primary care, urgent care, and emergency care to the greater Tampa Metropolitan Area.

- Created medical protocols for use by providers in the field.
- Oversee CLIA waived lab testing and moderately complex lab testing
- Completed the University of Iowa CME Course for Physician Lab Directors of Moderate Complexity Laboratories

9/21 - present CONTINUUM MEDICAL SOLUTIONS - CRYSTAL RIVER, FL

Founder and President

Manage the operations of the 16-bed Intensive Care Unit at Bravera Health Seven Rivers

3/19 - present CITRUS COUNTY FIRE RESCUE - CITRUS COUNTY, FL

Medical Director

Responsible for the medical training, medical protocols and on-line medical control for the Emergency Medical System of Citrus County, Florida which sees 31,000 patients annually

- Successfully oversaw transition from first responder status to advanced life support
- Established 24 hour online medical control
- Revised and updated medical protocols

1/17 - present SOUTHEAST EMERGENCY PHYSCICIANS - BROOKSVILLE, FL

Founder and President

Manage the operations of four Emergency Departments and one Urgent Care Center in Citrus and Hernando Counties, Florida.

Active Hospital privileges include:

- Bravera Health Brooksville and Spring Hill Hospitals
- Bravera Health Seven Rivers Hospital

1/11 - present SCRIBE INNOVATIONS, TAMPA, FL

Founder and President

Manage the operations of a company that designs and implements medical scribe programs for Emergency Departments and outpatient clinics. Scribe Innovations is based on the unique philosophy of training scribes as facilitators of patient flow and increased patient satisfaction in addition to their usual role of documenters

<u>Previous Employment</u>

4/13 - 1/17 APOLLOMD - ATLANTA, GA

Regional President

Managed the operations of 12 Emergency Medicine practices and 6 Hospital Medicine practices in 5 states in the southeastern United States

7/07 - 2013 LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER - NEW ORLEANS, LA

Attending Physician in Emergency Medicine

Member of the academic Emergency Medicine staff at the Level I Trauma Center in New Orleans. Served as the assistant director of the medical student clerkship in Emergency Medicine

1/12 - 5/13 DOCTOR'S HOSPITAL - SARASOTA, FL

Attending Physician in Emergency Medicine

Attending physician in a community emergency department with a volume of over 35,000 visits a year

9/11 - 7/13 ST JOSEPH'S HOSPITAL MAIN/NORTH - TAMPA, FL

Attending Physician in Emergency Medicine

Attending physician in a community emergency department with a volume of over 45,000 visits a year.

3/10 - 12/13 BRANDON REGIONAL MEDICAL CENTER - BRANDON, FL

Medical Director/Attending Physician in Emergency Medicine

Served as Medical Director and Chairman of the Department of Emergency Medicine in a community emergency department with a volume of over 104,000 annual visits.

- Managed the transition of the contract to a new management group
- Installed "Express Care" and "Intermediate Care" areas greatly reducing ALOS.
- Instituted a Provider in Triage process to reduce wait times.
- Participated in the planning and design of the freestanding ED in Plant City.

4/09 - 5/11 HALIFAX MEDICAL CENTER - DAYTONA BEACH, FL

Attending Physician in Emergency Medicine

Attending physician at the Level I trauma center in Daytona Beach with a volume of over 80,000 annual visits

· Assisted in the design of the triage system for the newly built ED

7/07 - 1/09 DUVASAWKO/EMERGENCY MEDICINE PROFESSIONALS - DAYTONA BEACH, FL

Attending Physician in Emergency Medicine

Attending Physician staffing three single and double coverage community emergency departments in Volusia County, Florida. Volumes range from 30,000 - 60,000 annual visits yearly at each of the three facilities, Florida Hospital Deland, Florida Hospital Fish Memorial, and Bert Fish medical center.

11/05 - 7/07 LEONARD J. CHABERT MEDICAL CENTER - HOUMA, LA

Attending Physician in Emergency Medicine

Over 1,000 hours moonlighting as staff physician in a 60,000 visit per year, single physician coverage, county emergency department, including supervision of physician assistants, residents, and medical students.

2/05 - 8/05 PLAQUEMINES PARISH DETENTION CENTER - BELLE CHASSE, LA

Prison Clinic Physician

Provided acute care services as well as managed the daily medical care the of the prison population.

5/00-9/00 THE ABARIS GROUP - WALNUT CREEK, CA

Research Associate

Provided medical as well as business insight on consulting projects for EDS, EMS providers, and EMS systems across the United States. Responsibilities entailed both on-site and off-site project research support, including data compilation and evaluation, as well as client report preparation and presentation.

Postgraduate Training

7/03 - 6/07 LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER - NEW ORLEANS, LA

Internship and Residency in Emergency Medicine

- Selected as the 2003 2004 LSUHSC Intern of the Year
- Elected Chief Resident in Emergency Medicine for 2006 2007.
- Served as shift leader on the disaster activation team at Charity Hospital during Hurricane Katrina.
- Member of the disaster recovery team in New Orleans after Hurricane Katrina.
- Resident member of SAEM, ACEP, and AAEM.
- Recipient of the William J Bradley Memorial Education Award for 2007.

Education

7/97 - 5/03 EMORY UNIVERSITY SCHOOL OF MEDICINE - ATLANTA, GA

Doctor of Medicine

- Completed throughput analysis of admitted patients through a 100,000 visit a year ED.
- Served as treasurer of the Student National Medical Association.
- Served as vice-president of the Emergency Medicine Interest Group.
- Awarded Dean's Scholarship

7/99 - 5/01 CRUMMER GRADUATE SCHOOL OF BUSINESS AT ROLLINS COLLEGE - WINTER PARK, FL

Master of Business Administration, Concentrating in Electronic Commerce

Awarded Dean's Scholarship

8/93 - 6/97 HARVARD UNIVERSITY - CAMBRIDGE, MA

Bachelor of Arts degree with Honors in Biochemical Sciences

- Earned varsity letter for baseball in 1994 and 1995.
- Member of the Digamma Club
- Volunteered as an EMT with the local EMS and fire departments
- Appointed director of Harvard University Emergency Services Program, a community service organization that taught CPR to the public and provided volunteers for local EMS services.

Professional Organizations

- Fellow of the American College of Emergency Physicians
- Member of Florida EMS Medical Director Association
- Member of the Florida College of Emergency physicians
- Member of the Society for Academic Emergency Medicine and Academy of Academic Emergency Physicians

<u>Personal</u>

Conversant in Spanish and Portuguese. Highly proficient in EMR design and implementation as well as other information technology applications. Interests include golf, snorkeling, live music, and hiking.

Chanteil Ulatowski

4452 Bahama Drive, Hernando Beach FL 34607 chanteildeshon@gmail.com 815-405-3967

Education

University of Florida- Gainesville Gainesville, FL Emergency Medical Services Fellowship 07/2021- 06/2022

University of Florida- Gainesville Gainesville, FL Emergency Medicine Residency 07/2018- 06/2021

Oakland William Beaumont School of Medicine (OUWB) Auburn Hills, MI Doctor of Medicine 08/2014-05/2018

Olivet Nazarene University (ONU) Bourbonnais, IL Bachelor of Arts in Biology 08/2010-05/2014 Bachelor of Arts in Psychology GPA: 3.95/4.0

Minor: Chemistry

Medical Licensure/ Certifications

ABEM Board Certified Emergency Medicine Physician: 06/2022- 12/31/27

ENLS: 06/2019-06/2021

ACLS Instructor Certified: 02/2022- 02/2024 PALS Instructor Certified: 02/2022-02/2024

