



Dear Potential CALS Hospital:

We are proud to announce the CALS Hospital Program. The CALS Hospital Program was developed to honor rural hospitals and their communities for their commitment to quality rural emergency medical care. Enclosed, you will find information on the CALS Hospital Program and how your hospital can earn the CALS Hospital designation.

Benefits of becoming a CALS Hospital:

- Heightened community awareness of your hospital's dedication to delivering exceptional emergency services, supported by official certification
- Amplified visibility at both the state and regional levels
- Public recognition of your providers, nurses, and other clinical staff for their commendable achievement in completing a CALS training program
- Future educational initiatives designed to empower rural hospitals and their personnel
- Association with a community of like-minded institutions, fostering collaboration and inspiration for excellence in rural emergency care
- Designation serves as a beacon for attracting and retaining the exceptional clinical staff
- Depending on your state, CALS Hospital certification may also fulfill criteria for designation as a level III or IV trauma center (consultation with your state trauma system requirements is advisable).

Your hospital may already qualify for the CALS Hospital Designation if it meets the equipment and training requirements. The equipment must be stocked, maintained, and available for use by the Emergency Care Team (see enclosed list). The minimum requirement of the training component requires that 2/3 of provider and clinical staff combined have successfully completed the CALS Trauma & Provider Course.

I invite you to review the enclosed application materials and your own records to determine if your hospital meets the criteria for CALS Hospital designation. If you have any questions or concerns, please feel free to contact us.

Sincerely,

Ann Gihl, MA, RN  
CALs Executive Director  
2600 Fernbrook Ln N,  
Ste 104  
Plymouth, MN 55447

## Administrative Statement of Purpose for CALS Hospital

The Comprehensive Advanced Life Support (CAL S) Program is a national program dedicated to enhancing rural emergency medical care.

The CAL S educational program includes the following components: a two-day in-person course (CAL S Trauma & Provider Course) for hospital staff and providers, pre-course online self-study modules, and extensive print and electronic resources.

The CAL S Hospital designation represents an institutional commitment to quality rural emergency medical care. This includes:

- CAL S Training for hospital staff and providers
- Provision of medical equipment required for effective emergency care
- Leadership in providing excellent emergency care
- Collaboration with other programs, institutions, and individuals in support of rural emergency medical care

Upon achievement of CAL S Hospital designation, the applicant hospital shall join other organizations of the CAL S Hospital Consortium, reflecting leadership in rural emergency medical care.



## Application Process for CALS Hospital Designation

1. The administration and Board of the applicant hospital must support participation in the CALS Hospital program, including:
  - CALS Training for hospital staff and providers
  - Provision of appropriate equipment
  - Interaction with components of the rural emergency medical care system (i.e., state trauma system, EMS, referral centers, public safety)
  - Participation in the assessment of CALS training through questionnaires, surveys, and outcome results.
2. The applicant hospital must verify achievement of training criteria (see CALS Training Criteria). The applicant hospital must also attest to possession and availability of standard emergency equipment (see Equipment Requirements for CALS Hospitals).
3. Complete the application and send it to the CALS office with the fee payment. The application will be reviewed with the CALS Executive Board of Directors at the next meeting.
4. The hospital will be notified by the CALS Hospital Coordinator of the Executive Board's Decision. The new CALS Hospital shall be presented with a certificate reflecting its achievement. The CALS Hospital Coordinator and a member of the CALS Board shall present the award.
5. The initial CALS Hospital designation shall have an expiration date of 4 years from the date of certification; recertification shall be dependent on the fulfillment of criteria in effect at the time of re-application. The CALS Program reserves the right to modify certification criteria.
6. Upon designation as a CALS Hospital, the hospital shall become a member of the CALS Hospital Consortium, which shall be convened to address issues common to rural emergency facilities.

## Instructions for Completing Application

1. Complete the application form and return it to the following address:

CALS  
Attn: CALS Hospital Program  
2600 Fernbrook Lane N.  
Suite 104  
Plymouth, MN 55447

Alternatively, you may email the application to [info@calsprogram.org](mailto:info@calsprogram.org)

2. Enclose the \$300 application fee with your application. This helps defray the expenses related to the verification and processing of the application. If the application is denied, the hospital will be refunded \$200.
3. The hospital will be notified of application status by the CALS Hospital Coordinator within one month of receipt.



