

EMTB STUDENT APPLICATION

Class Name Date E-mail address _____

LAST NAME FIRST MIDDLE

SECURITY NUMBER - -

MAILING ADDRESS

CITY STATE ZIP

County or City of Residence:

Sex Date of Birth

Home phone: - - Work Phone:

- YES / NO 1. Do you have any physical defects, which would keep you from performing all Practical skills required for EMT-B training?
- YES / NO 2. Have you ever been convicted of a felony?
- YES / NO 3. Are you addicted to the use of intoxicating liquor or drugs?
- YES / NO 4. Are you proficient in reading, writing, and speaking the English language?
- YES / NO 5. Do you understand that this class consist of 152 hours didactic training and 16 Hours in Clinical setting? If you miss any more than 16 hours of classes you will be dropped from the course roster to test for the state exam?
- YES / NO 6. Will you make an effort to complete assignments that were missed due to absence?
- YES / NO 7. Do you understand that you are required to posses a valid Health Care Provider Professional Rescuer CPR card as a prerequisite of this course?
- YES / NO 8. Do you understand that you must take and pass the state written grade of 70 and practical Exams within six (6) months of completion of this course in order to obtain certification?

YES/NO 9. Do you understand that oral testing will not be permitted?

YES /NO 10. Do you understand you must perform min. 16 hours of Hospital Emergency department or Rescue Squad rotation.

YES /NO 11. Do you understand you must be min of 16 years of age at start of this class and Any student under 18 years of age must have written permission of guardian..

YES / NO 12. Do you understand that the course coordinator will make the final decision for Eligibility to take the state exam? This will be based on maturity, ability to make adequate decision in problem solving, satisfactory completion of all written tests, and satisfactory ability to perform required practical skills.

YES / NO 13. Do you understand that smoking or alcohol consumption will not be permitted during class?

YES / NO 14. Do you understand that a textbook is required for this course?

YES / NO 15. Do you understand that class dates could change due to weather or other unforeseen circumstances?

YES / NO 16. Do you understand that you will be required to keep min of 75 on all quizzes There will be 1 make up quiz to improve any failures to make 75. There will be 1 make up final exam for those not making an 80 on the final exam to become able to take the state exam.

I hereby affirm that the above information is true and correct. I realize that may fraudulent entry maybe considered sufficient cause for rejection or dismissal from the course.

SIGNATURE _____ DATE _____

WITNESS _____ DATE _____

IF YOU ARE UNDER THE AGE OF EIGHTEEN (18) YEARS, A PARENT OR GUARDIAN MUST SIGN THIS APPLICATION.

PARENT OR GUARDIAN SIGNATURE _____ DATE _____

VIRGINIA OFFICE OF EMS FIPS CODE CHART FOR VIRGINIA

Five Virginia Cities and counties have identical names:

BEDFORD, FAIRFAX, FRANKLIN, RICHMOND, ROANOKE

Their FIPS numbers are NOT the same. Please be sure to use the proper locality name to get the proper FIPS number.

(Revised 3/2002)

LOCALITY NAME (Counties)	FIPS CODE	PLANNING DISTRICT
ACCOMACK	001	22
ALBEMARLE	003	10
ALLEGHANY	005	5
AMELIA	007	14
AMHERST	009	11
APPOMATTOX	011	11
ARLINGTON	013	8
AUGUSTA	015	6
BATH	017	6
BEDFORD COUNTY	019	11
BLAND	021	3
BOTETOURT	023	5
BRUNSWICK	025	13
BUCHANAN	027	2
BUCKINGHAM	029	14
CAMPBELL	031	11
CAROLINE	033	16
CARROLL	035	3
CHARLES CITY	036	15
CHARLOTTE	037	14
CHESTERFIELD	041	15
CLARKE	043	7
CRAIG	045	5
CULPEPER	047	9
CUMBERLAND	049	14
DICKENSON	051	2
DINWIDDIE	053	19
ESSEX	057	18
FAIRFAX COUNTY	059	8
FAUQUIER	061	9
FLOYD	063	4
FLUVANNA	065	10
FRANKLIN COUNTY	067	12
FREDERICK	069	7
GILES	071	4

LOCALITY NAME (Counties)	FIPS CODE	PLANNING DISTRICT
GLOUCESTER	073	18
GOOCHLAND	075	15
GRAYSON	077	3
GREENE	079	10
GREENSVILLE	081	19
HALIFAX	083	13
HANOVER	085	15
HENRICO	087	15
HENRY	089	12
HIGHLAND	091	6
ISLE OF WIGHT	093	20
JAMES CITY	095	21
KING AND QUEEN	097	18
KING GEORGE	099	16
KING WILLIAM	101	18
LANCASTER	103	17
LEE	105	1
LOUDOUN	107	8
LOUISA	109	10
LUNENBURG	111	14
MADISON	113	9
MATHEWS	115	18
MECKLENBURG	117	13
MIDDLESEX	119	18
MONTGOMERY	121	4
NELSON	125	10
NEW KENT	127	15
NORTHAMPTON	131	22
NORTHUMBERLAND	133	17
NOTTOWAY	135	14
ORANGE	137	9
PAGE	139	7
PATRICK	141	12
PITTSYLVANIA	143	12
POWHATAN	145	15

