



EDUCATION PROGRAM COMPLIANCE MANUAL

Version 1.1

November 1, 2013

“To protect the public’s health and safety through regulation and support of the EMS system.”

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Education Program Coordinators and Instructors:

The Emergency Medical Services Regulatory Board (EMSRB) and the Education Standards workgroup (comprised of EMSRB staff and educators) collaborated to create this interactive Education Program Compliance Manual as a resource for EMS education coordinators and instructors in the State of Minnesota.

The manual is divided into the following eight sections: Documentation, Faculty, Education Standards, Clinical/Field Experience, Student Information, Operational Procedures, E-Licensing, and Psychomotor Examination. Throughout the sections you will find important regulatory information, application documents; example templates and sample forms; and additional resources and website links.

The EMSRB recommends that education program coordinators share this manual with instructors and examiners who provide EMS education in Minnesota, and encourage them to review the National Education Standards and the NREMT Psychomotor Exam processes to prepare for the transfer to the new education standards.

The EMSRB would like to take this opportunity to thank the following workgroup participants for their time and efforts in helping Minnesota become a leader in EMS education: Lisa Consie, Board member; Alice Almendinger, Lynda Goerisch, and Brad Racutt, Peer Educators; Tom Frost, Holly Hammann-Jacobs, Robert Norlen, Debra Teske, and Mary Zappetillo, EMSRB staff.

Regards,



EMSRB Chair
Kelly Spratt



Executive Director
Pamela Biladeau

How to Use This Manual



Purpose of Section:

To provide “At a Glance” information related to the EMS Education Program Compliance Manual, Education Program Compliance Requirements and Inspection/site-visit Requirements.

Information Included:

- Navigating the Manual
- EMR/EMT Program Inspection Form
- Requirements Chart by EMS Education Level
- Key Definitions
- Table of Contents

- **Navigating the Manual** - Outlines how information is arranged in the manual and describes the various icons that are used to visually represent and highlight key information.
- **Requirements Chart by EMS Education Level** – This is an “at a glance chart” that outlines what’s required under each tab of the manual and applicable to which EMS education levels.
- **Key Definitions** – Important definitions that will help the user understand the responsibilities of partners that play a role in the EMS Education and with the registration or certification of EMS providers in Minnesota **EMR/EMT**.
- **Program Inspection Form** – This is the form that will be used by EMSRB staff to during program site-visits for program compliance with regulatory requirements.
- **Table of Contents** – Outlines the eight (8) specific required and informational areas in the manual and what’s included under each tab.

Navigating the Manual

The table below outlines how information is arranged in the manual and describes the various icons that are used to visually represent and highlight key information.

Item in Manual	Description	Icon/Example						
Table of Contents	The Table of Contents is color coordinated to match each of the section titles and documents within a Tab.	Operational Procedures (Tab 6)						
Chapter Tab Heading	Three categories of information are provided to introduce each section; purpose, information type and forms to include.	TAB 3: US DOT EMS Education Standards Purpose Forms to include:						
Informational Items	Helpful information, templates and sample forms are noted by a diamond blue icon with a lowercase “i” in the middle.							
Regulatory Items	Regulatory information that is statutorily required of education programs is noted by a yellow triangle icon with an exclamation point “!” in the middle.							
Forms to Include	Forms and application materials education programs should use and keep on file for EMSRB review.	N/A						
Minnesota Statutes and Rules	Statutes and Rules that give EMSRB the authority to regulate EMS education programs in Minnesota are identified and organized in a table for easy reference. <i>Only key excerpts of the Statute are provided in this manual. Please refer to the Appendix if you are interested in reading the entire Statute/Rule.</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #f4a460;"> <th colspan="2" style="text-align: center; padding: 5px;">Minnesota Statutes</th> </tr> <tr style="background-color: #f4a460;"> <th colspan="2" style="text-align: center; padding: 5px;">Education Programs</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px; vertical-align: top;">M.S. 144E.285, subd. 1</td> <td style="padding: 5px; vertical-align: top;">All education programs for an EMT, AEMT, or paramedic must be approved by the board.</td> </tr> </tbody> </table>	Minnesota Statutes		Education Programs		M.S. 144E.285, subd. 1	All education programs for an EMT, AEMT, or paramedic must be approved by the board.
Minnesota Statutes								
Education Programs								
M.S. 144E.285, subd. 1	All education programs for an EMT, AEMT, or paramedic must be approved by the board.							
Additional Resources	Reference materials and links to Appendices and websites are listed in a grey box located on the bottom of the page.	Additional Resources <ul style="list-style-type: none"> • Website link • Appendices 						

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Education Program		EMR	EMR Refresher	EMT	EMIRefresher	AEMT	Paramedic	Paramedic Refresher
Requirements Chart by EMS Provider Level								
Documents								
License Application	Required	Required	Required	Required	Required	Required	Required	N/A
Program Coordinator	Required	Required	Required	Required	Required	Required	Required	N/A
Medical Director	Required	Required	Required	Required	Required	Required	Required**	N/A
Program Site Visit/Approval	Required	Required	Required	Required	Required	Required	Required**	N/A
Faculty								
Instructor Qualifications (at level or above)	Required	Required	Required	Required	Required	Required	Required	N/A
Faculty/DOT Certification	N/A	N/A	Required	Required	Required	Required	Required**	N/A
USDOT EMS Education Standards								
Course Syllabus	Required	Required	Required	Required	Required	Required	Required	N/A
Lesson Plans	Required	Required	Required	Required	Required	Required	Required	N/A
Textbooks	Required	Required	Required	Required	Required	Required	Required	N/A
Written Exam	N/A	N/A	Required	N/A	Required	Required	Required	N/A
Skill Verification	Standards Required	Standards Required	Required	Required	Required	Required	Required	N/A
Clinical / Field Experience								
Clinical Field Experience	Recommended	N/A	Required	N/A	Required	Required**	Required**	N/A
Background Studies	Recommended	N/A	Required*	N/A	Required*	Required*	Required*	N/A
Student Information								
Student Admission Criteria	Required	Required	Required	Required	Required	Required	Required**	N/A
Student Enrollment Form	Required	Required	Required	Required	Required	Required	Required	N/A
Operational Procedures								
Instructor to Student Ratio 1:10	Required	Required	Required	Required	Required	Required	Required	N/A
E-Licensing								
Course Notification	N/A	N/A	Required	Required	Required	Required	Required	N/A
Course 3rd Party Confirmation	Required	Required	NREMT	Required	NREMT	NREMT	NREMT	Paper
Additional Information								
Instructional Aids & Equipment	Required	Required	Required	Required	Required	Required	Required	N/A
NREMT Skills	N/A	N/A	Required	Required	Required	Required	Required	CEU Requirement

* Required by Minnesota Department of Human Services

** Paramedic also has requirements that need to be met as part of Accreditation (CAAHEP)

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Key Definitions



Word	Definition	Relationship to Minnesota Certification
National EMS Education Standards	<p>The National EMS Educational Standards are dedicated to promoting a sufficient, stable, and well-trained EMS workforce, as well as enhancing the health and safety of all EMS providers. The EMS Education Standard defines the minimum entry-level competencies for each certification level.</p> <p>The Standards will replace the current DOT National Standard <i>Curricula</i> (NSC) with a less prescriptive and defined EMS Education Standard. The new format supports diverse implementation methods and more frequent content updates.</p>	<p>Per statute, Minnesota has adopted the EMS Education Standards developed by the US Department of Transportation.</p>
National Registry of Emergency Medical Technician (NREMT)	<p>The NREMT is an organization that offers a nationally standardized written and psychomotor exam that evaluates minimum competency of the US DOT Education Standards.</p> <p>The NREMT issues nationally recognized EMS certification cards.</p>	<p>The EMSRB has adopted the NREMT exam for:</p> <ul style="list-style-type: none"> ▪ Initial Certification: requires taking both the written and psychomotor exam at the EMT, AEMT and Paramedic levels. ▪ Refresher Certification: requires taking the psychomotor exam for EMTs.
Minnesota Emergency Medical Services Regulatory Board (EMSRB)	<p>Authority: MS 144E and MR 4690 gives the 19 member Board authority to regulate EMS in Minnesota. Based on statutes, as they apply to Emergency Medical Services Certification and approval of Education Program the Board:</p> <p>Sets policy and processes: Verifying that an education program is ready to follow required education standards and students have achieved minimum competency prior to issuing a registration or certification card.</p> <p>Enforcement and Compliance: Per Statute the Board is responsible for approving Education Programs and compliance for the purpose of public protection.</p>	<p>The new education program and registration/certification levels are:</p> <ul style="list-style-type: none"> ▪ Emergency Medical Responder (EMR) ▪ Emergency Medical Technician (EMT) ▪ Advanced Emergency Medical Technician (AEMT) ▪ Paramedic levels

Psychomotor Exam Staff Definitions



Word	Definition/Role
State Official	EMSRB Staff that oversees the entire psychomotor exam process.
Approved Agent	<p>On-site agent approved by the EMSRB to conduct the psychomotor exam on behalf of the State of Minnesota in accordance with National Registry guidelines. To be eligible as an Approved Agent for the EMSRB, the applicant must provide verification of the following:</p> <ul style="list-style-type: none">▪ Current CPR certification▪ Credentialed at the level of the exam or higher▪ Completed Board approved training for Approved Agents
Exam Coordinator	Provides logistic support for conducting the psychomotor exam and works closely with the Approved Agent conducting the exam.
Examiner	<p>Person that meets requirements of MS § 144E.286, subdivision 3</p> <p>To be eligible as an Examiner, the applicant must provide verification of the following:</p> <ul style="list-style-type: none">▪ Current CPR certification▪ Credentialed at the level of the exam or higher▪ Completed Board approved examiner training

Date: _____

EMR/EMT EDUCATION PROGRAM INSPECTION FORM

Insp #: _____

Licensee: _____	License #: _____
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STATUTES:

- **MS §144E.285 & MS § 144E.27 Education Programs:** Subd.1 & Subd. 1(a): All education programs for EMR, EMT, AEMT, or paramedic must be approved by the board.
- **Subd.7 Audit.** The board may audit education programs approved by the board. The audit may include, but is not limited to, investigation of complaints, course inspection, classroom observation, review of instructor qualifications, and student interviews.