## CALS Hospital Certification Application

Name of Hospital: \_\_\_\_\_

Address of Hospital: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Hospital Administrator: \_\_\_\_\_

Name of Medical Director: \_\_\_\_\_

Name of Director of Nurses: \_\_\_\_\_

Please designate a CALS Hospital Liaison: \_\_\_\_\_

### CALS Training Criteria

Applicant Hospital must fulfill at least one requirement from column **A (providers)** and one from column **B (hospital staff)**, or must fulfill the criteria listed in section **C**. Please provide medical staff and hospital staff rosters with dates of CALS training. **Training must have been completed within 4 years of application.**

<b>A Providers</b>	<b>B Hospital Staff</b>
<input type="checkbox"/> 100% of Emergency Care Team Leaders (Physicians, PAs, NPs) have completed the CALS Trauma & Provider Course  OR	<input type="checkbox"/> 100% of RNs providing emergency care have completed the CALS Trauma & Provider Course  OR
<input type="checkbox"/> 75% of all providers on staff (Physicians, PAs, NPs) have completed the CALS Trauma & Provider Course	<input type="checkbox"/> 75% of all clinical staff (RN, LPNs, CRNAs, Paramedics) have completed the CALS Trauma & Provider Course
OR	
<b>C</b>	
<input type="checkbox"/> 66% of combined provider and clinical staff have taken the CALS Trauma & Provider Course.	



## Equipment Requirements for CALS Hospitals

Equipment for all age groups, newborn through adult, must be stocked, maintained, and available for use by the Emergency Care Team.

Airway/Breathing	Circulation	Lab/X-ray	OB/Peds	Miscellaneous
<input type="checkbox"/> Oral/Nasal Airways <input type="checkbox"/> Bag Valve Mask <input type="checkbox"/> Endotracheal intubation equipment <input type="checkbox"/> Rescue Airways <input type="checkbox"/> Large-bore suction <input type="checkbox"/> Pulse oximeter <input type="checkbox"/> End tidal CO2 detector/monitor <input type="checkbox"/> Cricothyrotomy Kit	<input type="checkbox"/> Standard IV fluids and administration sets <input type="checkbox"/> Mechanism for IV flow rate control <input type="checkbox"/> IV catheters <input type="checkbox"/> Intraosseous access device <input type="checkbox"/> Rapid infuser system (e.g., pressure bag) <input type="checkbox"/> Thermal control for patients and fluids/blood	<input type="checkbox"/> Standard analysis of blood, urine, and other body fluids <input type="checkbox"/> Coagulation studies <input type="checkbox"/> Blood typing and cross-matching <input type="checkbox"/> Radiographic capabilities (plain film and CT) in-house or 30-minute call	<input type="checkbox"/> Precipitous delivery pack <input type="checkbox"/> Umbilical catheter kit <input type="checkbox"/> Pediatric length-based resuscitation tape or similar reference <input type="checkbox"/> Size-appropriate pediatric equipment	<input type="checkbox"/> Monitor/defibrillator <input type="checkbox"/> Nasogastric/orogastric tubes <input type="checkbox"/> 1 <sup>st</sup> line resuscitation drugs <input type="checkbox"/> Urinary catheters <input type="checkbox"/> Supplies for thoracostomy (chest tube) <input type="checkbox"/> Spinal Immobilization Equipment <input type="checkbox"/> Easily accessible references for emergency algorithms, standard orders, and transfer procedures



**Attestation:**

We, as representatives of the above-named hospital, attest that the hospital meets the criteria for CALS Hospital designation. Furthermore, we support the principles and practices as outlined in the Administrative Statement of Purpose:

Hospital Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

Medical Director: \_\_\_\_\_ Date: \_\_\_\_\_

Director of Nurses: \_\_\_\_\_ Date: \_\_\_\_\_

The CALS Hospital Certification was reviewed by the National CALS Executive Board Directors on:

Date: \_\_\_\_\_

CALS Hospital Certification was:

- Granted**
- Not Granted**

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Chair, CALS Board of Directors

\_\_\_\_\_  
Executive Director, CALS

