# **EMT**

(Emergency Medical Technician)

Recertification Policy







# West Virginia Office of Emergency Medical Services Policies and Procedures

# EMT Recertification Policy and Procedures NREMT

**PURPOSE:** To establish standard requirements to be met by all applicants seeking to become recertified and authorized to practice Emergency Medical Services at the Emergency Medical Technician Level in West Virginia.

**POLICY:** To ensure consistent standards and procedures for recertifying as an Emergency Medical Technician (EMT) in West Virginia.

# PROCEDURE/REQUIREMENTS:

- **A.** EMT certifications shall expire March 31 per NREMT policy.
- B. Submit a current complete online application to WVOEMS between April 1 and December 31 of the prior year of expiration. Online application available at <a href="https://www.wvoems.org">www.wvoems.org</a>. The application deadline is 90 days prior to expiration. Example: expire March 31 must submit by December 31.
  - 1. Submit the appropriate fees as required in WV §64 CSR 48-6.9.
  - 2. Continuously meet all requirements for EMS personnel as described in WV §64 CSR 48.
  - 3. Disclose any limitation or exclusion by any EMS agency, EMS Medical Director, or any other healthcare profession certification or licensing authority in any state, territory, or the U.S. Military Services.
- C. 24 Hour Recertification Course providers must complete of all six (6) WVOEMS approved refresher class modules meeting NREMT National Continued Competency Program (NCCP) standards. These modules shall be submitted in CIS.
- **D.** Additional Continuing Education providers must complete an additional sixteen (16) hours of continuing education.
  - 1. State and Federal mandates require the following West Virginia specific education included as part of the additional CE hours:
    - Haz Mat Awareness meeting OSHA 1910.120 or higher standards annually. (3 hours awarded annually totaling 6 hours per NREMT



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recertification period.)

- b. WVOEMS BLS protocol review annually. (2 hours awarded annually totaling 4 hours per NREMT recertification period)
- c. MCI or Disaster Management related training to include mass casualty drills totaling a minimum of **2 hours** per NREMT recertification period.
- d. Successfully complete an approved CPR training/refresher course meeting WV §64 CSR 48-6.8.a.4. Applicant must show proof of a current valid certification. (4 hours awarded every 2 years)

TOPIC		HOURS
MCI or Disaster Management		2
Haz Mat Awareness X2		6
BLS Protocol Refresher X2		4
CPR		4
	TOTAL	16

- **E. On-Line Courses** On-line education may be accepted in accordance with NREMT policy.
- **F. National Registry:** EMTs recertify utilizing National Registry in the following manner:
  - a. Complete all requirements for recertification outlined by National Registry.
  - b. Proof of education shall be submitted to National Registry online in the "My Certification" dashboard.
  - c. Submit a copy of your National Registry card or equivalent to WVOEMS.
- G. Important Notice: An EMR/EMT/Paramedic certified by WVOEMS must also be continually certified by the National Registry of Emergency Medical Technicians (NREMT) or an equivalent certifying organization approved by WVOEMS, during the duration of your WVOEMS certification. Your failure to retain an uninterrupted NREMT or equivalent certification may result in the immediate suspension of your WVOEMS certification and your right to practice in West Virginia.



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# H. Lapse in Certification –

# a. Lapsed 0-30 Days:

If the EMT met all recertification requirements prior to the expiration date but did not complete the administrative functions of recertification, the National EMS certification is considered to be lapsed. If the certification has lapsed less than 30 days, the applicant can submit a late fee per NREMT policy and submit all required documentation to regain certified status.

# b. Lapsed 0-24 Months:

If the EMT did not meet all recertification requirements by the expiration date, the National EMS certification is considered to be lapsed. If the certification lapsed less than two years, or you are currently state licensed as an Emergency Medical Technician (EMT), you can regain National EMS Certification by completing the cognitive and psychomotor examinations.

- Complete a Traditional State Approved EMT Refresher
- State approved continuing education equal to the EMT Refresher
- If the EMT was licensed in a NCCP state, completion of the National Component meets the requirement

# c. Lapsed More Than 2 Years:

Entry and/or re-entry into the National Registry may be granted to a previously state licensed or Nationally Certified EMT provided you complete:

- A state approved refresher course, or the national component of the NCCP program
- A state administered practical examination
- The Cognitive Examination
- Hold current BLS CPR certification

In cases where a lapse in certification has occurred and there is no background check on file with WVOEMS, the applicant will be required to apply for and be cleared by the State and National background checks for WVOEMS as required in WV §16- 4C-8.1.1

This policy replaces all previous policies for Emergency Medical Technician Recertification.



# WY EMT RECERTIFICATION PROGRAM

Meets NREMT NCCP Standards

# EMT RECERT PROPOSAL (NCCP standards)

The National Component requires 20 hours of the topic hours listed for recert: Modules I thru V.

Module I 4 hours

TOPIC – Airway and Neurotological Management	TIME LINE
Ventilation	1 Hour
ETCO2	1 Houi
Oxygenation	30 Min.
CPAP	30 141111.
Neurological – (Seizures / CNS)	
Injury	1 Hour
Stroke	1 Hour
EMS Research / Evidence Based Medicine	30 Min.