LOCALITY NAME (Counties)	FIPS CODE	PLANNING DISTRICT
PRINCE EDWARD	147	14
PRINCE GEORGE	149	19
PRINCE WILLIAM	153	8
PULASKI	155	4
RAPPAHANNOCK	157	9
RICHMOND COUNTY	159	17
ROANOKE COUNTY	161	5
ROCKBRIDGE	163	6
ROCKINGHAM	165	6
RUSSELL	167	2
SCOTT	169	1
SHENANDOAH	171	7
SMYTH	173	3
SOUTHAMPTON	175	20
SPOTSYLVANIA	177	16
STAFFORD	179	16
SURRY	181	19
SUSSEX	183	19
TAZEWELL	185	2
WARREN	187	7
WASHINGTON	191	3
WESTMORELAND	193	17
WISE	195	1
WYTHE	197	3
YORK	199	21
LOCALITY NAME (Cities)	FIPS CODE	PLANNING DISTRICT
ALEXANDRIA	510	8
BEDFORD	515	11
BRISTOL	520	3
BUENA VISTA	530	6
CHARLOTTESVILLE	540	10
CHESAPEAKE	550	20
CLIFTON FORGE (Now a Town)	Use Alleghany County 005	5
COLONIAL HEIGHTS	570	19
COVINGTON	580	5
DANVILLE	590	12
EMPORIA	595	19
FAIRFAX	600	8

LOCALITY NAME (Cities)	FIPS CODE	PLANNING DISTRICT
FALLS CHURCH	610	8
FRANKLIN	620	20
FREDERICKSBURG	630	16
GALAX	640	3
HAMPTON	650	21
HARRISONBURG	660	6
HOPEWELL	670	19
LEXINGTON	678	6
LYNCHBURG	680	11
MANASSAS	683	8
MANASSAS PARK	685	8
MARTINSVILLE	690	12
NEWPORT NEWS	700	21
NORFOLK	710	20
NORTON	720	1
PETERSBURG	730	19
POQUOSON	735	21
PORTSMOUTH	740	20
RADFORD	750	4
RICHMOND	760	15
ROANOKE	770	5
SALEM	775	5
SOUTH BOSTON (Now a Town)	Use Halifax County 083	13
STAUNTON	790	6
SUFFOLK	800	20
VIRGINIA BEACH	810	20
WAYNESBORO	820	6
WILLIAMSBURG	830	21
WINCHESTER	840	7
OUT OF STATE	124	N/A

**Commonwealth of Virginia
EMT-B Written Test**

100 Multiple choice questions consisting of:

01 -Preparatory	10
02-Airway	12
03-Patient Assessment	16
04-Medical Emergencies	29
05-Trauma Emergencies	20
06-Infants and Children	7
07-EMS Operations	<u>6</u>
total	100

Initial BLS Training Programs

First Night Paperwork

The following packet contains—at a minimum—the required state and program specific paperwork that must be completed by each student enrolling in a BLS initial certification program in Virginia.



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Student Signature Form – Form TR-09

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Course Syllabus

BLS Course Student Information Package

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

Enclosed are documents containing information about the EMS program you are about to attend. You will be asked to verify that you have reviewed the information with the Course Coordinator, have had your questions answered and understand the information contained herein by signing this cover form **and individual documents enclosed**.

My signature below indicates that the specific section listed below for the Emergency Medical Technician-First Responder or Emergency Medical Technician-Basic program has been read to me. Further, my signature indicates that I read the contents of the specific section for the Emergency Medical Technician-First Responder or Emergency Medical Technician-Basic program and understand the information contained in that section.

Student Name
(printed)

Part I Introduction

Part II Prerequisites for EMS Training Programs, Criminal History and Standards of Conduct

Signature

Date Signed

Date of Birth – Minimum 18 YO

Signature for this item indicates that I was also provided a duplicate copy of this form.

Part III Class Rules

Signature

Date Signed

Part IV Expectations for Successful Completion of the Program

Signature

Date Signed

Part V Course Fees

Signature

Date Signed

Part VI Requirements for State or National Registry Testing

Signature

Date Signed

Part VII Americans with Disabilities Act

Signature

Date Signed

Part VIII Course Schedule

Signature

Date Signed



Introduction

-
- A. Introduce yourself and provide the following information to all students:
 1. Your name
 2. Your training credentials and affiliation
 3. Your contact phone number(s), e-mail address etc.
 4. A brief description of the type and level of program being taught
 - B. Introduce the program's Physician Course Director
(Note: If at all possible the medical director should be present to introduce him or herself and make any appropriate comments concerning the program.)
 - C. Distribute ***Student Information Package*** for review.
 - D. At the conclusion of the "first night", the course coordinator should collect state forms TR-35 and TR-09 with the student's original signature for inclusion in the student's file.