ATLS: 04/2022- 04/2026

FEMA: 07/2021

IS-00100 Introduction to the Incident Command System

IS- 00200 Basic Incident Command System for Initial Response

IS-00700 NIMS, and Introduction

IS- 00800 National Response Framework (NRF), and introduction

ICS- G300 Intermediate ICS for Expanding Incidents

Professional Societies

National Association of EMS Physicians	11/2021—Present
American College of Emergency Physicians	07/2018—Present
Society of Academic Emergency Medicine	07/2018—Present
Emergency Medicine Residents Association	07/2018—Present
Society of Hospital Medicine	10/2016—Present
American Medical Women's Association	08/2014—Present
American Medical Association	08/2014—Present

Work Experience

Citrus County Associate EMS Director 07/2022- Present Create and maintain protocols for Citrus County Fire Rescue

- Participate in QA regarding cases occurring in Citrus County
- Certifying and training new paramedics for the county

Answering medical control calls from paramedics in the field Emergency Medicine Physician with South East Emergency Physicians

Emergency medicine physician, handling patient care

Averaging 3.5 patients per hour

Citrus County, FL

07/2022- Present

ACFR Assistant Medical Director 07/2021—06/2022 Create and maintain protocols for Alachua County Fire and Rescue Gainesville, FL Participate in QA regarding cases occurring in Alachua county Certifying and training new paramedics for the county UF Ben Griffin Stadium Assistant Medical Director 07/2021—06/2022 • Provide medical direction for paramedics during large events at the stadium Gainesville, FL including all football games Participate in planning for large events prior to taking place Hospitalist Moonlighting 07/2019—06/2021 Admitted patients overnight and answered nursing pages Gainesville, FL Responded to all SWATs and Codes overnight Ortho After Hours Clinic- UF Shands 08/2020—06/2021 Splinted, reduced, and completed nerve blocks on patients Gainesville, FL Anatomy M1 Tutor 08/2015 **OUWB School of Medicine** Rochester, IL

• Designed and executed a study plan for M1 students using cadavers

Research/Publications Experience

ICare 2019- Prehospital division

01/2020

- Scored 60+ articles written in 2019 pertaining to prehospital cardiac arrest patients

 Gainesville, FL
- Wrote summaries on the highest scoring articles pertaining to prehospital cardiac arrest patients
- Manuscript with the summaries published in *Resuscitation Plus*

EMRA CorePendium: Marine Envenomation Co-Author

01/2019- Present

- Researched journal articles and publications regarding an array of marine animal envenomations in regards to emergency treatment to help create an interactive textbook chapter for emergency medicine physicians
- Continued research regarding new studies and updating the chapter on a monthly basis

Emergency Medicine Oral Board Review Edition 3: Pyelonephritis

07/2019

UF Shands Gainesville

Gainesville, FL

• Referenced new protocols and guidelines in *Tintinalli's* and *Rosen's* to create an oral board study tool to help EM physicians preparing for their oral board exam.

Capstone Research Program

08/2014-08/2018

OUWB School of Medicine

Rochester, MI

- Investigating the relationship between international experiences and the development of cultural sensitivity
- Performed a school-wide survey through the use of Qualtrics, distributed via email

Quality Improvement:

Alachua County Fire Rescue EMS Protocol Review

05/2019

UF Shands Gainesville

Gainesville, FL

- Reviewed an array of EMS protcols from current manual and made corrections/ suggestions for new edition
- Researched new EMS protocol recommendations and added suggestions to the new ACFR manual

Emergency Department Video Orientation Curriculum

07/2019

UF Shands Gainesville

Gainesville, FL

• Participated in the creation of voiced over videos explaining how to navigate the EPIC system and order important order sets pertaining to emergency department patients for incoming off-service interns

07/2019

UF Shands Gainesville

Gainesville, FL

• Created an updated resuscitation badge buddy for pediatric patients that included important medications and dosages as well as next steps in a resuscitation that could be easily accessed during a critical patient encounter and distributed to all EM residents and faculty that desired them.

Presentations

University of Florida- Gainesville EMS Fellowship

Big Bend Conference: "OB Emergencies"

• National virtual lecture conference for EMS personal around the United States

Sumpter County Training: "Refusals and Medical Control Calls"

Lake County Training: "EMS Arrhythmia"

ACFR Critical Care Training: "EMS Arrhythmia"

ACFR Critical Care Training: "EMS Respiratory Distress"

ACFR Training: "Refusals and Medical Control Calls

ACFR Critical Care Training: "OB Emergencies"

• Lecture presentation at the critical care and normal training session for fire/paramedics 07/2021-06/2022

University of Florida- Gainesville Emergency Medicine Residency

PGY3 Core Content Lecture: "High Altitude Sickness"

- Lecture presentation at UF Emergency Medicine Conference Session, Gainesville, FL. 07/2020 PGY2 EBM Presentation: "Can you discharge a new onset pulmonary embolism on anticoagulation"
- Lecture presentation at UF Emergency Medicine Conference Session, Gainesville, FL. 09/2019

Oakland University William Beaumont School of Medicine

"International Experience and its Effect on Cultural Sensitivity Development in Medical Student."

- Poster Presentation at the American College of Physicians Residents/ Medical Students day, Sterling Heights, Michigan. 05/06/2017
- Oral poster presentation at the AMWA National Conference, San Francisco, California. 03/30/2017
- Poster presentation at the Medical Equity Healthy Equity Research Conference, Detroit, MI. 02/18/2017.
- Poster presentation at the Thea Lockard Conference of American College of Physicians, Acme, MI. 10/1/2016
- Oral presentation at the Graduate Student Research Conference at Oakland University, Rochester, MI. 05/27/2016
- Oral presentation at the Robert J. Lucas Surgical Society Research Symposium at Royal Oak William Beaumont Hospital. 01/21/2016

Olivet Nazarene University

"Effects of heavy metal concentrations on E. coli growth."

• Oral presentation at the ONU Senior Research Seminar in Bourbonnais, IL. 12/2013

Awards Recieved

Shining Star Award Bravera Health

08/2022

- Awarded the Shinning Star Award by the CEO of Bravera Health Seven Rivers Hospital Crystal River, FL
- The award was given to those that showed excellent patient care and teamwork within the health system
- A vote was cast by my colleagues (nurses, fellow physicians, PA, NP, Techs ect.) and Google Reviews were considered for nomination for the award. I was then selected by the CEO of the hospital for the award.

Extracurricular Activities

UF Shands Gainesville

Leadership Experience

EMRA Representative 07/2018- 07/2020 UF- Gainesville Gainesville, FL

• Attended program evaluation meetings as the EMRA representative to discuss ongoing issues and ways to get involved in the emergency medicine community

UF Wellness Committee Leader

07/2019-06/2021

UF- Shands Gainesville

Gainesville, FL

- Organized entire department wellness events that included team building exercises
- Managed the wellness departmental fund

Volunteer Experiences

UF Big Sib Mentoring program

07/2019-06/2021

UF Shands Gainesville

Gainesville, FL

Assigned an incoming PGY1 to mentor through his/her transition into residency and support him/her through daily residency and life challenges

UF Football Stadium Volunteer

11/2019

UF- Shands Gainesville

Gainesville, FL

- Provided physician assistance to fans in the stadium who required medical attention alongside EMS personnel
- Worked closely with the UF EMS directors, fellows, and staff during these events and coordinated appropriate care for patients

Conferences Attended

NAEMSP 01/2022

Educational conference regarding EMS topics and medical direction

San Diego, CA

ACEP

October 2021

Attended virtually via links provided by conference

Strike Back Educational Summit

08/2019

Sponsored by BTG

Lake City, UT

Educational conference regarding snake envenomation, proper treatment management, and the manufacturing of CroFab

Oakland University William Beaumont School of Medicine, Rochester, MI

Leadership Experiences

Mental Health and Psychiatry Interest Group, President

01/2015—03/2016

Oversaw all events and entities concerning MHP and coordinated between the various outside organizations that MHP was a part of and OUWB administration

Volunteer Experiences

Child Assistant at Carehouse

03/2016- 03/2018

- Carehouse is an organization that facilitates the legal processes of disclosing an instance of physical, sexual, and/or emotional abuse of a child (0-18 y/o).
- Assisted in the organization and care of the children during their encounter with the social workers and authorities