- 1. Discuss and describe the ventilatory process
- 2. Identifying adequate vs. inadequate breathing
  - a. Tidal volume
  - b. Minute volume
  - c. Vital capacity
  - d. Hypoxia
  - e. Hypoxic drive
  - f. Dyspnea
- 3. Describe ventilatory assist and measurement of adequacy-ETCO2
  - When to oxygenate and when to ventilate.
- 4. Discuss cellular metabolism thru oxygenation.
- 5. Discuss Internal vs. External respiration
  - Difference between respiratory arrest and failure
- 6. Discuss use of CPAP\* (optional per agency medical direction)
- 7. Define altered mental status
- 8. Define diverse types of seizures: generalized, partial, status epilepticus
- 9. List possible causes of seizures
- 10. Explain the importance to recognize seizure activity and identify other problems associated with seizures
- 11. Describe the postictal state and the patient care interventions
- 12. Identify the s/s of a pt. with a traumatic brain injury
- 13. Discuss the current research and practices for the use of selective spinal immobilization
- 14. Discuss differences between ischemic vs. hemorrhagic stroke and TIA
- 15. Discuss s/s of stroke and some mimics
- 16. Discuss causes of stroke
- 17. Discuss identifying, assessing and treatment of the stroke patient.
- 18. Discuss importance of knowing the timeline of stroke events.
- 19. Discuss transport to appropriate stroke facilities
- 20. Explain the practical use of research in EMS care
- 21. Define different research methods in EMS research
- 22. Explain the process of conducting a literature review for EMS research

Module II 4 hours

TOPIC – Cardiac Management & Considerations	TIME LINE
Cardiac Arrest	
12 Lead EKG	2 Hours
AED	
ROSC	30 Min.
VAD	30 Min.
Pain Management	30 Min.
Toxicological - Opioids	30 Min.

- 1. Describe the A & P, pathophysiology, assessment and management of a myocardial infarction
- 2. Describe the purpose and demonstrate the application of the 12 lead ECG monitor/transmission
- 3. Discuss pathophysiology, assessment and management of a cardiac arrest
- 4. Discuss and demonstrate the application of an AED, indications and contraindications
- 5. Describe ROSC and effectively manage hemodynamic instability
- 6. Determine causes of cardiac arrest
  - a. Make treatment choices based on the cause
  - b. Determine appropriate destination
- 7. Describe the process of induced hypothermia
- 8. Understand the function of VAD's
- 9. Discuss patient care issues/differences in assessment involved in patients with a VAD
- 10. Determine differences between acute and chronic pain management
- 11. Discuss conducting pain assessments appropriately by patient's age
- 12. Discuss non-pharmacological pain management options
- 13. Identify common synthetic stimulants and natural or synthetic THC (Tetrahydrocannabinol)
  - a. Recognize the effects
  - b. Synthetic stimulants
  - c. Natural and synthetic THC
- 14. Identify common opioids
  - Recognize the effects
- 15. Discuss management and treatment of the opioid overdose patient

Module III 4 hours

TOPIC – Medical Emergencies I/Ops I Management & Considerations	TIME LINE
Diabetic Emergencies	1 Hour
Psychiatric / Behavioral	30 Min.
EMS Culture of Safety	30 Min.
Immunological Emergencies	30 Min.
Infectious Diseases	30 Min.
EMS Provider Hygiene, Safety, and Vaccinations	30 Min.
At Risk Populations	30 Min.

- 1. Explain the role glucose plays on the cells
- 2. Explain the role of insulin
- 3. Define and explain diabetes and the two types
  - a. Hyperglycemia
  - b. hypoglycemia
- 4. Discuss assessing the patient with a history of diabetes and an altered mental status
- 5. Describe the interventions for care and treatment of both the conscious and unconscious patient with a history of diabetes who is having a hypoglycemic episode
- 6. Explain the management of hyperglycemia
- 7. Define a behavioral crisis
- 8. Discuss special considerations for assessing and managing a behavioral crisis or psychiatric emergency
- 9. Define agitated delirium and describe the care for a patient with agitated delirium
- 10. State the risk factors for suicide
- 11. Define culture of safety
- 12. Identify and explain the six core elements necessary to advance an EMS culture of Safety Identify the role of the EMS provider in establishing a culture of safety within EMS organizations
- 13. Understand and define the terms allergic reaction vs. anaphylaxis
- 14. Discuss causes of an allergic reaction
- 15. Discuss the assessment, management and treatment of a patient having an allergic vs. anaphylaxis reaction
- 16. Describe some age-related contraindications to using epinephrine to treat an allergic reaction in a geriatric patient
- 17. Define infectious disease and communicable disease
- 18. Define bloodborne vs. airborne transmission
- 19. Understand mode of transmission
- 20. Explain post-exposure management
- 21. Identify proper hand-washing technique
- 22. Identify appropriate use of alcohol-based hand cleaner
- 23. Discuss the CDC's recommendations of vaccines for healthcare providers
- 24. Assess eye safety indications and measures
- 25. Recognize the unique characteristics of at-risk populations
- 26. Recognize circumstances that may indicate abuse
  - a. Domestic abuse
  - b. Human trafficking
  - c. Non-accidental trauma
- 27. State appropriate actions of EMS professionals in the presence of abused pts.