Program Prerequisites

- A. Read aloud each section state form TR-35—***Prerequisites for EMT-Basic and EMS First Responder Programs, Criminal History and Standards of Conduct***—stopping between each item to explain the statement and asking if there are any questions about its meaning. (This information is provided by the Office per 12VAC5-31-910 through 12VAC5-31-940 and 12 VAC 5-31-1450 of state EMS regulations.)
- B. Read aloud each section of any additional local or regional prerequisites that are in addition to those described in TR-35. (Provide this information in the ***Student Information Package***)
- C. Explain any medical requirement (vaccinations, etc.) for entry into the program or for class completion. A copy of these requirements and other pertinent information should be included in the ***Student Information Package***. (Note: The physician course director may want to cover these.)
- Information should include:
1. The specific requirements.
 2. Where to go and who to see about satisfying these requirements.
 3. When evidence of satisfying the requirements must be produced for the Course Coordinator.
- D. When this section is completed, read aloud the statement on the agreement page of the ***Student Information Package*** and have each student sign appropriately. (Provide each student two copies of state form TR-35—***Prerequisites for EMT-Basic and EMS First Responder Programs, Criminal History and Standards of Conduct***. Each student should sign one copy and return it to you and keep one copy for themselves.)

Basic Life Support – Emergency Medical Technician and EMS First Responder

To be eligible to attend a EMS First Responder, EMS First Responder Bridge, or Emergency Medical Technician Course in Virginia, you must:

- A. Be proficient in reading, writing and speaking the English language in order to clearly communicate with a patient, family or bystander to determine a chief complaint, nature of illness, mechanism of injury or to assess signs and symptoms.
- B. Be a minimum of 16 years of age at the beginning date of this certification program. If less than 18 years of age, you must provide the course coordinator with a completed parental permission form with the signature of a parent or guardian verifying approval for enrollment in the course. If you are less than 18 years of age and are affiliated with an EMS or other public safety agency you must also provide the Course Coordinator with documentation from an Officer of the agency stating that you will be covered by agency insurance while attending the course. **(Students less than 18 years of age must obtain and complete a copy of the Student Permission Form from the course coordinator of the training program and present a signed copy of the form at the state test site.)**
- C. Have no physical or mental impairment that would render him unable to perform all practical skills required for that level of certification including the ability to function and communicate independently and perform appropriate patient care, physical assessments and treatments without the need for an assistant.
- D. Hold current certification in an Office of EMS approved course in cardio-pulmonary resuscitation (CPR) at the beginning date of the certification program. This certification must also be current at the time of state testing.
- E. Not have been convicted or found guilty of any crime, offense or regulatory violation, or participated in any other prohibited conduct identified in state EMS regulations as follows:
 1. Have never been convicted or found guilty of any crime involving sexual misconduct where the lack of affirmative consent by the victim is an element of the crime, such as forcible rape.
 2. Have never been convicted of a felony involving the sexual or physical abuse of children, the elderly or the infirm, such as sexual misconduct with a child, making or distributing child pornography or using a child in a sexual display, incest involving a child, assault on an elderly or infirm person.
 3. Have never been convicted or found guilty of any crime (including abuse, neglect, theft from, or financial exploitation) of a person entrusted to his care or protection in which the victim is a patient or is a resident of a health care facility.
 4. Have never been convicted or found guilty of any crime involving the use, possession, or distribution of illegal drugs except that the person is eligible for affiliation five years after the date of final release if no additional crimes of this type have been committed during that time.
 5. Have never been convicted or found guilty of any other act that is a felony except that the felon is eligible for affiliation five years after the date of final release if no additional felonies have been committed during that time.
 6. Are not currently under any disciplinary or enforcement action from another state EMS office or other recognized state or national healthcare provider licensing or certifying body. Personnel subject to these disciplinary or enforcement actions may be eligible for certification provided there have been no further disciplinary or enforcement actions for five years prior to application for certification in Virginia.

Prerequisites for EMS Training Programs, Criminal History and Standards of Conduct

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Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

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7. Have never been subject to a permanent revocation of license or certification by another state EMS office or other recognized state or national healthcare provider licensing or certifying body.
- F. All references to criminal acts or convictions under this section refer to substantially similar laws or regulations of any other state or the United States. Convictions include prior adult convictions, juvenile convictions and adjudications of delinquency based on an offense that would have been, at the time of conviction, a felony conviction if committed by an adult within or outside Virginia.
- G. If you are bridging to the EMT-Basic certification level you must hold current Virginia certification at the EMS First Responder level.
- H. Be clean and neat in appearance.
- I. May not be under the influence of any drugs or intoxicating substances that impairs your ability to provide patient care or operate a motor vehicle while in class, or clinicals, while on duty or when responding or assisting in the care of a patient.

Advanced Life Support – EMT-Enhanced, EMT-Intermediate, EMT-Paramedic and RN to Paramedic Bridge

To enroll in an ALS certification program (EMT-Enhanced, EMT-Intermediate, EMT-Paramedic or RN to Paramedic Bridge) Course in Virginia, you must also comply with the following:

- A. Be a minimum of 18 years of age at the beginning date of the certification program.
- B. Hold current certification as an EMT or higher EMS certification level.
- C. Hold, at a minimum, a high school or general equivalency diploma.
- D. If you are bridging to the EMT-Intermediate certification level you must hold current Virginia certification at the EMT-Enhanced level.
- E. If you are bridging to the EMT-Paramedic certification level you must hold current Virginia certification at the EMT-Intermediate level or current Virginia licensure as a Registered Nurse.