AMWA Mentoring Program

10/2015-05/2016

- Mentoring an undergraduate student through the medical school application/ preparation process
- Developing relationships with people outside of immediate social circle

Extracurricular

Volunteer Experiences

Royal Family Kids Camp

08/2014

- Assisted in giving abused and neglected foster care children a week of worry-free fun and safety
- Counseled female children from the ages of 6 to 8
- Assisted in the organization of the camp's drama committee

Language Fluency

English- Proficient Spanish- Good

17.3 TAB 3 Approach to Medical Protocols, Quality Assurance, and Reporting

Section 1: Requirements and Qualifications:

Dr. Bennett and Dr. Ulatowski possess significant experience in writing, maintaining and updating EMS medical protocols. When Dr. Bennett assumed the role as medical director for Citrus County Fire Rescue, he was tasked with helping transition the organization from an BLS Service to an ALS service. Dr. Bennett had to create an entirely new set of EMS protocols. He compiled protocols from around the country and modified them to be relevant to the environment in Citrus County and to be a set of protocols from which a fledgling ALS service could grow. As the skills of the medics grew, the protocols had to be updated to allow more autonomy. While Citrus County Fire Rescue was transitioning to ALS service, Citrus Fire Rescue, which was a non-transport agency merged with Nature Coast EMS which was a purely transport agency. Dr. Bennett then had to merge the protocols from each agency and adapt them so that the two agencies could function as a single entity providing both first response and transport.

Upon the arrival of Dr. Ulatowski to Citrus County Fire Rescue, the task of maintaining and updating the EMS medical protocols was turned over to her. These duties require her to stay abreast of the latest EMS research and literature as well as to balance the updates with the abilities and the workload of the paramedics in the field. Updates to protocols must be relevant and impactful to patient care. They must also be feasible given the restraints of the system in which we work. Trivial updates to protocols that will have little impact on patient care or exceed the capabilities of our system are a waste of time and resources and place unnecessary stress on the medics. Protocol changes must also be financially sound. Assessment of the financial impact of protocol changes falls under the responsibility of Dr. Bennett, and he works with the appropriate members of the Fire Service to ensure that any protocol changes are fiscally responsible. The plan is to continue this process with Hernando County Fire Rescue

Dr. Bennett and Dr. Ulatowski have reviewed the current HCFR standing orders and protocols and plan to update them to ensure that they are both up to date with current standards and evidence-based guidelines as well are user-friendly. After reviewing the protocols provided and through our experiences accepting patients from the HCFR crews in the local emergency departments, we have identified opportunities in the areas of pain control, excited delirium, and trauma transportation which will be our first priorities. We have also observed that opportunity exists to make the current protocols more user friendly and easier to access from the field as well as to make the process of pushing updates out to the users easier. We would assist in evaluating the technology options available and conversion of the protocols into the new format if feasible.

Section 2: Duties and Responsibilities:

Dr. Bennett and Dr. Ulatowski have both participated in numerous quality assurance and quality improvement reviews. During her EMS fellowship, Dr Ulatowski was actively engaged in the quality review of EMS run reports. She assessed the documentation deficiencies and provided feedback including areas of excellence and areas in need of improvement as they related to both documentation and clinical care. During residency, Dr. Bennett participated in a quality review of rapid sequence intubations for the paramedics of the New Orleans EMS as well as quality review of traumatic cardiac arrests called in the field for New Orleans EMS. With Citrus County Fire Rescue, we have designated diagnoses, treatments and outcomes that trigger the QA process, and we review any of those cases that fall outside the standard evaluation criteria when reviewed by the director of quality.

After sitting through countless meetings with endless droves of meaningless data being presented, we have developed three cardinal rules for our QA processes.

- 1) Review data points that truly impact and predict quality.
- 2) Review a manageable number of data points.
- 3) Act on the data.

Adhering to these rules avoids "paralysis by analysis." While having a million data points is nice, it rarely is necessary and often leads to a waste of time and resources collecting either irrelevant data or data that has little impact on the quality of outcomes. However, simply reporting data is not sufficient. Data must be used to drive change! We also strongly feel that quality assurance should be a proactive process instead of a process that waits to respond to poor quality outcomes after they occur. One of the biggest changes we brought to the Citrus County Fire Rescue is the availability of 24 hour a day online medical control. For the sake of better patient care as well as to decrease liability, paramedics in the field must be able to consult their medical director in real time. Real time medical control also allows medical directors to assess the educational needs of the crews as well as deficiencies in the current protocols. Bringing 24/7 online medical control to HCFR would be one of our first priorities.

Section 3: Special Operations Programs:

Dr. Bennett and Dr. Ulatowski both have extensive experience in special operations. Dr. Bennett has served as the medical director for Pasco County SWAT and has participated in numerous tactical EMS training activities as well as responded to multiple SWAT calls. He has also participated in the development and conduction of multiple mass casualty incident drills both tabletop and live. Dr. Bennett participated in the planning of the Hernando County Fire Rescue mass casualty drill in 2019, and in September of 2023, Dr Bennett oversaw two live mass casualty HAZMAT drills between Citrus County Fire Rescue and the Citrus County Detention Center. The drill included 20 victims of organophosphate poisoning and the participants had to negotiate the difficulties of accessing and exiting a secure facility. As part of her EMS fellowship, Dr. Ulatowski was trained in developing protocols and maintaining compliance with HAZMAT/ special operations requirements. Both providers are eager to participate in any special ops or HAZMAT training opportunities that are available with HCFR. We would especially like to help expand tactical EMS training given the uptick in gun violence in the United States.

Section 4: Local Disaster/ Emergency Protocols:

In addition to the mass casualty and disaster medicine training provided in the Emergency Medicine residency and fellowship curricula, both physicians have significant mass casualty and disaster medicine experience. Having participated in the disaster response plan prior to the hurricane, Dr. Bennett was an effective shift team leader at Charity Hospital when Hurricane Katrina struck New Orleans. Dr. Bennett also helped coordinate care of the hospital patients during the disaster phase of the operation as well as the evacuation of the hospital after the storm passed. As the medical director for multiple emergency departments, Dr. Bennett has participated in the creation of numerous hospital and regional disaster plans and recently implemented disaster plans for the Bravera Health Hospitals in Brooksville, Spring Hill, Crystal River and Citrus Hills during Hurricanes Irma, Maria and Idalia. Additionally, Dr. Ulatowski has completed ICS 300 incident command training. We plan on continuing to take active leadership roles in disaster preparedness and response for Hernando County. Having redundancy in the medical director

duties ensures that both the emergency and recovery phases of a disaster will have continuous physician coverage.

Section 5: Health Promotion and Wellness Activities:

As healthcare in the 21st century evolves, so must the roles of the paramedic. Paramedics have an extremely diverse set of skills and can provide essential services beyond emergency medical care. Using paramedics for health promotion and wellness activities can help prevent health issues, improve overall community well-being, and reduce the burden on emergency services by addressing health concerns at an earlier stage. This approach fosters a proactive and community-centered model of healthcare. We will strive to allow the paramedics to practice at the top of their licenses, and community paramedicine will be a field of great emphasis if we are awarded the contract as this is one of Dr. Bennett's passions. In 2023, Dr. Bennett helped Citrus County Fire Rescue start a community paramedic program. The community paramedics have already had a dramatic impact by assisting with medication assisted treatment of citizens with opioid use disorder. The community paramedic program continues to expand its role and is now providing follow-up for high-risk EMS refusals and will soon begin using "treat in place" protocols to help ease emergency department overcrowding.

If called upon to do so Dr. Bennett and Dr. Ulatowski will collaborate with local health departments, public health experts, and community organizations to develop a curriculum for paramedics and ensure paramedics receive appropriate training in health promotion, wellness, disease prevention and public health education. We will collaborate with these agencies to identify the target population or communities where health promotion and wellness activities are needed. Once the scope of services to be offered is determined we will provide ongoing medical oversite of the program including outcome measurement, quality assurance, and expansion of the services offered.