DOCUMENTS (Must be on file)

- License App. Documentation (MS 144E.285, subd.1(b)(1))
- Program Coordinator (MS 144E.285, subd.1(b)(3))
- Medical Director (MS 144E.285, subd.1(b)(3))
- Program Approval (MS 144E.285 subd.1(b)(7))
- Faculty (MS 144E.285, subd.1(b)(4))
 - Instructor Qualifications (MS 144E.283)
 - DOT Certification (MS 144E.283, (a)(4))
 - Instructor CEU's (MS 144E.283, (a)(5))
- USDOT EMS Standards (MS 144E.285, subd.1(b)(2))
 - Course Outline (MS 144E.285, subd.1(b)(7))
 - Lesson Plans
 - Textbook and supplements; Reference Materials
 - Written Examinations
 - Skill Verification
- Clinical / Field Experience (MS 144E.285, subd. 1(b)(6))
 - Written Agreements
 - Clinical Rotations & Objectives
 - Clinical / Field Rotation Form
 - Background Study Information/Account *
- Student Admission Criteria (MS 144E.285, subd. 1(b)(1)(iv))
- Student Information (MS 144E.285, subd. 1(b)(7))
- Student Success Ratio (MS 144E.285, subd. 1(b)(10))
 - Operational Procedures
 - Instructor/Student Ratio (MS 144E.285, subd.1(b)(5))
 - Instructor Recruitment Process
 - Instructor Orientation Process
 - Instructor Performance Evaluation
 - Student Performance Criteria
 - Student Evaluation & Remediation
- Course Notification** (MS 144E.285, subd.1(b)(8))
- Student Course Completion Confirmation (e-Licensing system)

INSTRUCTIONAL AIDS AND EQUIPMENT (MS 144E.285 subd. 1(b)(1)(v))

- Classroom/Office**
 - Didactic Classroom Space
 - Practical Skills Practice Area
 - Educational Aids (AV equipment, PowerPoint, computer(s))
- Personal Protective Equipment:** gloves, masks, gowns, eye protection
- Mechanical Aids to Breathing**
 - Intubation Manikin
 - O2 Cylinder with regulator
 - O2 Delivery Devices (NRM, nasal cannula, connection tubing)
 - Bag-Valve-Mask Device with reservoir (adult, child, infant)
 - Oro/Nasopharyngeal Airways
 - Supraglottic Airway (Combitube, PTL or King LT)
 - Suction Device (tubing, rigid & flexible catheters, sterile water)
- CPR Equipment**
 - Manikins (adult, child, infant & supply of disposable parts)
 - Manikin Cleaning Supplies
 - AED Trainer(s)
- Patient Assessment & Vital Signs:** (BP cuffs, stethoscope, penlight)
- Spinal Injury Management Equipment**
 - Long Spine Board with securing straps
 - Short Spine Board with securing straps or Vest-type device
 - Head Immobilization device
 - Cervical Collars (various sizes)
- Splinting & Bandaging Equipment**
 - Fixation Splints (board, air, vacuum, commercial)
 - Traction Splint
 - Tourniquet, Dressings & Bandages (various: bleeding, burn, roller)
- Enrichments** (please list any additional)
 - Blood Glucose Monitor
 - IV Infusion (infusion arm, catheters, solutions, administration sets)
 - IO Infusion (manikin, needles and/or drill device)
 - Medication Administration (prefilled meds, syringes, needles, sharps)
 - Moulage Kit or similar substitute
 - Extrication (various extrication tools & supplies)
 - Other: _____

Comments:

Program Approval: Yes No **Correction Order Issued:** Number(s): _____

Licensee Authorized Official: _____	Date: _____
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EMSRB Authorized Official: _____	Date: _____
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Table of Contents

Licensing Application Documentation Program Coordinator Medical Director Program Approval	Documents (Tab 1)
Instructor Qualifications DOT Certification	Faculty (Tab 2)
Course Syllabus Lesson Plans Textbook & Supplements; Reference Material Written Examinations Skill Verification HAZMAT Awareness NIMS Requirements	US DOT Standards (Tab 3)
Written Agreements Clinical Rotations & Objectives Clinical/Field Rotation Form	Clinical/Field Experience (Tab 4)
Student Admission Criteria Student Information Student Success Ratio	Student Information (Tab 5)
Instructor/Student Ratio Instructor Recruitment Procedure Instructor Orientation Procedure Instructor Performance Evaluation Student Performance Criteria Student Evaluation & Remediation Procedure	Operational Procedures (Tab 6)
Course Notification Course Completion Confirmation	E-licensing (Tab 7)
A – Instructional Aids & Equipment List B – Educational Infrastructure C – Useful Links D – Statutes related to Education Programs E – NREMT Psychomotor Exam F – Links to Forms G – AEMT/Paramedic Program Information	Appendices (Tab 8)

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TAB 1: DOCUMENTS

Required



- Licensing Application Documents

Purpose of Section

This section provides education programs with the license application forms and documents to submit to EMSRB for Certification approval.

Forms to Include

- Copy of current program application

Minnesota Statutes	
Education Programs	
M.S. 144E.285, subd. 1	<p>All education programs for an EMT, AEMT, or paramedic must be approved by the board.</p> <p>To be approved by the board, an education program must:</p> <ul style="list-style-type: none"> ▪ submit an application prescribed by the board that includes; types and length of course to be offered; names, addresses, and qualifications of the program medical director, program education coordinator, and instructors; admission criteria for students; and materials and equipment to be used ▪ have a program medical director and a program coordinator ▪ retain documentation of program approval by the board
Emergency Medical Responder Registration	
M.S. 144E.27	<p>An education program instructor must be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.</p> <p>All education programs for an emergency medical responder must be approved by the board.</p> <p>To be approved by the board, an education program must:</p> <ul style="list-style-type: none"> ▪ submit an application prescribed by the board that includes; types and length of course to be offered; names, addresses, and qualifications of the program medical director, program education coordinator, and instructors; admission criteria for students; and materials and equipment to be used ▪ for each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to Emergency Medical Responder registration education ▪ have a program medical director and a program coordinator ▪ have at least one instructor for every ten students at the practical skill stations ▪ retain documentation of program approval by the board, course outline, and student information ▪ submit the appropriate fee as required under section 144E.29.

	<ul style="list-style-type: none"> ▪ The National EMS Education Standards by the NHTSA, United States Department of Transportation contains the minimal entry level of knowledge and skills for emergency medical responders. Medical directors of emergency medical responder groups may expand the knowledge and skill set.
Definitions	
144E.001, subd. 14	<p>Education Program Coordinator: means an individual who serves as the administrator of an emergency care education program and who is responsible for planning, conducting, and evaluating the program; selecting students and instructors; documenting and maintaining records; developing a curriculum according to the National EMS Education Standards by the National Highway Transportation Safety Administration (NHTSA), United States Department of Transportation; and assisting in the coordination of examination sessions and clinical training.</p>
144E.001, subd. 11	<p>Program Medical Director: means a physician who is responsible for ensuring an accurate and thorough presentation of the medical content of an emergency care education program; certifying that each student has successfully completed the education course; and in conjunction with the program coordinator, planning the clinical training.</p>

MINNESOTA EDUCATION PROGRAM APPLICATION INSTRUCTIONS

STATUTES:

- **MS §144E.285 & MS § 144E.27, Subd.1 & Subd. 1(a) Education Programs:** All education programs for EMR, EMT, AEMT, or paramedic must be approved by the Board.
- **MS §144E.283 Instructor Qualifications:** (a) An emergency medical technician instructor must...
- **MS §144E.27, Subd. 1 Education Program:** An education program instructor must...

QUESTIONS: Contact the appropriate EMS Specialist or the Administration Supervisor for the EMSRB.

INSTRUCTIONS

Provide all information requested by this application form. Be sure to sign on the last page. Incomplete or illegible applications will be returned. The review and decision by the Emergency Medical Services Regulatory Board (EMSRB) will be made on the basis of information provided in this application.

1. Program Name

- The program name must be the public business name.
- This is the physical location at which the program will operate.
- All correspondence from the EMSRB will be mailed to this address.

2. Telephone

Provide the business phone number and fax number of management during normal business hours. Provide an alternate phone number (preferably cell number). Include area codes with all numbers.

3. E-Mail

Please provide an e-mail address that is accessed daily by someone who is familiar with the general operation of the program, preferably the program coordinator.

4. Type of Program

Check the type of course(s) for the proposed program. For AEMT and Paramedic levels contact the appropriate EMS Specialist or the Administrative Supervisor.

5. Education Program Coordinator

This is the person to contact at the business phone number. This person must be familiar with the general management and operation of the entire program. Include certification level and instructor qualifications.

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6. Education Program Medical Director

Provide the name and contact information of the program Medical director. Retain a copy of the medical director agreement in your files.