Acknowledgement - I have not been convicted or found guilty of any felony or misdemeanor crime, offense or regulatory violation listed above nor participated in any other conduct which prohibits EMS course enrollment or certification. My signature below acknowledges that I have read and understand the prerequisites for course enrollment, and the listing of criminal convictions and/or misconduct that preclude individuals from EMS Certification in Virginia and verify that I am eligible for certification based upon the "Standards of Conduct" required by the Office of EMS.

Signed: _____ Date: _____

Print Name: _____ Date of Birth: ____/____/____

THE MINIMUM AGE FOR BLS PROGRAMS IS 16 YEARS OF AGE AND THE MINIMUM AGE FOR ALS PROGRAMS IS 18 YEARS OF AGE AT THE START DATE OF COURSE



Class Rules

-
- A. Read aloud each item of the rules established for your class to the students.
 - B. Provide a copy in the ***Student Information Package***.
 1. The class rules should at a minimum include:
 - i. Course attendance requirements.
 - ii. Standards for successful course completion.
 - iii. Class cancellation policy.
 - iv. Time class will begin and end.
 - v. Location of classes.
 - vi. Suggested dress code for class.
 - vii. Special equipment needs if any (i.e. BP Cuff, Stethoscope, etc.)
 2. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.

{Example ONLY}

- 1) No running calls from class.
- 2) No radios, tone pagers or cellular phones in class. (silent pagers are ok)
- 3) No disruptive behavior allowed. Disruptive student(s) will be dropped from class.
- 4) Active participation by all class members is expected. (Participate in all aspects of practical sessions)
- 5) No smoking, tobacco products or alcohol in classroom.
- 6) Classes will begin promptly at 7 PM. You are expected to arrive to class on time.
- 7) Anyone arriving 30 minutes after class starts will be considered absent from that class. Quizzes do not count as time class starts.
- 8) You are allowed absences for no more than 15% of the course. Absences must be made up within 2 weeks of the missed class. You will not be allowed to take the certification examination if you have more absences than 15% of the course that have not been made up. Each absence after 15% of the course will result in 1 point being removed from your final grade point average.
- 9) An overall 70% average must be obtained in order to qualify to sit for the State Certification Examination.
- 10) Anyone who falsifies information or is found to be cheating will be immediately removed from the program.
- 11) All Classes will be held in the continuing education classroom at _____ unless otherwise noted.
- 12) Class Cancellation Policy: Class will be held except in case of one the following events:
 - 1) Evening classes at _____ high school is canceled.
 - 2) You receive a phone call only from the course coordinator, John Smith.
- 13) Textbooks and course materials: Each student is expected to have a copy of the primary text for this program. Other recommended informational sources are optional.
 - A) The primary text for this program will be:
 - TITLE:
 - AUTHOR:
 - PUBLISHER:
 - EDITION:
 - OBTAINABLE FROM:
 - B) List any other materials or books required or suggested for the program with information on how to obtain each of the items listed.



Expectations for Successful Completion

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- A. Read aloud state form TR-16—***Expectations for Successful Completion***—stopping between each to ask if there are any questions or clarification needed. Provide further explanation if needed.
 1. A copy should be provided in the ***Student Information Package***.
 2. Information should contain State requirements at a minimum.
 3. Also include any expectations that you require.
 - B. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.

Course Expectations for Successful Completion

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Division of Educational Development
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- 1) Comply with all course prerequisites.
- 2) Comply with all class rules.
- 3) Satisfy all minimum requirements as set forth in the minimum training requirements for the corresponding curriculum.
- 4) Satisfy all current course expectations.
- 5) Demonstrate proficiency in the performance of all practical aspects of the program. (Also includes activities reviewed in the "Functional Position Description" for the appropriate level.)
- 6) Successful completion of 1, 2, and 3 above as evidenced by the submission of a completed "Course Student Disposition Report (CSDR) form as required by the end date of the program.
- 7) The following levels required:
 - a. For First Responders bridging to EMT, they must maintain a valid FR credential as evidenced by a current Virginia certification card issued by the Office of EMS.
 - b. For EMT's bridging to any ALS level, they must maintain a valid EMT credential as evidenced by a current Virginia certification card issued by the Office of EMS.



Course Fees

- A. Explain any course fees and their purpose.
 - 1. It is recommended that a copy of the fee structure be included in the ***Student Information Package*** and each item reviewed and students allowed to have their questions answered.
- B. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.



Requirements for Testing

- A. Read each item verbatim state form TR-11B, providing an explanation for each and answering any questions the students may have.
- B. A copy of the requirements must be included in the ***Student Information Package***.
- C. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.

Requirements for State Testing - BLS

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Division of Educational Development
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(This section applies to initial testing for EMS First Responder and EMT-Basic and recertification testing for all state BLS levels.)