Section 6: In-Service Training/ Continuing Education:

Given her more recent formal EMS training, Dr. Ulatowski will head up the EMS training and education efforts. She is a certified ACLS and PALS instructor. Dr. Ulatowski also has prepared numerous lectures and hands-on training modules on various topics in EMS. In addition to the minimal continuing education requirements, recertification processes, credentialing, ACLS and other training requirements per Florida law, quarterly training sessions with the medical director will be held. Training sessions also will be held on demand as needed for remediation or in response to a discovered deficiency, changes in the standard of care or at the request of the paramedics.

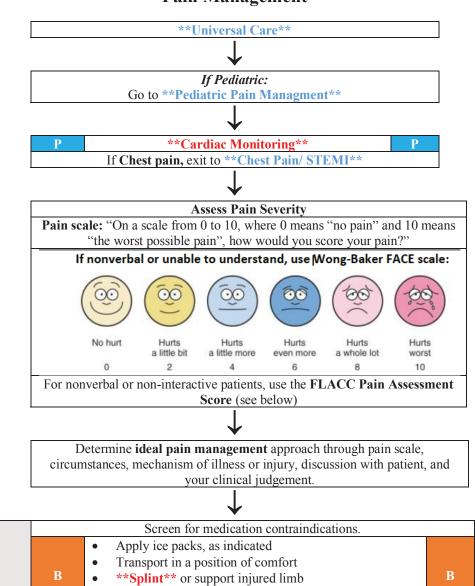
Section 7: Reporting:

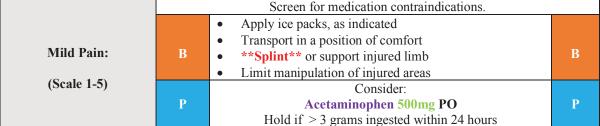
We are happy to comply with reporting as required by contract and in the scope of duties. Either Dr. Bennett or Dr. Ulatowski will attend all meetings required by the County and will be prepared to give a report if asked. They will also submit a semi-annual medical director report to update the board on their activities.

Section 8: Residency Requirement:

Both Dr. Bennett and Dr. Ulatowski reside in Hernando County.

Pain Management







Consider Fentanyl megkg IV/IO/IN/IM Max individual dose 100 meg Approved alternate dosing: Small 50 meg IV/IO/IN/IM Large: 100 meg IV/IO/IN/IM Provided			Screen for medication contraindications	
P For reversal of over-sedation with Fentanyl: Naloxone (Narcan) 0.4-2mg IV/IO/IN Repeat PRN until improved.	Pain:	P	Fentanyl 1 mcg/kg IV/IO/IN/IM Max individual dose 100 mcg Approved alternate dosing: Small: 50 mcg IV/IO/IN/IM Medium: 75 mcg IV/IO/IN/IM Large: 100 mcg IV/IO/IN/IM May repeat 25-50 mcg IV/IO/IN/IM PRN every 10 minutes for 2 additional doses Max 3 total doses Max 3 total doses Hold if SBP < 90 mmHg or somnolence Monitor and reassess every 5 minutes, including continuous SPO2 Consider **ETCO2** (ETCO2 > 45 suggest over-sedation) May treat nausea or vomiting with: Zofran (Ondansetron) 4mg IV/IO/SL (FIRST LINE) May repeat x1 Or	P
P Naloxone (Narcan) 0.4- 2mg IV/IO/IN Repeat PRN until improved.				
P Naloxone (Narcan) 0.4- 2mg IV/IO/IN Repeat PRN until improved.			\downarrow	
Ketamine: (For intractable pain) Patient is still in intractable pain after following this algorithm, Ketamine can be considered. YOU MUST HAVE KETAMINE PRIVLEDGES from Medical Direction prior to using this protocol. Dosing: Ketamine 0.1-0.3 mg/kg IV/IM Max Dose: 15 mg	Reversal:	P	Naloxone (Narcan) 0.4- 2mg IV/IO/IN	P
Ketamine: (For intractable pain) Patient is still in intractable pain after following this algorithm, Ketamine can be considered. YOU MUST HAVE KETAMINE PRIVLEDGES from Medical Direction prior to using this protocol. Dosing: Ketamine 0.1-0.3 mg/kg IV/IM Max Dose: 15 mg			\	
Retamine: (For intractable pain) (For intractable pain pain to using this protocol. (For intractable pain pain to using this protocol. (For intractable pain pain to using this pain pain pain pain pain pain pain pain				
Ketamine: (For intractable pain) (For intractable pa				
P P				
(For intractable pain) Ketamine 0.1-0.3 mg/kg IV/IM Max Dose: 15 mg Conditions often warranting treatment with Ketamine: Isolated extremity injury (Suspected fractures, dislocations) Large lacerations (>3 cm), road rash (>10cm), and animal bites with significant tissue damage 2nd or 3rd degree burns without airway, breathing, and circulatory compromise Severe Trauma Alert patients—significant bodily injury Contraindications: Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) Somnolence or respiratory depression Do NOT mistake this protocol with Excited Delirium** The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient	Ketamine:			
Conditions often warranting treatment with Ketamine: Isolated extremity injury (Suspected fractures, dislocations) Large lacerations (>3 cm), road rash (>10cm), and animal bites with significant tissue damage 2 nd or 3 rd degree burns without airway, breathing, and circulatory compromise Severe Trauma Alert patients—significant bodily injury Contraindications: Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) Somnolence or respiratory depression Do NOT mistake this protocol with **Excited Delirium**, The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient	(For intractable pain)	P	Ketamine 0.1-0.3 mg/kg IV/IM	P
 Isolated extremity injury (Suspected fractures, dislocations) Large lacerations (>3 cm), road rash (>10cm), and animal bites with significant tissue damage 2nd or 3rd degree burns without airway, breathing, and circulatory compromise Severe Trauma Alert patients—significant bodily injury Contraindications: Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) Somnolence or respiratory depression Do NOT mistake this protocol with **Excited Delirium**. The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient 				
 2nd or 3rd degree burns without airway, breathing, and circulatory compromise Severe Trauma Alert patients—significant bodily injury Contraindications: Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) Somnolence or respiratory depression Do NOT mistake this protocol with **Excited Delirium**. The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient 			dislocations) • Large lacerations (>3 cm), road rash (>10cm), and	
 Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) Somnolence or respiratory depression Do NOT mistake this protocol with **Excited Delirium**. The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient 			 2nd or 3rd degree burns <u>without</u> airway, breathing, and circulatory compromise Severe Trauma Alert patients—significant bodily injury 	
Do NOT mistake this protocol with **Excited Delirium**. The Ketamine dosages are different. Any paramedic who administers Ketamine for treatment MUST notify their District Chief immediately after patient			 Age > 70 and age < 16 cannot receive CHF or hypertensive emergency (SBP > 200) 	
MUST notify their District Chief <u>immediately</u> after patient			Do NOT mistake this protocol with **Excited Delirium**.	
			MUST notify their District Chief immediately after patient	

MD

FLACC Pain Assessment Score						
Parameter	0 Points	1 Point	2 Points			
Face	No expression	Occasional grimace	Frequent to constant quivering chin			
Legs	Normal position or relaxed	Uneasy, restless, tense	Kicking or legs drawn up			
Activity	Lying quiet	Squirming, shifting back and forth, tense	Arched, rigid, or jerking			
Cry	No cry	Moans or whimpering	Crying steadily			
Consolability	Content, relaxed	Reassuring, hugging	Difficult to console			
Sco	Score: 0 (no pain); 1-3 (mild pain); 4-7 (moderate pain); 8-10 (severe pain)					

Expanded Care Details

Do NOT administer opioids for:

- Non-traumatic headache
- Non-traumatic neck pain
- Chronic pain

Options for determining pain level (0-10):