7. Course Instructors

List the names, contact information and qualifications of instructors approved by your medical director.

8. Clinical Sites

Provide the contact information for each site you have clinical site agreements with. Retain a copy of each of clinical site agreement in the program files. (NOTE: EMR does not require clinical experience)

9. Admission Criteria for Students

Briefly describe the criteria you will use to qualify applicants to your program. A copy of the full admission criteria must be retained in the program files.

10. Instructor Recruitment and Orientation

Briefly describe the criteria you will use to recruit qualified instructors to your program and the orientation process for those instructors. A copy of the full recruitment and orientation policy must be retained in the program files.

11. Instructional Aids and Equipment

Ensure all items on checklist are addressed prior to submitting application. Aids and equipment will be required for inspection at the site visit.

12. Attachments

Please list and number additional attachments submitted with the application. Please keep a file copy of the application for your reference as the review process progresses.

13. Education Application Fee

The initial fee for an education program application is **\$100.00**. The fee ***must*** accompany the application.

14. Certification of Accuracy

Original Signatures of the Program Coordinator & Program Medical Director are required. Unsigned applications will be considered incomplete and returned. The EMSRB determines whether an educational program application is complete. The decision may be to accept an application, or to request additional information. The application process will not begin until the application is complete. Allow an ample amount of time for the entire approval process to be completed.

EMR /EMT Education Program Application

STATUTES:

- **MS §144E.285 & MS § 144E.27 Education Programs:** Subd.1 & Subd. 1(a): All education programs for EMR, EMT, AEMT, or paramedic must be approved by the Board.

Program Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____ Cell _____ Fax _____

E-mail _____ Date _____

Requesting Approval for the Following Programs:

Please check appropriate programs

Emergency Medical Responder *Length of course _____

EMR Refresher

Emergency Medical Technician *Length of course _____

EMT Refresher

An additional application for approval at the Advanced Level (AEMT, Paramedic) is attached.
(Applicants applying for approval at both the basic and advanced levels must complete two applications.)

***Course Length is based on Competency Not Hours.** Course should include didactic, laboratory, clinical & field experience as recommended in the National Education Standards.

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Program Information and Personnel

Education Program Coordinator

MS § 144E.001, subdivision 14. Education Program Coordinator

“Education program coordinator” means an individual who serves as the administrator of an emergency care education program and who is responsible for planning, conducting, and evaluating the program; selecting students and instructors; documenting and maintaining records; developing a curriculum according to the National EMS Education Standards by the National Highway Transportation Safety Administration (NHTSA), United States Department of Transportation; and assisting in the coordination of examination sessions and clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____

Instructor Qualifications: _____

Education Program Medical Director

MS § 144E.001, subdivision 11. Program Medical Director.

“Program medical director” means a physician who is responsible for ensuring an accurate and thorough presentation of the medical content of an emergency care education program; certifying that each student has successfully completed the education course; and in conjunction with the program coordinator, planning the clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Clinic or Hospital Employed By: _____

Minnesota M.D. License Number: _____

Course Faculty

(As approved by the Medical Director)

MS § 144E.285, Subd. 1(b) (4) Education Programs.
(b) To be approved by the board, an education program must: (4) utilize instructors who meet the requirements of section 144E.283 for teaching at least 50 percent of the course content.
MS § 144E.27, Subd.1. Subdivision 1. Education Programs: An [Emergency Medical Responder] education program instructor must be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Use Additional Sheets as Necessary

Guest Lecturers (Adjunct Faculty)

(As approved by the Program Coordinator or Medical Director)

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Use Additional Sheets as Necessary

Clinical Training Sites

(Written agreement with site must be available for review)

MS § 144E.285 Education Programs.

(b) To be approved by the board, an education program must: (6) maintain a written agreement with a licensed hospital or licensed ambulance service designating a clinical training site; (EMR does not currently require clinical experience)

Clinical Site:

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Clinical Site:

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Clinical Site:

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Use Additional Sheets as Necessary

Admission Criteria for students

(Admission forms must be available for review.)

Please list all criteria for admission to your program.

EMSRB Student Enrollment Form (completed and available for on-site review).

Instructor Recruitment and Orientation

(Program procedure must be available for review.)

Please list all criteria for recruitment and orientation of instructors for your program.

Instructional Aids and Equipment

Please check appropriate boxes.

- Didactic Classroom Space
- Technical Equipment (i.e.: computer, A/V equipment.)
- Textbook
- Workbook corresponding to textbook
- Course Outlines, lesson plans
- Quizzes and exams
- Student Guides and Reference Materials
- Guest lecturers
- Enrichments
- Records Retention Policy
- Practical Skills Practice Area – student/instructor ratio
- Equipment (see Inspection Form or Appendix A)
- Clinical/Field Rotations – overview, objectives and guidelines

Original

Signature: _____ Date: _____
Program Coordinator

Name: _____
(Please print)

I, _____, Medical Director of _____
Education Program have reviewed and approved the contents of this application.

Original

Signature: _____ Date: _____

Name: _____
(Please print)

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Change in Medical Director or Program Coordinator

Education Program Coordinator

Minnesota Statutes, section 144E.001, subdivision 14. Education Program Coordinator

"Education program coordinator" means an individual who serves as the administrator of an emergency care education program and who is responsible for planning, conducting, and evaluating the program; selecting students and instructors; documenting and maintaining records; developing a curriculum according to the National EMS Education Standards by the National Highway Transportation Safety Administration (NHTSA), United States Department of Transportation; and assisting in the coordination of examination sessions and clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____

Instructor Qualifications: _____

Medical Director

Signature: _____

Education Program Medical Director

Minnesota Statutes, section 144E.001, subdivision 11. Program medical director.

"Program medical director" means a physician who is responsible for ensuring an accurate and thorough presentation of the medical content of an emergency care education program; certifying that each student has successfully completed the education course; and in conjunction with the program coordinator, planning the clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Clinic or Hospital Employed By: _____

Minnesota M.D. License Number: _____

Medical Director Signature: _____

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TAB 2: FACULTY

Required



- Instructor Qualifications
- DOT Certification

Purpose of Section

This section provides education programs with instructor qualifications.

Forms to Include

- Roster of Instructors and Current Credentials
([See Roster Information in Program Application in Tab 1](#))

Minnesota Statutes	
Education Programs	
M.S. 144E.285, subd. 1(b)(4)	Utilize instructors who meet the requirements of section 144E.283 for teaching at least 50 percent of the course content.
Emergency Medical Responder Registration	
M.S. 144E.27, subd. 1	An education program instructor must be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.
Instructor Qualifications*	
144E.283	<p>An emergency medical technician instructor must:</p> <ul style="list-style-type: none"> ▪ Possess valid certification, registration, or licensure as an EMT, AEMT, paramedic, physician, physician's assistant, or registered nurse ▪ Have two years of active emergency medical practical experience ▪ Be recommended by a medical director of a licensed hospital, ambulance service, or education program approved by the board ▪ Successfully complete the United States Department of Transportation Emergency Medical Services Instructor Education Program or its equivalent as approved by the board and ▪ Compete eight hours of continuing education in educational topics every two years, with documentation filed with the education program coordinator ▪ An emergency medical responder instructor must possess valid registration, certification, or licensure as an EMR, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.
	*Education Program must maintain this documentation in their files.

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TAB 3: USDOT EMS STANDARDS

Required



- USDOT Standards
- Curriculum

Purpose of Section

This section provides education programs with required curriculum standards for initial and refresher courses.

Forms to Include

- Course Outline, Textbooks, Skill Verification, Lesson Plans, Written Examinations, Supplements & Reference Material
- HAZMAT Awareness and NIMS Verification

Minnesota Statutes

Education Programs

M.S. 144E.285, subd. 1(b)(4)	For each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to EMT, AEMT, or paramedic education
	Retain documentation of program approval by the board, course outline, and student information

Reference Materials and Helpful Information



- [Appendix B – Educational Infrastructure \(Standards pages 56-60\)](#)
- [Link to USDOT Education Standards](#)

Note: Information in this section is related to both EMSRB statutory requirements and Education Standards requirements.

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Hazardous Awareness & National Incident Management System (NIMS) Training

The USDOT EMS Education Standards requires that EMR, EMT, AEMT and Paramedic complete training in Hazardous Materials Awareness and complete specific courses under the National Incident Management System (NIMS).

For Hazardous Awareness, *the EMS Education Standards don't require a specific course.* However, the National Registry of Emergency Medical Technicians (NREMT) cognitive exam has a few hazmat questions (depends what the computer generates for candidate). The NREMT writing teams do not use a definitive source, but backgrounds generally include OSHA 1910, NFPA Chapter 2 (Competencies), and ERG information and the questions may come from any of these resources.

Verification of candidate's hazardous awareness is up to the education program. Based on the above resources the Board requires education programs to verify that acceptable courses for Hazardous Awareness have the following outline/topics: *Note*—if accepting prior learning/certification for hazardous awareness training the education program must verify prior training includes the areas listed in OSHA 190.120(q)(6)(i)(A) through (F).

Board Action: The Board has approved the OSHA 190.120(q) (6) (i) (A) through (F) education/training guidance.