1. You must satisfy all items contained in state form TR-16—Course Expectations for Successful Completion.
2. Successful completion of #1 above as evidenced by your Course Coordinator marking you as “Pass” on the Course Student Disposition Report (CSR) and possession of a valid Test Eligibility letter from the Office of EMS.
 - a. This letter must be obtained from your online EMS Portal which can be accessed via the OEMS website at: www.vdh.virginia.gov/oems
3. Hold current CPR credentials from an Office of EMS approved course as evidenced by a current card or copy of the roster submitted to the respective agency. The CPR certificate must indicate successful training in adult, infant, and child airway maneuvers and CPR.
4. Testing for initial certification must be begun within 180 days of the course's end date.
5. Pass/Fail: Students must demonstrate proficiency on all practical stations.
6. Practical Retest Policy:
 - a. Grades of UNSATISFACTORY in any critical area within a single practical station will constitute failure of the station, requiring a retest.
 - b. Failure of one or more stations on the practical constitutes failure of the practical exam. All practical stations failed must then be retested at another test site.
 - c. Students attending another test site to retest must provide the Program Representative or Certification Examiner with all necessary documents provided by the Office of EMS, explaining which parts of the written or practical need to be retested.
 - d. Failure of any retest will constitute total failure of the practical exam series and will require completion of the retest procedures listed below prior to being permitted to take the written and practical examinations again.
7. Written Examinations
 - a. Once the written exam has begun, no student will be allowed to leave and return. (Other than for rest room) Any student who does leave will have their exam scored for only the questions completed prior to departure.
 - b. Exam Scores: The Office's standard for successful completion is that the student must obtain a minimum score of 70 on the final standardized examination.
 - c. Oral testing will not be permitted on written examinations. The use of any electronic or mechanical device which translates the written exam material into an audible or tactile format of any type is not permitted, but the use of normal corrective lenses is allowed.
8. Students successfully completing all requirements for state certification, will be mailed a certificate with attached pocket card at the conclusion of the training program.
9. General Testing and Retesting Policy

Requirements for State Testing - BLS

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- a. A certification candidate may have up to two series of state certification examinations before being required to repeat an entire BLS or ALS certification program.
- b. A certification candidate failing a practical examination but passing the written examination of an exam series must only repeat the practical examination of an exam series.
- c. A certification candidate failing the written examination but passing the practical examination must only repeat the written examination for the exam series.
- d. A certification candidate who has failed the retest of the initial examination series or has not taken the retest within the 90 day retest period, must satisfy the following before an additional certification test may be attempted:
 - i. Completion of the recertification CE hour requirements for the level to be tested.
 - ii. Receipt of a "Second Certification Testing Eligibility Notice" from the Office of EMS.
- e. A certification candidate who has received a "Second Certification Testing Eligibility Notice" must pass both the written and practical certification examinations for the certification level.
- f. A certification candidate who fails a retest during the second certification examination series must complete an initial certification program or applicable bridge course in order to be eligible for further certification examination.
- g. A certification candidate must complete all certification examination series within 12 months from the date of the first certification examination attempt. This 12- month maximum testing period may shorten the time available for retesting specified in subsection B of this section.



Americans with Disabilities Act

- A. Read aloud and verbatim the functional position description for the appropriate level of EMS certification program you are conducting.
 1. A copy of the appropriate Functional Position Description must be included in the ***Student Information Package***.
- B. It is critical that all portions of the description be read and explained clearly to every student in the same manner!
- C. After reviewing the appropriate Functional Position Description, advise the class if anyone feels they may not be able to perform all the tasks and expectations just described, they should see you after class.
 1. For students requesting an accommodation in a First Responder, Emergency Medical Technician or a Virginia Enhanced program, the student is to be provided a copy of the Atlantic EMS Council Accommodation Policy—TR-15A— and be advised to contact the Manager of the Division of Regulation and Compliance of the Office of EMS.
 2. For Intermediate and Paramedic students, accommodation requests must be made directly with the National Registry of EMT's. For students requesting an accommodation at one of these levels, the student is to be provided a copy of form TR-15B.
 3. Be sure to indicate to the student the location of the Office of EMS phone number and address.
- D. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.

Functional Position Description for the Basic Life Support Provider

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

Introduction

The following is a position description for the Emergency Medical Technician (EMT) within Atlantic EMS Council states. This document identifies the minimum qualifications, expectations, competencies and tasks expected of the EMT.

Qualifications for State Certification

To qualify for state certification, the applicant must at a minimum:

1. meet minimum state entry requirements.
2. meet course requirements such as attendance and grades.
3. successfully complete all certification/licensure examination(s).

Competencies

The EMT must demonstrate competency in handling emergencies utilizing basic life support equipment and skills in accordance with the objectives in the U.S. Department of Transportation National Standard Curriculum for the EMT to include having the ability to:

- verbally communicate in person, via telephone and telecommunications using the English language;
- hear spoken information from co-workers, patients, physicians and dispatchers and in sounds common to the emergency scene;
- ability to lift, carry, and balance up to 125 pounds (250 with assistance) a height of 33 inches, a distance of 10 feet;
- read and comprehend written materials under stressful conditions;
- document, physically in writing, document physically patient information in prescribed format;
- demonstrate manual dexterity and fine motor skills, with ability to perform all tasks related to quality patient care in a safe manner;
- bend, stoop, crawl, and walk on uneven surfaces;
- meet minimum vision requirements to operate a motor vehicle within the state.