- Verbal, able to understand—Numeric pain scale
- Interactive, not unable to understand numeric scale—Wong-Baker FACES Scale
- Nonverbal, unable to participate—FLACC Pain assessment Score

Approved alternative adult dosing

- Small adults—approximately 60 Kilograms
- **Medium** adults—approximately 80 kilograms
- Large adults—approximately 100 kilograms

Opioid doses described are high end of possible dosing:

- Consider giving <u>less</u> than this maximal dose
- Patients may demonstrate a wide variation in response to opioids
- Smaller than expected doses may cause respiratory depression if the patient is elderly, opioid naïve, somnolent, dehydrated, or has co-ingestions like alcohol

Contraindications to opioids include hypotension, altered mental status, or respiratory distress

Opioids may be administered as a first-line agent for severe pain (6-10 on pain scale)

Conditions often warranting treatment with opioid medications:

- Isolated extremity injury (suspected fractures, dislocations)
- Large lacerations (>3 cm), road rash (>10cm), and animal bites with significant tissue damage
- 2nd or 3rd degree burns without airway, breathing, and circulatory compromise
- Sickle cell disease with pain that is typical for the patient's pain crisis
- Acute back pain, or spasm in patients without a history of chronic back pain
- Severe abdominal pain
- Flank pain concerning for kidney stone

In place of the Fentanyl dosing in this protocol, may substitute (in case of Fentanyl shortage)

- Morphine 0.75 mg/kg IV/IO/IM
- Approved alternate dosing:
 - o **Small**: 4 mg IV/IO/IM
 - **Medium:** 6 mg IV/IO/IM
 - o **Large:** 8 mg IV/IO/IM
- May repeat 50% of original dose IV/IO/IM PRN every 10 mins for 2 additional doses. Max 3 total doses
- Hold for SBP < 90 mmHg or somnolence

Ketamine: YOU MUST BE CLEARED BY MEDICAL DIRECTION PRIOR TO ADMINISTERING. YOU MUST HAVE KETAMINE PRIVLEDGES

Conditions often warranting treatment with Ketamine medication:

- Isolated extremity injury (Suspected fractures, dislocations)
- Large lacerations (>3 cm), road rash (>10cm), and animal bites with significant tissue damage
- 2nd or 3rd degree burns without airway, breathing, and circulatory compromise

• Severe Trauma Alert patients—significant bodily injury

Any paramedic who administers Ketamine for treatment **MUST** notify their District Chief <u>immediately</u> after patient hand-off **AND** notify the Medical Director by email.

Vital signs should be obtained before and after administration of any opioid or ketamine, and before patient hand off

Record pain severity (0-10) before and after pain medication delivery and at patient hand off

Monitor BP and respirations closely—opioids can cause respiratory depression or hypotension.

For patient transfers from one ED to another ED (or an inpatient floor):

• If the patient is in the pain, **request additional pain medication** from the ED staff prior to hand off to EMS and transfer onto the EMS stretcher

Excited Delirium Management

Background

Excited delirium is an exceptional state of agitation that poses a threat to patient and crew safety.

Only Paramedics who have been specifically <u>cleared by the Medical Director</u> for the use of ketamine in Excited Delirium may perform this procedure.

Mandatory Notification

Any paramedic who administers Ketamine for treatment of excited delirium MUST notify their District Chief <u>immediately</u> after patient hand-off AND notify the Medical Director by email.

Indications

For the purposes of our protocols, a patient with **Excited Delirium** is defined as:

- Violent agitation presenting an imminent threat to safety of the patient and/or EMS personnel
- And at least one of:
 - Exceptional/ abnormal pain tolerance
 - Unusual strength
 - o Tactile hyperthermia
 - o Police noncompliance
 - Lack of tiring against restraint attempts
 - o Inappropriate clothing for environmental temperature
 - Violent and paranoid behavior
 - o Rapidly fluctuating periods of calm and then delirium

Such patients must score +4 on the RASS (Richmond Agitation Sedation Scale)—see below

Contraindications

Patients ineligible for treatment with ketamine for Excited Delirium:

- Patients age > 60 or age < 16 are not eligible for treatment with ketamine for Excited Delirium.
- **RASS** score of +3 or less
- Ability to have managed by any other measures in the **Behavioral Emergencies** protocol (including verbal de-escalation, Droperidol, midazolam, Benadryl ect.)

Procedure

- Ensure scene safety (avoid an unsafe scene) and request law enforcement assistance
- Minimum 2 EMS personnel must be present. 1 must be a Transport Paramedic
- Airway equipment including king tube, BVM, and oxygen source must be readily available
- Assess the patient first:
 - o Safely approach the patient and attempt to verbally and environmentally de-escalate:
 - Speak in a low, calm voice, avoid challenging the patient, give simple instructions, use neutral and non-threatening body language, do not shine a flashlight into the patient's eyes, and dim the patient compartment.
 - o Ensure law enforcement presence and/or adequate EMS personnel
 - o If possible, assess SPO2 for hypoxia and administer oxygen if SPO2 < 94%
 - o If safely feasible, assess for injuries and measure a blood glucose level
- Attempt to resolve violent agitation per the **Behavioral Emergencies** protocol
- If unsuccessful, and violent agitation with a threat to crew and/or patient safety remains:
 - Immediately prior to ketamine administration, the patient should be restrained according to the **Restraints, Physical**
 procedure
 - Assign 1-2 responders per extremity and one person to control the head
 - BVM and advanced airway equipment must be at patient's side prior to administration of ketamine
 - Administer Ketamine 2mg/kg IM per the **Intramuscular Injections** procedure

- Approved Alternative Adult Dosing:
 - Small adult (60kg)—150 mg IM
 - Medium adult (80kg)—200 mg IM
 - Large adult (100kg)—250 mg IM
- May repeat x1 if necessary. Max individual dose 250 mg. Max total dose 500 mg
 - Ideal location is **lateral thigh** (Vastus Lateralis) > Deltoid or ventrogluteal
- If an IV or IO is already established, may substitute 1 mg/kg IV IO for IM
- Once ketamine has been administered, the goal is to safely protect the patient from harm, return to de-escalation efforts, and perform the **Restraints, Physical** procedure
- Once the patient's agitation is no longer a danger to the crew, immediately preform Pulse oximetry and cardiac monitoring and place and IV. Consider continuous waveform **ETCO2**
- Monitor closely for respiratory arrest!
 - The patient must be under constant observation by the paramedic (at all times)
 - o Airway management equipment including BVM, and king tube should be ready
- Patients with Excited Delirium often have severe acidosis and are at high risk of cardiac arrest:
 - o Administer Normal Saline 20 ml/kg IV/IO
 - Consider Sodium Bicarb 50 mEq IV/IO
 - o Check **BGL** and treat per **Hypoglycemia** protocol as indicated
 - o Remove unneccesary blankets and help prevent hyperthermia
- Treat other emergencies as they arise

Emergency Department Notification

- Notify the emergency department of the patient's condition early in radio report
- Remind the receiving ED team on arrival that:
 - o The patient received Ketamine for Excited Delirium—not airway management
 - o Ketamine often results in **unresponsive** patients with eyes open (or nystagmus)
 - o The patient generally maintains spontaneous breathing while under Ketamine
 - O As such, the patient does <u>not</u> automatically need advanced airway management
 - o The patient will likely require physical restraints and additional sedation

Mandatory Reporting

- <u>ALL</u> cases of Excited Delirium requiring Ketamine need prompt QA review
- The treating Paramedic <u>must</u> notify their **District Chief** immediately after patient hand-off
- The treating Paramedic <u>must</u> notify the **Medical Director** and **Associate Medical Director** by email of the incident the same day as the incident (roderick.bennett@southeastemergency.com and chanteil.ulatowski@southeastemergency.com)
- Failure to perform both steps risks de-credentialing of Ketamine privileges

Richmond Agitation Sedation Scale (RASS)			
RASS Score	Description		
+4	Combative and violent with danger to crew		
+3	Aggressive, pulls or removes IV		
+2	Frequent non-purposeful movements or distress		
+1	Anxious, apprehensive, but not aggressive		
0	Alert and calm		

Hernando County Fire Rescue Quarterly Medical Director's Report – Q1 2024

THIS WOULD BE THE SUMMARY PAGE OF THE REPORT. THE DETAIL OF EACH SECTION WOULD BE INCLUDED

Meetings attended

1/2/24 – Meeting with CEO and ED Medical Director of Citrus Memorial

Discussed overutilization of red transport

Reviewed protocols for utilizing air medical services for trauma patients.