OSHA Standard 1910.120(q) (6) (i) (A)-(F), Link to OSHA

Standard: http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=9765

(6) *Training.* Training shall be based on the duties and function to be performed by each responder of an emergency response organization. The skill and knowledge levels required for all new responders, those hired after the effective date of this standard, shall be conveyed to them through training before they are permitted to take part in actual emergency operations on an incident. Employees who participate, or are expected to participate, in emergency response, shall be given training in accordance with the following paragraphs:

(i) *First responder awareness level.* First responders at the awareness level are individuals who are likely to witness or discover a hazardous substance release and who have been trained to initiate an emergency response sequence by notifying the proper authorities of the release. They would take no further action beyond notifying the authorities of the release. First responders at the awareness level shall have sufficient training or have had sufficient experience to objectively demonstrate competency in the following areas:

An understanding of what hazardous substances are, and the risks associated with them in an incident

- a) An understanding of the potential outcomes associated with an emergency created when hazardous substances are present
- b) The ability to recognize the presence of hazardous substances in an emergency
- c) The ability to identify the hazardous substances, if possible
- d) An understanding of the role of the first responder awareness individual in the employer's emergency response plan including site security and control and the U.S. Department of Transportation's Emergency Response Guidebook
- e) The ability to realize the need for additional resources, and to make appropriate notifications to the communication center

The following are additional Hazardous Awareness helpful references:

- NFPA Chapter 2 (Competencies) – **Attached**
- Hazardous Materials Link to: [General Awareness and Familiarization Video](#)
- Emergency Response Guide (ERG) Links to: [Emergency Response Guide & ERG Video](#)

Links to National Incident Management System (NIMS) Online Courses:

Link to **NIMS ICS-100b** Introduction to Incident Command System (All Levels)
<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=is-100.b>

Link to **NIMS IS-700** National Incident Management System Introduction (All Levels)
<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=is-700.a>

Link to **NIMS ICS-200.b** for Single Resources and Initial Action Incidents (Paramedic only)
<http://emilms.fema.gov/IS200b/ICS01summary.htm>

Please note: the Education Standards are silent on NIMS refresher. **Students** should maintain verification of course completion.

*If you lost your NIMS certificate you can contact the following for a copy of your certificate of completion.

Contact information:

Phone: 301-447-1200

Email: Independent.Study@fema.dhs.gov



NFA Chapter 2: Hazardous Materials Competencies for the First Responder at the Awareness Level

2-1 General.

2-1.1 Introduction. First responders at the awareness level shall be trained to meet all competencies of this chapter. They also shall receive any additional training to meet applicable United States Department of Transportation (DOT), United States Environmental Protection Agency (EPA), Occupational Safety and Health Administration (OSHA), and other appropriate state, local, or provincial occupational health and safety regulatory requirements.

2-1.2 Definition. First responders at the awareness level are those persons who, in the course of their normal duties, could be the first on the scene of emergency involving hazardous materials. First responders at the awareness level are expected to recognize the presence of hazardous materials, protect themselves, call for trained personnel, and secure the area.

2-1.3 Goal. The goal of the competencies at the awareness level shall be to provide first responders with the knowledge and skills to perform the following tasks safely. Therefore, when first on the scene of an emergency involving hazardous materials, the first responder at the awareness level shall be able to:

- (a) Analyze the incident to determine both the hazardous materials present and the basic hazard and response information for each hazardous material by completing the following tasks:
 1. Detect the presence of hazardous materials
 2. Survey a hazardous materials incident from a safe location to identify the name, UN/NA identification number, or type placard applied for any hazardous materials involved
 3. Collect hazard information from the current edition of the *North American Emergency Response Guidebook*
- (b) Implement actions consistent with the local emergency response plan, the organization's standard operating procedures, and the current edition of the *North American Emergency Response Guidebook* by completing the following tasks:
 1. Initiate protective actions
 2. Initiate the notification process

2-2 Competencies — Analyzing the Incident.

2-2.1 Detecting the Presence of Hazardous Materials. Given various facility or transportation situations, or both, with and without hazardous materials present, the first responder at the awareness level shall identify those situations where hazardous materials are present. The first responder at the awareness level shall be able to:

2-2.1.1* Identify the definition of hazardous materials (or dangerous goods, in Canada).

2-2.1.2* Identify the DOT hazard classes and divisions of hazardous materials and identify common examples of materials in each hazard class or division.

2-2.1.3* Identify the primary hazards associated with each of the DOT hazard classes and divisions of hazardous materials by hazard class or division.

2-2.1.4 Identify the difference between hazardous materials incidents and other emergencies.

2-2.1.5 Identify typical occupancies and locations in the community where hazardous materials are manufactured, transported, stored, used, or disposed of.

2-2.1.6 Identify typical container shapes that can indicate hazardous materials.

2-2.1.7 Identify facility and transportation markings and colors that indicate hazardous materials, including the following:

- (a) UN/NA identification numbers
- (b) NFPA 704 markings
- (c) Military hazardous materials markings
- (d) Special hazard communication markings
- (e) Pipeline markings
- (f) Container markings

2-2.1.8 Given an NFPA 704 marking, describe the significance of the colors, numbers, and special symbols.

2-2.1.9 Identify U.S. and Canadian placards and labels that indicate hazardous materials.

2-2.1.10 Identify the basic information on material safety data sheets (MSDS) and shipping papers that indicates hazardous materials.

2-2.1.10.1 Identify where to find material safety data sheets (MSDS).

2-2.1.10.2 Identify entries on a material safety data sheet that indicate the presence of hazardous materials.

2-2.1.10.3 Identify the entries on shipping papers that indicate the presence of hazardous materials.

2-2.1.10.4 Match the name of the shipping papers found in transportation (air, highway, rail, and water) with the mode of transportation.

2-2.1.10.5 Identify the person responsible for having the shipping papers in each mode of transportation.

2-2.1.10.6 Identify where the shipping papers are found in each mode of transportation.

2-2.1.10.7 Identify where the papers can be found in an emergency in each mode of transportation.

472–8 PROFESSIONAL COMPETENCE OF RESPONDERS TO HAZARDOUS MATERIALS INCIDENTS

2-2.1.11* Identify examples of clues (other than occupancy/ location, container shape, markings/color, placards/labels, MSDS, and shipping papers) that use the senses of sight, sound, and odor to indicate hazardous materials.

2-2.1.12 Describe the limitations of using the senses in determining the presence or absence of hazardous materials.

2-2.2 Surveying the Hazardous Materials Incident from a Safe Location. Given examples of facility and transportation situations involving hazardous materials, the first responder at the awareness level shall identify the hazardous material(s) in each situation by name, UN/NA identification number, or type placard applied. The first responder at the awareness level shall be able to:

2-2.2.1 Identify difficulties encountered in determining the specific names of hazardous materials in both facilities and transportation.

2-2.2.2 Identify sources for obtaining the names of, UN/NA identification numbers for, or types of placard associated with hazardous materials in transportation.

2-2.2.3 Identify sources for obtaining the names of hazardous materials in a facility.

2-2.3* Collecting Hazard Information. Given the identity of various hazardous materials (name, UN/NA identification number, or type placard), the first responder at the awareness level shall identify the fire, explosion, and health hazard information for each material by using the current edition of the *North American Emergency Response Guidebook*. The first responder at the awareness level shall be able to:

2-2.3.1* Identify the three methods for determining the appropriate guide page for a hazardous material.

2-2.3.2 Identify the two general types of hazards found on each guide page.

2-3 Competencies — Planning the Response. (No competencies currently required at this level.)

2-4 Competencies — Implementing the Planned Response.

2-4.1* Initiating Protective Actions. Given examples of facility and transportation hazardous materials incidents, the local emergency response plan, the organization's standard operating procedures, and the current edition of the *North American Emergency Response Guidebook*, first responders at the awareness level shall be able to identify the actions to be taken to protect themselves and others and to control access to the scene. The first responder at the awareness level shall be able to:

2-4.1.1 Identify the location of both the local emergency response plan and the organization's standard operating procedures.

2-4.1.2 Identify the role of the first responder at the awareness level during a hazardous materials incident.

2-4.1.3 Identify the basic precautions to be taken to protect themselves and others in a hazardous materials incident.

2-4.1.3.1 Identify the precautions necessary when providing emergency medical care to victims of hazardous materials incidents.

2-4.1.3.2 Identify typical ignition sources found at the scenes of hazardous materials incidents.

2-4.1.3.3* Identify the ways hazardous materials are harmful to people, the environment, and property at hazardous materials incidents.

2-4.1.3.4* Identify the general routes of entry for human exposure to hazardous materials.

2-4.1.4* given the identity of various hazardous materials (name, UN/NA identification number, or type placard), identify the following response information:

- (a) Emergency action (fire, spill, or leak and first aid)
- (b) Personal protective equipment necessary
- (c) Initial isolation and protective action distances

2-4.1.4.1 given the name of a hazardous material, identify the recommended personal protective equipment from the following list:

- (a) Street clothing and work uniforms
- (b) Structural fire-fighting protective clothing
- (c) Positive pressure self-contained breathing apparatus
- (d) Chemical-protective clothing and equipment

2-4.1.4.2 Identify the definitions for each of the following protective actions:

- (a) Isolation of the hazard area and denial of entry
- (b) Evacuation
- (c) * Sheltering in-place protection

2-4.1.4.3 Identify the shapes of recommended initial isolation and protective action zones.

2-4.1.4.4 Describe the difference between small and large spills as found in the table of Initial Isolation and Protective Action Distances.

2-4.1.4.5 identifying the circumstances under which the following distances are used at a hazardous materials incident:

- (a) Table of initial isolation and protective action distances
- (b) Isolation distances in the numbered guides

2-4.1.4.6 Describe the difference between the isolation distances in the orange-bordered guide pages and the protective action distances in the green-bordered pages in the document.

2-4.1.5 Identify the techniques used to isolate the hazard area and deny entry to unauthorized persons at hazardous materials incidents.