Functional Position Description for the Basic Life Support Provider

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Description of Tasks

The Advanced Life Support Provider must:

- Receives a dispatched call, verbally acknowledges the call, reads road maps, identifies the most expeditious route to the scene, and observes traffic ordinances and regulations.
- Upon arrival at the scene, ensures that the vehicle is parked in a safe location. Safely performs size-up to determine scene safety including the presence of hazardous materials, mechanism of injury or illness, and the total number of patients. Performs triage and requests additional help as necessary.
- In the absence of public safety personnel takes safety precautions to protect the injured and those assisting in the care of the patient(s).
- Using body substance isolation techniques, protects the patient(s) and providers from possible contamination.
- Inspects for medical identification emblems, bracelets or cards that provide patient emergency medical care information.
- Determines nature and extent of illness or injury, checks respirations, auscultates breath sounds, takes pulses, auscultates/palpates blood pressure (including proper placement of the cuff), visually observes changes in skin color, establishes priority for emergency care. Based on assessment findings renders emergency care to adults, infants and children.
- Skills performed include but are not limited to: establishing and maintaining an airway, ventilating patients, cardiac resuscitation, use of automated external defibrillators where applicable. In addition, provides prehospital emergency care of single and multiple system trauma such as controlling hemorrhage, bandaging wounds, treatment of shock (hypoperfusion), spinal immobilization and splinting of painful swollen or deformed extremities.
- Manages medical patients to include, but are not limited to: assisting in childbirth, management of respiratory, cardiac, diabetic, allergic, behavioral, and environmental emergencies and suspected poisonings.
- Performs interventions and assist patients with prescribed medications, including sublingual nitroglycerine, epinephrine auto injectors, and metered dose aerosol inhalers observing safety measures for others and self.
- Responsible for the administration of oxygen, oral glucose and activated charcoal.
- Reassures patients and bystanders by working in a confident, efficient manner.
- Functions in varied environmental conditions such as lighted or darkened work areas, extreme heat, cold and moisture.
- Performs in situations that create stress and tension on a regular basis.
- Where extrication is required, assesses extent of entrapment and provides all possible emergency care and protection to the patient. Uses recognized techniques and equipment for removing patients safely (to include proper strap placement) Communicates verbally for additional help as needed.
- Complies with regulations for the handling of crime scenes and prehospital deaths by notifying the appropriate

Functional Position Description for the Basic Life Support Provider

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

authorities and arranging for the protection of property and evidence at that scene.

- Lifts and moves patients into the ambulance and assures that the patient and stretcher are secured, continues emergency medical care enroute in accordance with local protocols.
- Determines most appropriate facility for patient transport. Reports to the receiving facility, the nature and extent of injuries, and the number of patients being transported.
- Observes patient enroute and administers care as directed by medical control or local protocol. Able to maneuver to all points in the patient compartment while transporting with a stretchered patient. Assists in lifting and carrying patient and appropriate equipment from ambulance and into receiving facility.
- Reports verbally and in writing, observations and emergency care given to the patient at the scene and in transit to the receiving staff for record keeping and diagnostic purposes. Upon request, provides assistance to the receiving facility staff.
- Disposes of contaminated supplies in accordance with established guidelines, decontaminates vehicle interior, sends used supplies for sterilization.
- Maintains ambulance in operable condition which includes cleanliness, orderliness and restocking of equipment and supplies. Determines vehicle readiness by checking oil, gas, water in battery and radiator, and tire pressure.
- Checks all medical equipment for future readiness. Maintains familiarity with all specialized equipment.
- Attends continuing education and or refresher training programs as required by EMS agency, medical direction, and/or certifying agency.
- Meets qualifications within the functional job analysis of the EMT.

Atlantic EMS Council Accommodation Policy

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

VIRGINIA DEPARTMENT OF HEALTH

OFFICE OF EMERGENCY MEDICAL SERVICES

Manager of Regulation and Compliance
1041 Technology Park Drive
Glen Allen, VA 23059
(804) 888-9120
(800) 523-6019

This document is intended to be distributed by course coordinators to students who after a formal review of the administrative aspects of a Virginia Basic Life Support program believe they need to pursue an accommodation.

I. INTRODUCTION

The Americans with Disabilities Act of 1990 has implications for coordinators and students in the areas of prospective student information, testing of knowledge and skills competency. Among the many provisions of the ADA are several that pertain specifically to agencies, institutions and organizations that provide courses or examinations leading to certification.

The intent emphasizes that individuals with disabilities are not to be excluded from jobs that they can perform merely because a disability prevents them from taking a test or negatively influences the results of a test, which is a prerequisite to the job. Passing written and skills examinations during an EMS course and passing certification examinations are prerequisites for functioning as a certified EMS provider.

This law permits testing that requires the use of sensory, manual or speaking skills where the tests are intended to measure essential functions of the profession. For example, an applicant with a reading disability could be required to take a written examination if the ability to read is an essential function of the profession, and the examination is designed, at least in part, to measure the ability to read. An essential function of an EMS provider is the ability to read and understand small English print under highly stressful conditions for the provider and patient. A second example deals with skills examinations that must be performed within established time frames.