2/12/24 – Meeting with County Commissioners

Discussed preliminary budget for 2025

3/8/24 – Meeting with Bay News 9

Discussed plans for media coverage of upcoming MCI drill.

Protocols reviewed

Soft restraints – No change

Narcan administration - Intranasal Narcan added

Protocols set for review this quarter

Limb amputation

Asthma

Ride Time Log

1/5/24 – Ulatowski 12 hours, Supervisor Truck

2/10/24 - Bennett 12 hours, Rescue 10

2/15/24 – Ulatowski 12 hours, Rescue 7

3/2/24 – Bennett 12 hours, Supervisor Truck

QA audits performed

Documentation – 98% documentation of on scene time is close to goal of 100%. 90% Documentation of refusal of care requires immediate attention. Goal is 100%.

Aspirin for Chest Pain > 30 y.o. – 95% compliance. Goal 100%

QA audits set for this quarter

Spinal Immobilization

Scene Safety

Medication and Technology Reviews

Tested EKG transmission capabilities of new monitors, but cellular coverage is not sufficient in all areas of the county.

Disciplinary Actions

Medic 23 must be proctored by another medic for his next 10 external jugular IV placements.

Medic 45 has successfully completed CME course on medical documentation

Funding opportunities

Homeland security is providing grants for school based active shooter training and drills.

I-Gel Airway

Background:

I-Gel is a supraglottic device with a thermoplastic cuff that uses the patient's body heat to form a seal around the airway. They have been proven to be safe and as effective in airway management as endotracheal intubation and can be left in place for many hours. The I-Gel is sized from 1-5, based on ideal body weight.

Indications:

- Cardiac arrest
- Respiratory failure
- Airway protection for patients with decreased mental status (e.g. trauma patients with GCS ≤)

Equipment:

- I-Gel device
- Lubricant
- Tube securing device
- End tidal CO2 in-line device
- Optional equipment:
 - Sedative or paralytic
 - o 12F Nasogastric tube

Size	Color	Patient	Weight (Ideal)
1	Pink	Newborn	2 - 5 kg
1.5	Blue	Infant	5 - 12 kg
2	Grey	Small Pedi	10 - 25 kg
2.5	White	Large Pedi	25 - 35 kg
3	Yellow	Small Adult	30 - 60 kg
4	Green	Medium Adult	50 - 90 kg
5	Orange	Large Adult	90+ kg

Procedure:

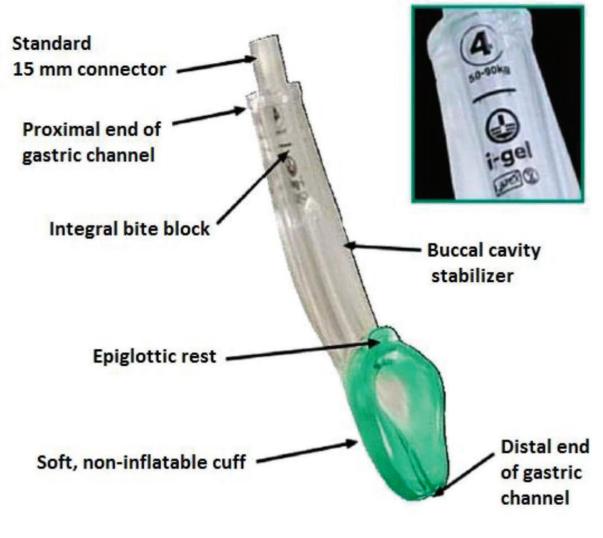
- Determine the need for advanced airway management
- Select the appropriate size tube based on ideal body weight
- Place a small amount of lubricant on the smooth side and the sides of the I-Gel
 - o Do not apply lubricant to the cuff side of the device
- With the patient in proper airway alignment (sniffing position), open the patient's airway
- · With the opening of the cuff facing the patient's chin, insert the device into the patient mouth downwards along the hard palate
- Use continuous pressure to insert the I-Gel until a definitive resistance is felt
- You may feel an initial stopping point as the device hits the posterior or pharynx
 - o Push past this initial resistance
- Ensure the I-Gel is fully inserted (adult I-Gel devices have a mark at the level of the teeth)
- Secure the device and attach **ETCO2** capnography
- If needed, lubricate and insert the nasogastric tube into the gastric channel

Troubleshooting:

- The bite guard line should line up with the patient's teeth. If it doesn't and the seal is inadequate, consider increasing or decreasing the size based on the patient's teeth alignment.
- The I-Gel device may have a substantial air leak for the first 30 seconds. This is normal until a seal is made.
- The I-Gel device may require up to 20 seconds to establish ETCO2. If no ETCO2 is produced after this initial period, remove the I-Gel and resume BVM ventilation.

Contraindications:

• Any time there is concern for airway edema or swelling: epiglottis, burns, anaphylaxis etc.





17.4. TAB 4. Cost Proposal

SOS Care Solutions proposes to provide the services listed in this proposal for an annual cost of \$69,950.

17.5. TAB 5 - Location and Availability

The primary work locations for Dr. Bennett and Ulatowski are as below. They split time among these four facilities. Working in these emergency departments gives them frequent opportunities to observe HCFR paramedic and EMT job performance as they frequently transport patients to these hospitals. Living and working in Hernando County also facilitates the ability of these two physicians to attend meetings.

Bravera Health Brooksville - 17240 Cortez Blvd, Brooksville, FL 34601

Bravera Health Spring Hill - 10461 Quality Dr, Spring Hill, FL 34609

Bravera Health Seven Rivers - 6201 N Suncoast Blvd, Crystal River, FL 34428

Bravera Health Citrus Hills – 907 W Norvell Bryant Hwy, Hernando, FL 34442

PEDIATRIC ADVANCED LIFE SUPPORT







Chanteil Ulatowski

has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Pediatric Advanced Life Support (PALS) Instructor Program.

Issue Date

3/1/2022

Training Center Alignment

County of Lake d/b/a Lake Emergency Medical Services

Training Center ID

FL15042

Training Center City, State

Tavares, FL

Training Center Phone Number

(352) 742-3930

Renew By

03/2024

Instructor ID

02221031371

eCard Code

228953152829

To view or verify authenticity, instructors and employers should go to www.heart.org/cpr/mycards.

© 2020 American Heart Association. All rights reserved. 20-3013 10/20

DEA REGISTRAT NUMBER	ION THIS REGISTRATION EXPIRES	FEE PAID		
FU9947803	05-31-2026	\$888		
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE		
2,2N,3, 3N,4,5	PRACTITIONER	04-13-2023		
ULATOWSKI, CHANTEIL 6201 N SUNCOAST BLVD CRYSTAL RIVER, FL 34428				

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE

UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION pepartment WASHINGTON D.C. 20537

DEA REGISTRA NUMBER	TION THIS REGISTRATION EXPIRES	FEE PAID		
FU9947803	05-31-2026	\$888		
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE		
2,2N,3, 3N,4,5	PRACTITIONER	04-13-2023		

ULATOWSKI, CHANTEIL 6201 N SUNCOAST BLVD CRYSTAL RIVER, FL 34428

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)

DEA REGISTRA NUMBER	TION THIS REGISTRATION EXPIRES	FEE PAID		
FU9947803	05-31-2026	\$888		
	13.3			
SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE		
2,2N,3, 3N,4,5	PRACTITIONER	04-13-2023		
ULATOWSKI, CHANTEIL 6201 N SUNCOAST BLVD CRYSTAL RIVER, FL 34428				

CONTROLLED SUBSTANCE/REGULATED CHEMICAL REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223/511 (9/2016) REPORT **CHANGES** PROMPTLY

REQUESTING MODIFICATIONS TO YOUR REGISTRATION CERTIFICATE

To request a change to your registered name, address, the drug schedule or the drug codes you handle, please

- 1. visit our web site at deadiversion.usdoj.gov or
- 2. call our customer Service Center at 1-(800) 882-9539 or

 submit your change(s) in writing to:
 Drug Enforcement Administration P.O. Box 2639 Springfield, VA 22152-2639

See Title 21 Code of Federal Regulations, Section 1301.51 for complete instructions.