2-4.2 Initiating the Notification Process. Given either a facility or transportation scenario involving hazardous materials, the first responder at the awareness level shall identify the appropriate initial notifications to be made and how to make them, consistent with the local emergency response plan or the organization's standard operating procedures.

2-5 Competencies — Evaluating Progress. (No competencies currently required at this level.)

2-6 Competencies — Terminating the Incident. (No competencies currently required)

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Sample: Outline must include each of the following in accordance with National EMS Education Standards

- 1. Preparatory**
 - a. EMS Systems, Research, Workforce Safety and Wellness, Documentation, EMS System Communication, Therapeutic Communication, Medical/Legal, and Ethics.
- 2. Anatomy and Physiology**
- 3. Medical Terminology**
- 4. Pathophysiology**
- 5. Life Span Development**
- 6. Pharmacology**
 - a. Principles of Pharmacology (at EMT, AEMT, Paramedic only)
 - b. Medication Administration and Emergency Medications
- 7. Airway Management, Respiration and Artificial Ventilation**
- 8. Assessment**
 - a. Scene Size-Up, Primary Assessment, History Taking, Secondary Assessment, Reassessment
 - b. Monitoring Devices (at EMT, AEMT, Paramedic only)
- 9. Medicine**
 - a. Medical Overview, Neurology, Abdominal and GI Disorders, Immunology, Infectious Diseases, Endocrine Disorders, Psychiatric, Cardiovascular, Toxicology, Respiratory, GI and Renal, Gynecology, and Diseases of the Eyes, Ears, Nose, and Throat.
 - b. Hematology and Non-Traumatic Musculoskeletal Disorders (at EMT, AEMT, Paramedic only)
- 10. Shock and Resuscitation**
- 11. Trauma**
 - a. Trauma Overview, Nervous System Trauma (at EMT, AEMT, Paramedic only)
 - b. Bleeding, Chest Trauma, Abdominal and GI Trauma, Orthopedic Trauma, Soft Tissue Trauma, Head, Facial, Neck, and Spine trauma, Special Considerations in Trauma, Environmental Emergency, Multi-System Trauma
- 12. Special Patient Populations**
 - a. Obstetrics, Neonatal, Pediatrics, Geriatrics, Patient with Special Challenges
- 13. EMS Operations**
 - a. Principles of Safely Operating a Ground Ambulance, Incident Management, MCI, Air Medical, Vehicle Extrication, Hazardous Materials Awareness, MCI due to Terrorism and Disaster

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TAB 4: CLINICAL/FIELD EXPERIENCE

Required



- Clinical/Field Rotation

Purpose of Section

This section provides education programs with the information necessary to maintain an agreement with a clinical training site.

Forms to Include

- Written Agreements, Clinical Rotations & Objectives

Minnesota Statutes

Education Programs

M.S. 144E.285, subd. 1(b)(6)	Maintain a written agreement with a licensed hospital or licensed ambulance service designating a clinical training site.
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Board Policy: Allowable Clinical Sites include hospitals, clinic, emergency department, ambulance, nursing homes, and doctor’s office or on standardized patients and through patient simulation if clinical site are not available.

Education Standards Definition of Standardized Patient: An individual who had been thoroughly trained to accurately simulate a real patient with a medical condition; a standardized patient plays the role of a patient for students learning patient assessment, history taking skills, communication skills, and other skills.

Education Standards Definition of Patient Simulation: An alternative to a human patient to help students improve patient assessment and management skills; a high fidelity patient simulator provides realist simulation that responds physiologically to student therapies. These simulators have realistic features such as chest that rise and fall with respirations, pupils that react to light, pulse that can be palpated, etc.

Note: EMR does not currently require clinical experience.

Reference Materials and Helpful Information



- [Appendix B – Education Standards Infrastructure](#)
- [Link to National EMS Education Standards - Pages 51-55](#)

TAB 4: CLINICAL/FIELD EXPERIENCE

Required



- Educational Program Information

Purpose of Section

This section provides education programs with the information necessary to conduct background studies in regard to direct contact and to maintain an agreement with a clinical training site.

Forms to Include

- Background Studies Required

Minnesota Statutes	
Background Studies on Licensees and Other Personnel	
M.S. 144.057, subd. 1	Individuals providing services which have direct contact, defined under section 245C.02, subdivision 11, with patients and residents in hospitals, boarding care homes, outpatient surgical centers licensed under sections 144.50 to 144.58, nursing homes and home care agencies licensed under chapter 144A, residential care homes licensed under chapter 144B, and board and lodging establishments that are registered to provide supportive or health supervision services under section 157.17.
Human Services Background Studies	
M.S. 245C.02, subd. 11	“Direct contact” means providing face-to-face care, training, supervision, counseling, consultation, or medication assistance to persons served by the program.

From the Department of Human Services website: *Who must have a background study?* People who are placed in licensed facilities’ to provide direct contact services by educational programs, temporary personnel agencies, professional service agencies and supplemental nursing services agencies.



Reference Materials and Helpful Information

- [Link to DHS – Background Study Information](#)
- [Link to NETStudy Process Information](#)



NETStudy

A web-based application that allows certain agencies to submit background studies to the Minnesota Department of Human Services, and to track the studies via Internet.

New Electronically Transmitted Study

NETStudy training now available

The Department of Human Services is now offering training on NETStudy, the web-based application used to submit background studies and receive the results online.

[NETStudy temporary access](#)

[Register for training.](#)

[Training materials](#)

[User manuals](#)

[Frequently asked questions about NETStudy.](#)

FOR FURTHER INFORMATION: Visit the web at http://www.dhs.state.mn.us/id_057547 and follow the link to "Background Studies", email the NETStudy Administrator at DHS.NETStudyAdmin@state.mn.us , or call the Division of Licensing at 651-431-6620.

[+] [Report/Rate this page](#)

Link to NETStudy Process

Information: http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_028226

For Further Information

- Regarding NETStudy

Dhs.netstudyAdmin@state.mn.us

- Statutory/procedural requirements

DHS.BackgroundStudyAdmin@state.mn.us

- Division of Licensing website
www.dhs.state.mn.us/licensing
BGS Call Center: 651-431-6620

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Clinical Behavior/Judgment

	EMR	EMT	AEMT	Paramedic
Assessment	Perform a simple assessment to identify life threats, identify injuries requiring immobilization and conditions requiring treatment within the scope of practice of the EMR: including foreign substance in the eyes and nerve agent poisoning.	<p>Perform a basic history and physical examination to identify acute complaints and monitor changes.</p> <p>Identify the actual and potential complaints of emergency patients.</p>	<p>Perform a basic history and physical examination to identify acute complaints and monitor changes.</p> <p>Identify the actual and potential complaints of emergency patients.</p>	<p>Perform a comprehensive history and physical examination to identify factors affecting the health and health needs of a patient.</p> <p>Formulate a field impression based on an analysis of comprehensive assessment findings, anatomy, physiology, pathophysiology, and epidemiology.</p> <p>Relate assessment findings to underlying pathological and physiological changes in the patient's condition.</p> <p>Integrate and synthesize the multiple determinants of health and clinical care.</p> <p>Perform health screening and referrals.</p>
Therapeutic communication and cultural competency	Communicates to obtain and clearly transmit information with an awareness of cultural differences.	Communicate in a culturally sensitive manner.	Communicate in a culturally sensitive manner.	Effectively communicate in a manner that is culturally sensitive and intended to improve the patient outcome.

From USDOT Education Standards pages 51-55

Clinical Behavior/Judgment

	EMR	EMT	AEMT	Paramedic
Psychomotor Skills	<p>Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND state Scope of Practice at this level.</p> <p>Airway and Breathing</p> <ul style="list-style-type: none"> x Basic Airway Maneuvers x Head-tilt, chin-lift x Jaw thrust x Modified chin lift x FBAO relief - manual x Oropharyngeal airway x Sellick's maneuver x Positive pressure ventilation devices such as BVM x Suction of the upper airway x Supplemental oxygen therapy x Nasal cannula x Non-rebreather mask <p>Assessment</p> <ul style="list-style-type: none"> x Manual B/P <p>Pharmacologic interventions</p> <ul style="list-style-type: none"> x Unit-dose autoinjectors (life-saving medications intended for self or peer rescue in hazardous materials situation, nerve agent antidote kit) <p>Medical/Cardiac care</p> <ul style="list-style-type: none"> x Manual CPR x AED x Assisted normal delivery <p>Trauma care</p> <ul style="list-style-type: none"> x Manual stabilization x C-spine injuries 	<p>Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND state Scope of Practice at this level.</p> <p>Airway and Breathing</p> <ul style="list-style-type: none"> x Nasopharyngeal airway x Positive pressure ventilation x Manually-triggered ventilators x Automatic transport ventilators x Supplemental oxygen therapy x Humidifiers x Partial-rebreather mask x Venturi mask <p>Assessment</p> <ul style="list-style-type: none"> x Pulse oximetry <p>Automatic B/P</p> <p>Pharmacologic interventions</p> <ul style="list-style-type: none"> x Assist patients in taking their own prescribed medications x Administration of OTC medications with medical oversight x Oral glucose for hypoglycemia x Aspirin for chest pain <p>Medical/Cardiac care</p> <ul style="list-style-type: none"> x Mechanical CPR x Assisted complicated delivery <p>Trauma care</p> <ul style="list-style-type: none"> x Spinal immobilization x Cervical collars x Seated 	<p>Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND state Scope of Practice at this level.</p> <p>Airway and Breathing</p> <ul style="list-style-type: none"> x Airways not intended for insertion into the trachea x Esophageal-tracheal x Multi-lumen airway x Tracheal-bronchial suctioning of an already intubated patient x Assessment x Blood glucose monitor <p>Pharmacologic interventions</p> <ul style="list-style-type: none"> x Establish and maintain peripheral intravenous access x Establish and maintain intraosseous access in pediatric patient x Administer (nonmedicated) intravenous fluid therapy x Sublingual nitroglycerin (chest pain) x Subcutaneous or intramuscular epinephrine (anaphylaxis) x Glucagon (hypoglycemia) x Intravenous 50% dextrose (hypoglycemia) x Inhaled beta agonists (wheezing) x Intravenous narcotic antagonist (narcotic overdose) x Nitrous oxide (pain) 	<p>Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND state Scope of Practice at this level.</p> <p>Airway and Breathing</p> <ul style="list-style-type: none"> x Oral and nasal endotracheal intubation x FBAO – direct laryngoscopy x Percutaneous cricothyrotomy x Pleural decompression x BiPAP, CPAP, PEEP x Chest tube monitoring x ETCO2 monitoring x NG/OG tube <p>Assessment</p> <ul style="list-style-type: none"> x ECG interpretation x 12-lead interpretation x Blood chemistry analysis <p>Pharmacologic intervention</p> <ul style="list-style-type: none"> x Intraosseous insertion x Enteral and parenteral administration of approved prescription medications x Access indwelling catheters and implanted central IV ports x Medications by IV infusion x Maintain infusion of blood or blood products x Blood sampling x Thrombolytic initiation x Administer physician approved medications <p>Medical/Cardiac care</p> <ul style="list-style-type: none"> x Cardioversion