Performing a skill within a certain time frame can be required if speed of performance is an integral part of the skill being measured. Both the ability to read and the ability to perform basic skills within time frames are essential functions of an EMS Provider.

II. SCOPE

The information provided herein applies to all prehospital EMS personnel.

III. SPECIFIC DIRECTIONS

Coordinators must review the standard functional position description and the information concerning the ADA, with every prospective student. Prospective students need to understand the competencies and tasks that are required within the profession BEFORE entering a training program.

Students cannot be discriminated against on the basis of a disability in the offering of programs or services. There will be NO allowed accommodations during the course of instruction or certification examinations unless written approval is received from the certification/licensure agency, in advance. Students who have received an accommodation during the course need to fully understand that there is a separate process for requesting an accommodation for the state written and practical certification examination. The certification agency will establish eligibility for an accommodation on a case-by-case basis. Documentation confirming and describing the disability must be submitted according to policy, for consideration.

Here are five examples of accommodations that would NOT be allowed during the instructional program:

1. Additional time for skills with specific time frames will NOT be allowed. Obviously, patients would suffer due to life threatening conditions in emergency situations.
2. No accommodation will be made in a training program that is not reasonably available in a prehospital environment. Students may use performance aids which could be readily available and easily accessible to them in the prehospital setting. It is the responsibility of the student to provide any personal aids they deem necessary and the certifying agency deems appropriate.
3. Unlimited time to complete a written examination is NOT allowed. Such a request is not considered reasonable because a candidate should be able to complete a test within a finite amount of time.
4. Written examinations are NOT to be administered with an oral reader. The ability to read and understand small English print (12 point) is an essential function of the profession, and written examinations are designed, at least in part, to measure that ability.
5. A written examination with a reading level which is lower than the reading level required by the profession to function safely and efficiently should not be administered.

IV. DOCUMENTED LEARNING DISABILITY

Test takers who have presented a documented learning disability relating to reading decoding or reading comprehension may be granted a standard extension. A standard extension allowed for completing a written examination is time-and-a-half. Thus if the examination is normally administered in two hours, an extra hour could be allowed to complete the examination. This accommodation could be allowed because the individual would be able to perform the essential functions of the position description.

The critical nature of reading in emergency situations requires reading finite amounts of material in measured amounts of time, as it is required for taking an examination. Also the reading level of an exam is not impacted by the time requirement of the exam.

The certification/licensure agency will review only written requests for accommodations on the state written certification examination on a case-by-case basis. Requests must be submitted on the "Accommodation Request" form. The state certification/licensure agency will provide written notification upon review of the request for accommodation.

V. DISABILITY ACCOMMODATION POLICY

A. Requesting Accommodations

"Accommodation Request" forms are available from the Office of Emergency Medical Services. The candidate who is requesting an accommodation must complete the request form at the start of the instructional program or as soon as the need for an accommodation is recognized.

Documentation of a specific disability which would impact your performance on the written examination must include a signed statement on letterhead stationary from a professional who is familiar with your disability. This

statement must confirm and describe the disability for which the accommodation is required. The professional must have expertise in the specific disability for which the accommodation is being requested.

Applicants with disabilities are entitled to, and have the responsibility to meet the same deadlines for application and submission of documentation established for preregistration as non-disabled individuals. The process involved in establishing eligibility will not impose discriminatory timeliness for application on the individual with a disability.

B. Reasonable Accommodations

The certification/licensure agency will offer reasonable accommodations for the written certification exam for those persons with written documented disabilities.

Based upon an analysis of the Functional Position Description and the written examination, it has been determined that persons with learning disabilities manifested in the academic areas of reading decoding, or reading comprehension may be eligible for additional time as an accommodation.

Documentation of a specific disability which would negatively impact one's performance on the written examination must include a complete "Accommodation Request" form with signature of the individual. This statement must confirm and describe the disability for which an accommodation is being requested.

Requests for accommodation on the written examination will be reviewed on a case-by-case basis. If the appropriateness of the requested accommodation is in doubt, the certifying agency will discuss options with the candidate and will consult with professionals knowledgeable about disability and functions of the profession. The recency of disability testing is not an issue in determining the need for accommodation. A permanent learning disability is a permanent disability.

VI. DEFINITION

The word "written" was purposefully included to ensure that certified individuals could read. The written portion of the EMS certification examination is designed, in part to measure an applicant's ability to read and understand English. Being able to read is a skill that is justified as integral to the performance of the job.

VII. RECORD KEEPING

Diagnostic information related to an individual's disability is highly confidential and will not be disclosed to third parties. The accommodation file will be maintained separately from the application and test result files.



Course Schedule

-
- A. A copy of the course schedule is to be included in the ***Student Information Package***.
 - B. Recommended minimal content:
 - 1. class dates
 - 2. class topics
 - 3. identify classes meeting refresher and recert by continuing education criteria.
 - C. Upon completion, read aloud the statement on the agreement page of the ***Student Information Package*** and have the student sign appropriately.