You have been registered to handle the following chemical/drug codes:

ADVANCED CARDIOVASCULAR LIFE SUPPORT

ACLS Instructor



has successfully completed the cognitive and skills evaluations in accordance with the curriculum of the American Heart Association Advanced Cardiovascular Life Support (ACLS) Instructor Program.

Issue Date Renew By

Training Center Alignment Instructor ID

Training Center ID eCard Code

Training Center City, State

Training Center Phone Number

To view or verify authenticity, instructors and employers should go to www.heart.org/cpr/mycards.

© 2020 American Heart Association. All rights reserved. 20-3015 10/20

ADV11319484

DEPARTMENT OF HEALTH DOVISION OF MEDICAL QUALITY ASSURANCE

907	ACTIVIC NO.	governor reco
110,000.00	DE HOUR	HITH

the section books

HONOR BY CHARLEST AND PRODUCED AND IN THE CASE OF THE PRODUCED AND PRODUCED AND PARTY OF THE PROPERTY OF THE P

Explanation Claim (AMELIARY DE MEDI STANDARDE, SATINGON (ALARYMEN) BYES RESIDENCE (ARREST SALDRESS, SOME?

glade



No Debets povereum

DESCRIPTION OF PROGRESS OF VALUE

COTTON/TOW/DATE: JANUARY IN MAR

The Bronce hyeles is NB. WRITE Phonocols if the presentative with pur boundaries of Such bronce is soldy reproduct to building. An Depotement withing of the Bronce's control stating admire and predict control of process as in manufacture. It has given to be explained the property of the Bronce, given stating and predictions are an incident to be explained to be predicted as a feet of the property of the Bronce, given stating and the property of the property

The blinked clausity describes between these between Ported grows you thin altern to manage your become in purious unbiness specials, have of graphs, propored it appropriately believes and months are:

If it simple. Log-with your hilly finished for more account study and displacements and . Swind the "Account" paper for the telescope your account. For interpret in parameters and index or to respect displaced for more your selection from the displaced for the account for interpret in your paper for interpret. Then professions will be prove the connection of the province of the p

INTO DELANCE ANNOUNCED BY

ARE TOURS INDICATE RESIDEN

The Republicani of Health ordinant screws year (community) of antice duction or the fact, of Republicani

To board more, please and party "O' board from a ground with March 44 (S. F. Services Printer)

Fig. specifies facility will the frequency for flacts/than found to flactory. PROFESSY, Protein, Placeton, and to the position section despositions of will your est-demond. Placeton Statute view for accretical of manifest one of configuration.



College of Medicine and Affiliated Hospitals

awards this certificate to

Chanteil Ulatowski, MD

for completion of training in Emergency Medicine

from 7/1/2018 to 6/30/2021

Dean, College of Medicine

ENeguriment Chair

Program Director

AMERICAN BOARD OF EMERGENCY MEDICINE

Chanteil Deshon Ulatowski, M.D.

is certified in the specialty of

EMERGENCY MEDICINE

As of June 22, 2022

Expires: December 31, 2027

Status: Active







The ABEM mission is to ensure the highest standards in the specialty of Emergency Medicine.



College of Medicine and Affiliated Hospitals

awards this certificate to

Chanteil Deshon Ulatowski, MD

for completion of training in our Emergency Medicine EMS Fellowship

from July 1, 2021 to June 30, 2022

Dean, College of Medicine

Department Chair

Program Director

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
3B9820920	07-31-2024	\$888
SCHEDULES /	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, BN,4,5	PRACTITIONER	07-22-2021
BENNETT, RODE 8876 W COUNTR ECANTO, FL 3	Y HILL DR	

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE UNITED STATES DEPARTMENT OF JUSTICE DRUG ENFORCEMENT ADMINISTRATION WASHINGTON D.C. 20537

RATION THIS REGISTRATION EXPIRES	FEE PAID
0 07-31-2024	\$888
BUSINESS ACTIVITY	ISSUE DATE
PRACTITIONER	07-22-202
	= =

BENNETT, RODERICK 3876 W COUNTRY HILL DR LECANTO, FL 344619830

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)

ABMS® Board Certification Credentials Profile

A service provided by the American Board of Medical Specialties

New Search | Search Results | Email For Feedback | Save Physician | Print Profile

To become Board Certified, a physician must achieve expertise in a medical specialty or subspecialty that meets the profession-driven standards and requirements of one (or more) of the 24 ABMS certifying boards. To maintain Board Certification, the certifying boards may require physicians, depending on their date of initial certification, to participate in on-going programs of continuing learning and assessment (Maintenance of Certification) designed to help them remain current in an increasingly complex practice environment.

Roderick N. Bennett (ABMSUID - 868394)

Viewed: 1/6/2022 1:17:08 PM UTC

DOB:

Private

Education:

2003 MD (Doctor of Medicine)

Address:

Daytona Beach Shores, FL 32118-6365 (United States)

Individual NPI 1: 1629166137

Show Active Medical License(s) 2:



American Board of Medical Specialties

Board Certification(s):

Higher standards. Better care.



American Board of Emergency Medicine

Emergency Medicine - General

Status: Certified

Status Active Expired

Duration Time-Limited

Time-Limited

Occurrence Recertification

Start Date - End Date

01/01/2019 - 12/31/2028 Initial Certification 11/13/2008 - 12/31/2018

Participating in MOC

Learn more about Emergency Nedicine MOC program

- ¹ NPI: Not for Primary Source Verification (PSV).
- ² State of Licensure provided by Federation of State Medical Boards (FSMB): Not for Primary Source Verification (PSV).



Product names and logos are all marks of the American Board of Medical Specialties.

Notice: It is up to the user to determine if the physician record obtained from this service is that of the physician being sought.

With the exception of our Nedical Specialists Online (MSO) product, all information as presented by ABMS Solutions products are approved for business use and are considered Primary Source Verified (PSV) and meet the primary source verification requirements as set by The Joint Commission, NCQA, URAC and other key accrediting agencies.

The ABMS physician specialty certification data provided by ABMS Solutions/CertiFACTS Online is proprietary and copyrighted by the American Board of Medical Specialties (ABMS®) and subject to the intellectual property laws of the United States.

© 2022, ABMS Solutions, LLC, All Rights Reserved.



American Medical Resource Institute ®

2-B Online Program Administration 715 Ela Road Lake Zurich, IL 60047-6300 (847) 847-3280

Roderick Bennett

999 Fort Pickens Road #309 Pensacola Beach, FL 32561

Congratulations. This document verifies your successful completion of the Advanced Cardiac Life Support (ACLS) online examination on 03/03/2022. The certification examination is based on the most recent publications of the American Heart Association (AHA), the American Academy of Pediatrics (AAP), and the National Board of Emergency Care Certifications (NBECC). Your ACLS provider certification card will be mailed to you shortly. Until you receive your card, this document may be used as a temporary card. Your temporary card number is: **BENNE1373880715309**.