Clinical Behavior/Judgment

	EMR	EMT	AEMT	Paramedic
	<ul style="list-style-type: none"> x Bleeding control x Emergency moves x Eye irrigation 	<ul style="list-style-type: none"> x Longboard x Rapid extrication x Splinting x Extremity x Traction x PASG x Mechanical patient restraint x Tourniquet 		<ul style="list-style-type: none"> x Manual defibrillation x Transcutaneous pacing x Carotid massage Trauma care x Morgan lens
				Anticipate and prospectively intervene to improve patient outcome.
Professionalism	Demonstrate professional behavior including: but not limited to, integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communications, time-management, teamwork/diplomacy, respect, patient advocacy, and careful delivery of service.	Demonstrate professional behavior including: but not limited to, integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communications, time-management, teamwork/diplomacy, respect, patient advocacy, and careful delivery of service.	Demonstrate professional behavior including: but not limited to, integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communications, time-management, teamwork/diplomacy, respect, patient advocacy, and careful delivery of service.	Is a role model of exemplary professional behavior including: but not limited to, integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communications, time-management, teamwork/diplomacy, respect, patient advocacy, and careful delivery of service.
Decision Making	Initiates simple interventions based on assessment findings.	Initiates basic interventions based on assessment findings intended to mitigate the emergency and provide limited symptom relief while providing access to definitive care	Initiates basic and selected advanced interventions based on assessment findings intended to mitigate the emergency and provide limited symptom relief while providing access to definitive care	Performs basic and advanced interventions as part of a treatment plan intended to mitigate the emergency, provide symptom relief, and improve the overall health of the patient. Evaluates the effectiveness of interventions and modifies treatment plan accordingly.
Record Keeping	Record simple assessment findings and interventions	Report and document assessment data and interventions.	Report and document assessment findings and interventions.	Report and document assessment findings and interventions. Collect and report data to be used for epidemiological and research purposes.

Clinical Behavior/Judgment

	EMR	EMT	AEMT	Paramedic
Patient Complaints	Perform a patient assessment and provide pre-hospital emergency care for patient complaints: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, apnea, back pain, behavioral emergency, bleeding, cardiac arrest, chest pain, cyanosis, dyspnea, eye pain, GI bleeding, hypotension, multiple trauma, pain, paralysis, poisoning, shock, and stridor/drooling.	Perform a patient assessment and provide pre-hospital emergency care and transportation for patient complaints: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, anxiety, apnea, ataxia, back pain, behavioral emergency, bleeding, cardiac arrest, cardiac rhythm disturbances, chest pain, constipation, cyanosis, dehydration, diarrhea, dizziness/vertigo, dysphasia, dyspnea, edema, eye pain, fatigue, fever, GI bleeding, headache, hematuria, hemoptysis, hypertension, hypotension, joint pain/swelling, multiple trauma, nausea/vomiting, pain, paralysis, pediatric crying/fussiness, poisoning, rash, rectal pain, shock, sore throat, stridor/drooling, syncope, urinary retention, visual disturbances, weakness, and wheezing.	Perform a patient assessment and provide pre-hospital emergency care and transportation for patient complaints: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, anxiety, apnea, ataxia, back pain, behavioral emergency, bleeding, cardiac arrest, cardiac rhythm disturbances, chest pain, constipation, cyanosis, dehydration, diarrhea, dizziness/vertigo, dysphasia, dyspnea, edema, eye pain, fatigue, fever, GI bleeding, headache, hematuria, hemoptysis, hypertension, hypotension, joint pain/swelling, multiple trauma, nausea/vomiting, pain, paralysis, pediatric crying/fussiness, poisoning, rash, rectal pain, shock, sore throat, stridor/drooling, syncope, urinary retention, visual disturbances, weakness, and wheezing.	Perform a patient assessment, develop a treatment and disposition plan for patients with the following complains: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, anxiety, apnea, ascites, ataxia, back pain, behavioral emergency, bleeding, blood and body fluid exposure, cardiac arrest, cardiac rhythm disturbances, chest pain, congestion, constipation, cough/hiccough, cyanosis, dehydration, dental pain, diarrhea, dizziness/vertigo, dysmenorrhea, dysphasia, dyspnea, dysuria, ear pain, edema, eye pain, fatigue, feeding problems, fever, GI bleeding, headache, hearing disturbance, hematuria, hemoptysis, hypertension, hypotension, incontinence, jaundice, joint pain/swelling, malaise, multiple trauma, nausea/vomiting, pain, paralysis, pediatric crying/fussiness, poisoning, pruritus, rash, rectal pain, red/pink eye, shock, sore throat, stridor/drooling, syncope, tinnitus, tremor, urinary retention, visual disturbances, weakness, and wheezing.

Clinical Behavior/Judgment

	EMR	EMT	AEMT	Paramedic
Scene Leadership	Manage the scene until care is transferred to an EMS team member licensed at a higher level arrives.	Entry-level EMTs serve as an EMS team member on an emergency call with more experienced personnel in the lead role. EMTs may serve as a team leader following additional training and/or experience.	Serve as an EMS team leader of an emergency call.	Function as the team leader of a routine, single patient advanced life support emergency call.
Scene Safety	Ensure the safety of the rescuer and others during an emergency.	Ensure the safety of the rescuer and others during an emergency.	Ensure the safety of the rescuer and others during an emergency.	Ensure the safety of the rescuer and others during an emergency.

Allowable Clinical Sites: include hospitals, clinic, emergency department, ambulance, nursing homes, and doctor's office

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**CLINICAL / FIELD ROTATION TRAINING
EMERGENCY CARE COURSE FOR EMERGENCY MEDICAL TECHNICIANS**

This form must be completed and kept on file for audit and review by EMSRB staff. The clinical / field rotations are in addition to the required didactic education for the U.S.D.O.T National EMS Education Standards for EMT and shall be completed prior to psychomotor and CBT examinations for National Registry and State certification as an EMT.

STUDENT'S NAME: _____

EDUCATION PROGRAM: _____

COURSE LOCATION: _____

The U.S.D.O.T. National EMS Standards requires that each student have patient interactions in a clinical or field setting with experienced preceptors. The education program director or education program medical director must establish appropriate relationships with various clinical / field sites to assure adequate contact with patients.

Each student should interview and assess a minimum of ten (10) patients.

As clinical / field preceptor for the above training program, I verify the above student has completed the patient interviews and assessments as indicated below and met the clinical / field rotation objectives provided by the education program. I have completed, and filed with the education program, an evaluation of the student's performance during the clinical / field rotation.

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

Clinical Site: _____ Clinical/Field Preceptor: _____ # of pt. contacts _____ Date: _____

As education program director I verify the above student has completed the requirements of the clinical / field rotation in accordance with the current U.S.D.O.T. National EMS Standards. Documentation of the student's clinical / field rotation experiences are kept on file for audit purposes.

Education Program Director

Date

"To protect the public's health and safety through regulation and support of the EMS system"

Clinical Requirements for EMT Education

Minnesota Statutes, section 144E.285, Subdivision 1 (b) (2) for each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to EMT, AEMT, or paramedic education.

The following are the requirements for clinical/field rotations and training in accordance with the National EMS Education Standards:

- Students should observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care
- Students must perform ten patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc. or on standardized patients if clinical settings are not available.

Clinical/Field Rotations U.S.D.O.T. National EMS Education Standards

In addition to the required didactic and psychomotor instruction, this course requires that the student have patient interactions in a clinical setting. Ideally, areas that have access to an Emergency Medical Services system should send students into the field with experienced preceptors. The student must participate in and document patient contacts in a field experience approved by the medical director and program director. Students should observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care. Students must perform a minimum of ten patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc. or on standardized patients if clinical settings are not available. The program director or medical director must establish appropriate relationships with various clinical sites to assure adequate contact with patients.