Module IV 4 hours

TOPIC – Medical Emergencies II Management & Considerations	TIME LINE
Special Healthcare Needs	1.5 Hours
OB Emergencies	30 Min.
Pediatric Cardiac Arrest	2 Hours

- 1. Identify common special needs patients seen in EMS
- 2. Relate the role of caregivers of the special needs patient to the EMS Professional's patient care
- 3. Describe patient assessment of a special needs patient Identify abnormal presentations during childbirth and nuchal cord presentations
- 4. Discuss management of abnormal presentation and nuchal cord presentation during delivery
- 5. Recognize the need for neonatal resuscitation during delivery
- 6. Describe steps for neonatal resuscitation
- 7. Describe routine care of a newborn not requiring resuscitation
- 8. Describe current techniques of one and two rescuer CPR for pediatric cardiac arrest
- 9. Demonstrate current techniques of one and two rescuer CPR for pediatric cardiac arrest

Module V 4 hours

TOPIC – Trauma/Ops II Management & Considerations	TIME LINE
Trauma and Field Triage	1 Hour
Hemorrhage Control	30 Min.
Pediatric Transport	30 Min.
Ambulance Safety	30 Min.
Crew Resource Management	1 Hour
Evidence Based Guidelines	30 Min.

- 1. Identify triage criteria for the trauma patient in the Field Triage Decision Scheme
- 2. State the four steps of the CDC's Field Triage Decision Scheme
- 3. Examine local protocols
- 4. Identify and treat severe hemorrhage
- 5. Define the indications, effects, and contraindications for the use of
  - a. Tourniquets
  - b. Hemostatic agents
- 6. Explain how to appropriately secure a child safety restraint to a stretcher
- 7. Discuss the difference between the NHTSA recommendations for safe transport of children based on the condition of the child
- 8. Discuss the on-going initiatives to increase the safety of children during ambulance transport and the limitations of those current recommendations
- 9. Define Crew Resource Management
- 10. Explain the benefits of CRM to EMS
- 11. Explain the concept of communication in the team environment using advocacy/inquiry or appreciative inquiry
- 12. State characteristics of effective team leaders
- 13. State characteristics of effective team members
- 14. Explain how the use of CRM can reduce errors in patient care
- 15. Define evidence based medicine and practice
- 16. Identify resources available through NASEMSO to aid states and agencies in developing evidence based guidelines
- 17. Explain the benefits of evidence based guidelines for patients
- 18. Discuss federal initiatives developed to monitor and analyze ground ambulance crashes
  - a. Reference: NHTSA Advances Ground Ambulance Safety
- 19. Identify the significance of ambulance crashes through the use of national data
- 20. Evaluate policies and procedures at one's own EMS service related to protecting the patient and providers safety during ground ambulance transport

Module VI 4 hours +

# **TOPIC** – *Skills Performance*

Patient Assessment - Trauma

Patient Assessment - Medical (includes baseline vital assessment)

Must include one (1) of the following:

- Oral Glucose Administration
- Nitroglycerine Administration
- Nebulized Medication Administration
- Epinephrine Auto-Injector Administration
- Epinephrine 1:1000 Ampule Administration

Bleeding Control / Shock Management

Airway Management-King Airway

**Evidence Based Guidelines** 

# **Required Objectives:**

See WVOEMS approved psychomotor objectives

# **National Standards cont.**

Required State 10 hours Required Individual 10 hours

# Requirements (NREMT 2 year certification):

TOPIC		HOURS
EMT NCCP Refresher Course including skills		24
MCI or Disaster Management		2
Haz Mat Awareness X2 (awarded 3 hours annually)		Meeting Standard (6 Hours)
BLS Protocol Refresher (awarded 2 hours annually)		4
CPR (awarded 4 hours every two year CPR certification period	d)	Meeting Standard (4 Hours)
	TOTAL	40

# Requirements (WVOEMS 4 year certification):

TOPIC		HOURS
EMT NCCP Refresher Course including skills X2 (biennially)		48
MCI or Disaster Management X2 (biennially)		4
Haz Mat Awareness X4 (Annually)		12 (3 hours each)
BLS Protocol Refresher X4 (Annually)		8
CPR X2		8 (4 hours each)
	TOTAL	80

24 hour Refresher including skills (National required component)

**32** hours proposed State and individual requirements

Total = 80 hours in 4 years meeting National Registry, WVOEMS, and MPCC requirements.

## Notes:

- Applies and ensures consistency to the program
- Modules SHALL be taught as a unit. (i.e. Modules cannot be broken down into 30 minute increments)
- Maintains standards across the State
- Allows individuals to obtain refresher hours as part of multiple classes
- EMT Refreshers would be entered in CIS as 6 separate modules
- Allows the program to grow and be modified as needed while maintaining state-wide consistency