Advanced Cardiac Life Support National Provider Certification



1373880715309

Roderick Bennett

Has successfully completed the national Advanced Cardiac Life Support certification examination and clinical skills evaluation in accordance with the most recent published clinical American Heart Association Guidelines for CPR & Emergency Cardiovascular Care; and is hereby granted provider certification by the National Board of Emergency Care Certification for a period of twenty-four months from the date of issuance.

Issue Date 03/03/2022

Expiration Date 03/2024

Page 1 of 2



American Medical Resource Institute ®

2-B Online Program Administration 715 Ela Road Lake Zurich, IL 60047-6300 (847) 847-3280

National Board of Emergency Care Certifications Washington, D.C. 20005



DO NOT ACCEPT THIS DOCUMENT IF IS UNSIGNED OR ALTERED IN ANY WAY.

To verify provider status, email the request including the name and certification number appearing on the front side of this card to: info@nbecc.org

© 2010 National Board of Emergency Care Certifications

If you or your organization have any questions please contact us at administration@amrieducation.org or call (847)847-3280 and ask for the Online Department.

Thank You,

American Medical Resource Institute ®

www.aclsonline.us

5/13/23, 1:31 PM Who is ABEM certified



American Board of Emergency Medicine

The name and information provided below indicates only those certificates awarded by ABEM as of May 13, 2023. All certification information is drawn directly from our certification database and is updated quarterly.

Bennett, Roderick N. Las Vegas, NV

Specialized In		Certification Dates	Meeting the Requirements of MOC
Emergency Medicine	37997	1/1/2019-12/31/2028	Yes



Department of Health

License Verification

RODERICK NEAL BENNETT

A Printer Friendly Version

License Number: ME98577

Data As Of 5/13/2023

License Secondary Discipline/Admin Subordinate Practitioner Information Locations Action Practitioners Profile

Profession Medical Doctor

License ME98577

2 License Status CLEAR/ACTIVE

License Expiration Date 1/31/2025

License Original Issue 05/03/2007

Date

Address of Record 10461 Quality Drive

SPRING HILL, FL 34609

Controlled Substance No

Prescriber (for the

Treatment of Chronic Non-

malignant Pain)

Discipline on File No

Public Complaint No

Back

For instructions on how to request a license certification of your Florida license to be sent to another state from the Florida Department of Health, please visit the License Certifications web page.





American Medical Resource Institute ®

2-B Online Program Administration 715 Ela Road Lake Zurich, IL 60047-6300 (847) 847-3280

Roderick Bennett

999 Fort Pickens Road #309 Pensacola Beach, FL 32561

Congratulations. This document verifies your successful completion of the Pediatric Advanced Life Support (PALS) online examination on 11/03/2022. The certification examination is based on the most recent publications of the American Heart Association (AHA), the American Academy of Pediatrics (AAP), and the National Board of Emergency Care Certifications (NBECC). Your PALS provider certification card will be mailed to you shortly. Until you receive your card, this document may be used as a temporary card. Your temporary card number is: **BENNE1373880722008**.

Pediatric Advanced Life Support Provider Certification



1373880722008

Roderick Bennett

Has successfully completed the national Pediatric Advanced Life Support certification examination and clinical skills evaluation in accordance with the most recent published clinical recommendations of the American Heart Association and the American Academy of Pediatrics; and is hereby granted provider certification by the National Board of Emergency Care Certifications for a period of twenty-four months from the date of issuance

Issue Date 11/03/2022

Expiration Date 11/2024



American Medical Resource Institute ®

2-B Online Program Administration 715 Ela Road Lake Zurich, IL 60047-6300 (847) 847-3280

National Board of Emergency Care Certifications



DO NOT ACCEPT THIS DOCUMENT IF IS UNSIGNED OR ALTERED IN ANY WAY.

To verify provider status, email the request including the name and certification number appearing on the front side of this card to: info@nbecc.org

© 2010 National Board of Emergency Care Certifications

If you or your organization have any questions please contact us at administration@amrieducation.org or call (847)847-3280 and ask for the Online Department.

Thank You,

American Medical Resource Institute ®

www.aclsonline.us

Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for Instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

179	1 Name (as shown on your income tax return). Name is required on this line	; do not leave this line blank	C.			7.11			
	SOS Care Solutions LLC								
Print or type. Specific Instructions on page 3.	2 Business name/disregarded entity name, if different from above				1 area				71.
						4 Exemptions (codes apply only to certain entities, not individuals; see			
	Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC				instructions on page 3): Exempt payee code (if any)				
E S	Limited liability company. Enter the tax classification (C=C corporation	S=S corporation, P=Partne	ershin)		1	,,,,,,	,		
Print or type. fic Instructions	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.					Exemption from FATCA reporting code (if any)			
9	☐ Other (see instructions) ▶				(Applie.	s to accour	ts maintair	ed outsid	e the U.S.)
S	5 Address (number, street, and apt. or suite no.) See instructions.		Requeste	r's name	and ad	dress (o	ptional)	I.	
See	7830 Gunn Highway								
	6 City, state, and ZIP code								
	Tampa, FL 33626							6.74	
	7 List account number(s) here (optional)								
Par	Towns I down to a 10 March 19			110	15.K				
	1 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			Capiel es		umber			
backu	your TIN in the appropriate box. The TIN provided must match the no withholding. For individuals, this is generally your social security n	iame given on line 1 to a number (SSN). However	for a	Social sec		Tumber	7 [$\overline{}$	П
reside	nt alien, sole proprietor, or disregarded entity, see the instructions for	or Part I. later. For other			-		1-1		
TIN, la	s, it is your employer identification number (EIN). If you do not have	a number, see How to g			_	100 10	J L		
	If the account is in more than one name, see the instructions for line	1 Also see What Name	o and []	Employer	identif	fication	numbe	r	
Numb	er To Give the Requester for guidelines on whose number to enter.	e 1. Also see virial ivallie	and L		1 2		TI	T	T
				9 2	- 1	2 4	9	7 4	1
Par	Il Certification	5.72 Y 2.4 K(2.4)	72700	2011		207-1		Se tr'	
Under	penalties of perjury, I certify that:		JAN AND ST	4137	0.05	74.15	11-11		rjat Fiz
2. I an Ser	number shown on this form is my correct taxpayer identification nun not subject to backup withholding because: (a) I am exempt from byice (IRS) that I am subject to backup withholding as a result of a fail onger subject to backup withholding; and	packup withholding, or (b) I have no	t been n	otified	by the	Intern	al Rev I me tl	enue hat I am
	a U.S. citizen or other U.S. person (defined below); and								
	FATCA code(s) entered on this form (if any) indicating that I am exe	mpt from FATCA reporti	na is corre	et.					
Certifi you ha acquis	cation instructions. You must cross out item 2 above if you have been ve failed to report all interest and dividends on your tax return. For real ition or abandonment of secured property, cancellation of debt, contribution interest and dividends, you are not required to sign the certification	notified by the IRS that y estate transactions, item utions to an individual reti	ou are curre 2 does not rement arra	ently subj apply. Fo ingement	r mort (IRA),	gage in and ge	terest p	oaid, , paym	ents
Sign Here	Signature of U.S. person ▶		Date ►	11/6	1/2	02	3		
	neral Instructions	• Form 1099-DIV (d funds)	lividends, i	ncluding	those	from s	tocks o	or mut	ual
Section references are to the Internal Revenue ode unless otherwise noted. Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.		 Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) 							
		 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) 							
		 Form 1099-S (proceeds from real estate transactions) 							
	oose of Form	 Form 1099-K (merchant card and third party network transactions) 				ons)			
inform	ividual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	 Form 1098 (home 1098-T (tuition) 			, 1098	-E (stu	ol tneb	an inte	erest),
identif	cation number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	• Form 1099-C (car							
taxnav	er identification number (ATIN), or employer identification number	 Form 1099-A (acquisition or abandonment of secured property) 							
(EIN), 1	o report on an information return the amount paid to you, or other	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.							

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)