The student should record the patient history and assessment on a pre-hospital care report just as he/she would if he/she were interacting with this patient in a field setting. The pre-hospital care report should then be reviewed by the Primary Instructor to assure competent documentation practices in accordance with the minimum data set. Regardless of the clinical educational system, the program must establish a feedback system to assure that students have acted safely and professionally during their training. Students should be graded on this experience.

Students who have been reported to have difficulty in the clinical or field setting must receive remediation and redirection. Students should be required to repeat clinical or field setting experiences until they are deemed competent within the goals established by the Program Director.

TAB 5: STUDENT INFORMATION

Required



- Student Criteria

Purpose of Section

This section provides education programs admission criteria information for students.

Forms to Include

- Admission Criteria
- Enrollment Forms
- Student Success Ratio

Minnesota Statutes	
Education Programs	
<p>M.S. 144E.285, subd. 1(b)(1)(iv)</p> <p>M.S. 144E.285, subd. 1(b)(7)</p>	<p>Admission criteria for students.</p> <p>Retain documentation of program approval by the board, course outline, and student information.</p>

Reference Materials and Helpful Information



- [Link to NREMT Entry Requirements](#)
- [US Department of Education- FERPA; Family Education Rights and Privacy Act](#) applies to schools that receive funds under an applicable program of the U.S. Department of Education

TAB 5: EDUCATIONAL PROGRAM PASS RATES

Required



- Student Criteria

Purpose of Section

This section provides education programs admission criteria and required pass rate information for students.

Forms to Include

- Admission Criteria
- Enrollment Forms
- Student Success Ratio

Minnesota Statutes	
Education Programs	
M.S. 144E.285, subd. 1 (b)(10)	Maintain a minimum average yearly pass rate as set by the board on an annual basis. The pass rate will be determined by the percent of candidates who pass the exam on the first attempt.

Board Policy: The 2014 minimum average, pass rate required of education programs is 70%, based on NREMT first attempt pass rates.

Note: Pass rates are determined by the National Registry of EMTs (NREMT) Pass/Fail Rate Report at the NREMT web-site (www.nremt.org) under your program login and Reports. For additional questions about this report please contact the NREMT.

Student Enrollment Form (EMR, EMT)

*** Required Information**

*Last Name:		*First Name:		*Middle Initial:	
*Street Address:		*City:		*State:	*Zip:
*Phone Number:	*Email Address:			Social Security Number:	
*EMSRB Registration/Certification Number:				Special Instructions:	
*Name of Education Program:			*Program #		
*Date(s) of Course:					
*Practical Exam Date:					
*Applicant's Signature:			Date:		
* Educational Program Coordinator's Signature:			Date:		
Program Office Use:					
Practical Skills Exam:	Pass	Fail	Date	Comments	
Pt. Assessment - Trauma					
Pt. Assessment - Medical					
Oxygen Administration by Non-rebreather mask					
BVM Ventilation – Apneic Adult Pt.					
Cardiac Arrest Management/AED					
Spinal Immobilization - Supine					
Random (specify)					
Remediation provided? Yes / No If YES - Please Specify:					
Final Written Exam Offered:		Yes/No		Score	
Educational Program Checklist:					
Completed EMSRB e-licensing Applications:				Yes / No	
Education Program Verification (Third Party Confirmation):				Yes / No	
Prerequisite : NIMS - (ICS 100 & ICS 700)				Yes / No	
Prerequisite: HAZMAT				Yes / No	

Education Programs must have all students complete this form and keep it on file with course records. This form should not be submitted to the EMSRB unless specifically requested by EMSRB certification staff.

"To protect the public's health and safety through regulation and support of the EMS system"

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Sample Admission Criteria Information Only

Minimum suggested criteria to be included in EMS Program Admission Criteria Policy for Emergency Medical Responder (EMR) and Emergency Medical Technician (EMT) courses.

MS § 144.285, subdivision 1(b) (1) (iv)

<i>Sample Admission Criteria</i>	EMR – Initial	EMR – Refresher	EMT – Initial	EMT – Refresher
<i>Student Age:</i>	Suggested: Student is 16 Years of age at the time of course start date.		Student must be 18 years of age at the time of National Registry* cognitive exam for Minnesota certification.	
<i>Course Prerequisites</i>	As defined by Education Program and National EMS Education Standards	As defined by Education Program & has current EMSRB registration as an EMR or is within one year of the registration expiration date. Students that do not meet these criteria must take the initial EMR course.	As defined by Education Program	As defined by Education Program & has current EMSRB certification as an EMT or is within four (4) years of the registration expiration date. Students that do not meet these criteria must take the initial EMT course.
<i>Student Proficiencies *</i>	Reading, Writing and Oral Communication	Reading, Writing and Oral Communication	Reading, Writing and Oral Communication	Reading, Writing and Oral Communication
<i>Student Abilities</i>	Consider abilities necessary for successful course completion.	Consider abilities necessary for successful course completion.	Consider abilities necessary for successful course completion..	Consider abilities necessary for successful course completion.

Key:

EMR = Emergency Medical Responder

EMT = Emergency Medical Technician

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Minnesota EMR and EMT REGISTRATION/CERTIFICATION INFORMATION (will not change with the transition)

Minnesota Registration/Certification Information	EMR Initial	EMR Refresher	EMT Initial	EMT Refresher
Course Completion Information				
CPR Certification approved by Medical Director	Required	Required	Required	Required
Complete Course through MN Approved EMS Education Program	Required	Required	Required	Refresher or 48 hours CEU
Continuing Education (M.S. 144E.28 subd. 7)	N/A	N/A	N/A	
Exam Requirements				
NREMT Written	Optional	N/A	Required	N/A
Psychomotor / Practical Exam	Standards Recommended	Standards Recommended	Required	Required
Certification Information				
Application completed in MN E-licensing	Required	Required	Required	Required
Verified Credentials through NREMT	N/A	N/A	Required	N/A
National Reciprocity Information				
NREMT Verification	N/A	N/A	Required	N/A
Complete MN E-licensing application	N/A	N/A	Required	N/A
Military Requirements	Contact your State EMS Office			

Minnesota Certification vs. National Registration (NREMT) - [Link to Definitions Document](#)

All EMS personnel with expiration dates of 2015 and 2016, must attend a transition course in their next refresher through a Minnesota approved EMS Education Program. March 31, 2014 expires must transition in 2016.

The NREMT Written and Psychomotor Exams are the Board approved exams for Minnesota certification at the EMT level.

NREMT Information can be obtained directly from the National Registry at www.nremt.org or by calling 614-888-4484

ADVANCED CERTIFICATION INFORMATION

Minnesota Advanced Certification Information	AEMT Initial	AEMT Refresher	Paramedic Initial	Paramedic Refresher	Community Paramedic Initial	Community Paramedic Refresher
Course Completion Information						
Complete Course through MN Approved EMS Education Program	Required	N/A	Required	N/A	Required	N/A
Continuing Education (M.S. 144.28 subd. 7)	N/A	48 Hours *	N/A	48 Hours *	N/A	48 Hours *
CPR Certification approved by Medical Director	Required	Required	Required		N/A	N/A
ACLS approved by Medical Director	N/A	N/A	Required	Required	Required	Required
Currently Certified as MN Paramedic	N/A	N/A	N/A	Required	Required	
Minimum of 2 years working experience as Paramedic	N/A	N/A	N/A	N/A	Required	
CEU specific to discipline						12 hours
Exam Requirements						
NREMT Written	Required	N/A	Required	N/A	Required	N/A
Psychomotor / Practical Exam	Required	N/A	Required	N/A	Required	N/A
Certification Information						
Application completed in MN E-licensing	Required	Required	Required	Required	Required	Required
Verified Credentials through NREMT	Required	N/A	Required	N/A	Required	N/A
National Reciprocity Information						
NREMT Verification	Required	N/A	Required	N/A	Required	N/A
Complete MN E-licensing	Required	N/A	Required	N/A	Required	N/A
Military	Please contact your State EMS Office					

* 48 Hours of Continuing Education may be obtained by completing a 24 hour EMT refresher course plus continuing education or by completing a 48 hour refresher at the applicable certification level.

The NREMT written and Psychomotor Exams are the Board approved exams for Minnesota certification for AEMT and Paramedic.

Minnesota Certification vs. National Registration (NREMT) - [Link to Definitions Document](#)

NREMT Information can be obtained directly from the National Registry at:

www.nremt.org or by calling 614-888-4484

TAB 6: OPERATIONAL PROCEDURES

Required



- Licensing Application Documents

Purpose of Section

This section provides education programs with the requirements for students and facilitators.

Forms to Include

- Instructor/Student Ratio
- Instructor Recruitment
- Instructor Orientation
- Instructor Performance Evaluation
- Student Performance Criteria
- Student Evaluation
- Student Remediation
- Student Interview

Minnesota Statutes

Education Programs

M.S. 144E.285, subd.1 (b)(5)	Have at least one instructor for every ten students at the practical skill stations.
------------------------------	--

Reference Material and Helpful Information



- [Link to NHTSA National EMS Instructor Guidelines-2002](#)
- [Link to NASMSO Education Implementation Planning Toolkit](#)

Editable Versions of the sample forms in this section are available on the EMSRB website.

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Student Interview Form

The following form should be filled out by the Education Program Coordinator & Course Instructors at the midpoint and end of the course at a minimum. The purpose of this document is to improve program & student outcome and record any shortcomings of either the program or the student.

