**Section 515.945 Aircraft Vehicle Specifications and Operation**

a) Air ambulance operators shall possess a valid Federal Aviation Administration Certificate under 14 CFR 135 and comply with 14 CFR 119 (submit copy with application).

b) Air ambulance providers shall also comply with 92 Ill. Adm. Code 14 (submit copy of Certificate of Registration with application).

c) Air ambulance operators may be additionally accredited by the Commission on Accreditation of Medical Transportation Systems (CAMTS) (submit copy with application). Providers that lose their CAMTS accreditation shall notify the Department within five (5) business days after notification from CAMTS.

d) All vehicles shall have communication equipment to permit both internal crew and air-to-ground exchange of information between individuals and agencies, including at least those involved in SEMSV Medical Direction within the EMS System, the flight operations center, air traffic control and law enforcement agencies. Helicopters must be able to communicate with law enforcement agencies, EMS providers, fire agencies, and referring and receiving facilities.

e) Rotor wing vehicles shall be equipped with a Medical Emergency Radio Communications for Illinois (MERCI) radio.

f) All vehicles shall be designed to allow the loading and unloading of the patient without rotating the patient more than 30 degrees along the longitudinal axis or 45 degrees along the lateral axis.

g) All vehicles shall be climate controlled to prevent temperature extremes that would adversely affect patient care and promote medication and equipment integrity.

h) All vehicles shall have interior lighting to permit patient care to be given and patient status to be monitored without interfering with the pilot's vision.

i) All patients shall be restrained to the helicopter or fixed-wing aircraft litter to assure the safety of the patient and crew.

j) For helicopter programs:

1) Each vehicle shall be staffed with at least one EMS pilot and at least one aeromedical crew member for BLS missions. There shall be two aeromedical crew members for ALS and CCT, one of whom shall be an RN or licensed physician.

2) Each vehicle shall be equipped with flight reference instruments to allow recovery from inadvertent Instrument Flight Rules (IFR) situations.

3) The cockpit shall be isolated by a protective barrier to minimize in-flight distraction or interference.

4) All equipment, litters/stretchers and seating shall be secured or restrained and arranged so as not to block rapid egress by personnel or patient from the aircraft and shall be affixed or secured in racks or compartments approved by the Federal Aviation Administration (14 CFR 135) or by straps.

5) Care providers must be able to access and maintain a patient's airway while seated to minimize the need to become unrestrained.

6) The vehicle must have an onboard oxygen system and a portable back-up oxygen source.

7) At least one oxygen outlet will be a 50 psi source.

8) There will be a minimum of two oxygen outlets and two suction/vacuum pumps.

k) For fixed-wing aircraft programs:

1) All single engine fixed-wing aircraft shall be powered by a turbine engine. There shall be at least one dedicated fixed-wing aircraft.

2) Each vehicle shall be staffed with at least one EMS pilot and at least one aeromedical crew member for BLS missions. There shall be two aeromedical crew members for ALS and CCT.

3) The aircraft shall be IFR equipped and certified.

4) All equipment, litters/stretchers and seating shall be arranged so as not to block rapid egress by personnel or patient from the aircraft and shall be affixed or secured in approved racks or compartments or by strap restraint.

(Source: Amended at 48 Ill. Reg. 16159, effective November 1, 2024)