Student Permission Form for BLS Students Less than 18 Years Old

Virginia Office of EMS
Division of Educational Development
1041 Technology Park Drive
Glen Allen, VA 23059

804-888-9120

Dear Parent/Legal Guardian:

Your daughter/son has expressed an interest in being certified as an Emergency Medical Services Provider. The Office of Emergency Medical Services, Virginia Department of Health requests that you take a moment to review this letter. If you have any concerns, please discuss them with your daughter/son, the EMT instructor, or someone at the Office of Emergency Medical Services. (1-800-523-6019)

The Emergency Medical Services (EMS) Basic Life Support (BLS) Course is a program which trains people to assist injured or ill individuals outside the confines of a hospital. The curriculum used in Virginia is a nationally recognized program developed by the U.S. Department of Transportation.

The curriculum requires a minimum of number of hours of classroom instruction and for Emergency Medical Technician programs an additional 10 hours of clinical experience either by hospital emergency department observation, or a ride-a-long on an ambulance. Following successful completion of a State approved course, the student is allowed to take the State Certification Examination. Passing both the written and practical aspects of the State examination certifies the student to perform the duties of an EMS provider.

Because of the responsibilities placed on an EMS provider, the State of Virginia requires that anyone less than eighteen (18) years of age must have permission from their parent or legal guardian to become certified as an EMS provider in Virginia. **The individual must be at least sixteen (16) years of age before the course starts to enroll in an EMS program.**

To participate in the delivery of health care can be a very rewarding experience. However, the responsibilities of an EMS provider are great and at times extremely stressful. The balance of a patient's life may rest with the actions taken by the provider. The consequences of such situations can be positive; but can also be a source of frustration, guilt, and emotional distress. Physical injury is also a very real possibility.

EMS providers are at a greater risk of exposure to infectious diseases, hazardous environments, and violent behaviors. Emergency Medical Services' training programs provide information on how to protect oneself when dealing with these hazards. However, the nature of EMS activities tends to place EMS providers in dangerous situations where the maturity and experience to deal with critical decisions is of the most importance.

APPLICANT/STUDENT INFORMATION:

Name

	_____	_____	_____
	Last Name	First Name	MI
Mailing Address	_____	_____	_____
	Number, Street, Apt.	City	State Zip +4
E-mail Address	_____		

(over)

Student Permission Form for BLS Students Less than 18 Years Old

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PARENTAL ACKNOWLEDGMENT:

By signing this document, you agree that your daughter/son has the capabilities of managing these mature matters. The Office of Emergency Medical Services welcomes all interested individuals to participate as an informed member in this very rewarding activity.

I have reviewed this letter and discussed with my daughter/son the activities associated with being an EMS provider. Having no further questions, I consider to possess the necessary maturity to perform the duties of an Emergency Medical Services Provider and authorize their enrollment in this **EMERGENCY MEDICAL RESPONDER** or **EMERGENCY MEDICAL TECHNICIAN** course.

Signature

Date

Relationship to Applicant:

AGENCY ACKNOWLEDGMENT:

If the applicant is a member of an agency providing prehospital medical care, the endorsement of the applicant by an officer in the agency is required to insure agency insurance coverage, etc. in the event of student's course related injury or liability.

I, the undersigned individual have spoken to the applicant's parent or guardian and I recommend that the applicant, a member in good standing with the agency specified below, be allowed to take the Emergency Medical Responder or Emergency Medical Technician program for certification.

Agency Name

Agency Official Name

Last Name

First Name

MI

Official Title

Mailing Address

Number, Street, Apt.

City

State

Zip +4

+

E-mail Address

Signature

Date

This letter must be presented to the EMT Instructor who will keep it on file with the records for the Emergency Medical Services program the above applicant has enrolled. This letter must be returned to the EMT instructor within one week after receipt by the student in order to remain in the course.

Clinical Training Record

Virginia Office of EMS
 Division of Educational Development
 1041 Technology Park Drive
 Glen Allen, VA 23059

804-888-9120

STUDENT NAME: _____ Cert #: _____

COURSE TYPE: First Responder to EMT-Bridge EMT-Basic

INSTRUCTOR NAME: _____

CLINICAL ROTATIONS: (Identify Hospital or EMS Agency in blank provided)

Hospital Department: _____

Ambulance Rotation: _____

Clinical Scenario Option Used (See below)

Hospital Department or EMS Station Location	Date	Time	Supervisor's Signature

All students completing either the First Responder Bridge or Emergency Medical Technician Basic Course must attend a minimum of 10 hours of clinical observation. If hospital regulations allow students to observe in such areas as Surgery, Obstetrics, Psychiatry etc., these observations may be included in the 10 hour requirement. Ambulance rotations require a minimum of two incidents involving patient contact which may require more than 10 hours.

CLINICAL SCENARIO OPTION USAGE (Requires OEMS Approval with Course Announcement):

Location of Scenario Session(s)	Date	Time	EMT Instructor's Signature

Clinical Training Record

Virginia Office of EMS
 Division of Educational Development
 1041 Technology Park Drive
 Glen Allen, VA 23059

804-888-9120

STUDENT NAME: _____ Cert #: _____

COURSE TYPE: First Responder to EMT-Bridge EMT-Basic

INSTRUCTOR NAME: _____

CLINICAL ROTATIONS: (Identify Hospital or EMS Agency in blank provided)

Hospital Department: _____

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Clinical Scenario Option Used (See below)

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