Course: _____

Student: _____ Date: _____

Instructor / Coordinator:

General Program Overview:

Attendance: Number of class days to this point _____ Days Missed _____

Classroom Participation:

Psychomotor Participation and Competency Progression:

Student Comments:

Instructor Comments:

Instructor / Coordinator Signature: _____

Student Signature: _____ Date: _____

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Student Remediation Form

Instructors must fill out this form if a student is having difficulty in the educational process. This includes any of the didactic, psychomotor or clinical portions of the program. This form is also to be used to document any student or classroom conflict. Once completed, contact the Program Coordinator as soon as possible.

Student: _____ Date: _____

Course Name and Location:

Program Coordinator Notified /Date:

Describe the Area of Difficulty or Conflict:

Didactic:

Psychomotor Skills:

Exam/Quiz Scores:

Classroom Conflict:

Clinical/Field Experience:

Suggested Action:

Action Completed - Date: _____

Instructor Signature: _____

Program Coordinator Signature: _____

(This page is left blank intentionally)

TAB 7: E-LICENSING

Required



- Licensing Application Documents

Purpose of Section

This section provides education programs with the information needed to use the E-Licensing system.

Forms to Include

- Course notification
- Course Completion/Third Party Confirmation
- Instructions for renewal.

Minnesota Statutes

Education Programs

M.S. 144E.285, subd. 1(b)(8)

Notify the board of the stating date of a course prior to the beginning of a course.



Reference Material and Helpful Information

- [Link to Minnesota E-License System](#)

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Posting Courses Offered

Login to the MN E-license system with your education program username and password

Prior course notification must be submitted for all EMT level and above courses.

This is voluntary but recommended for EMR.

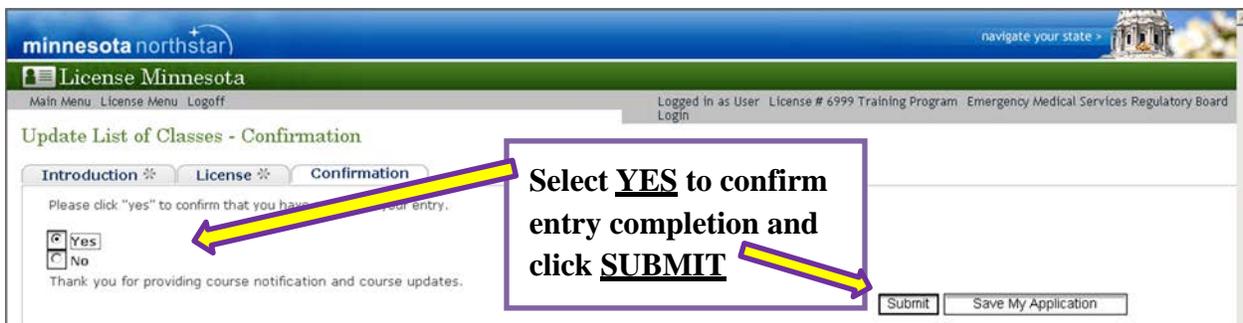
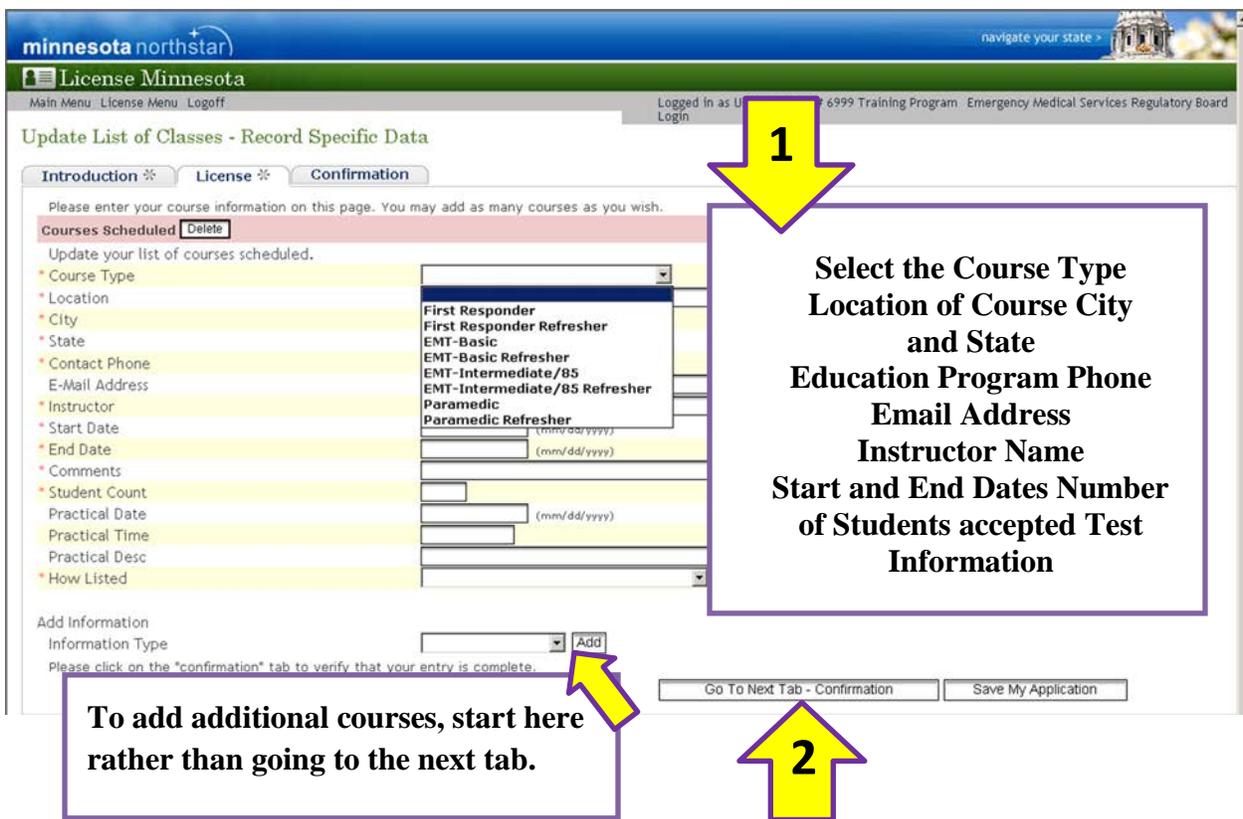
The screenshot shows the 'License Minnesota' website. At the top, there is a blue header with the 'minnesota northstar' logo and a 'navigate your state >' link. Below the header is a green bar with the text 'License Minnesota'. The main content area is white and contains a 'Main Menu' section with a 'Logoff' link and a 'Logged in as User Login' status. The main menu includes a welcome message and instructions on how to manage or renew a license. There are two columns of links: 'Getting Started...' with links for 'Apply for an Exam/New License', 'Activate An Existing License', 'Transaction History', and 'Update online profile (change password)'; and 'Manage-Renew My Licenses' with a link for 'Training Program #6999'. A purple box highlights the 'Training Program #6999' link with the text 'Click on your Education Program' and a downward-pointing arrow.

The screenshot shows the 'License Menu' section of the website. The header is the same as in the previous screenshot. The main content area is white and contains a 'License Menu' section with a 'Main Menu Logoff' link and a 'Logged in as User License # 6999 Training Program Emergency Medical Services Regulatory Board Login' status. The license menu includes instructions on how to perform transactions and a list of 'Available Transactions'. A purple box highlights the 'Update List of Classes' link with the text 'Update List of Classes' and a left-pointing arrow. To the right of the main content area, there is a box displaying 'License Status: Active' and 'License Expiration Date: 05/31/2011 (mm/dd/yyyy)'.

The screenshot shows the 'Update List of Classes - Introduction' page. The header is the same as in the previous screenshots. The main content area is white and contains an 'Introduction' section with a 'License Menu Logoff' link and a 'Logged in as User License # 6999 Training Program Emergency Medical Services Regulatory Board Login' status. The introduction text explains the purpose of the 'license' tab. At the bottom of the page, there are two buttons: 'Go To Next Tab - License' and 'Save My Application'. A yellow arrow points to the 'Go To Next Tab - License' button, which is highlighted with a purple box.



Complete all information as required and noted with *



SETTING UP THIRD PARTY CONFIRMATION

Login to the MN E-licensing system using your education program username and password.

The screenshot shows the 'License Minnesota' main menu. The user is logged in as 'User Login'. The page includes a 'Main Menu' section with a welcome message and instructions. A 'Getting Started...' section contains links for 'Apply for an Exam/New License', 'Activate An Existing License', 'Transaction History', and 'Update online profile (change password)'. A 'Manage-Renew My Licenses' section is visible, with a red box highlighting the 'Training Program #6999' link and the text 'Click on your education program' with a red arrow pointing down.

The screenshot shows the 'License Menu' page. The user is logged in as 'User License # 6999 Training Program Emergency Medical Services Regulatory Board Login'. The page includes a 'License Menu' section with instructions. A 'License Status' box shows 'Active' and 'License Expiration Date: 05/31/2011 (mm/dd/yyyy)'. The 'Available Transactions' section lists several options, with a red box highlighting 'Maintain Web Confirmation Parameters' and the text 'Select Maintain Web Confirmation Parameters' with a red arrow pointing left.

The screenshot shows the 'Maintain Web Confirmation Parameters - Introduction' page. The user is logged in as 'User License # 6999 Training Program Emergency Medical Services Regulatory Board Login'. The page includes an 'Introduction' section with text explaining the '3rd Party Confirmation' process. At the bottom, there are two buttons: 'Go To Next Tab - License' (highlighted with a red box) and 'Save My Application'.

minnesota northstar
License Minnesota
Main Menu License Menu Logoff
Logged in as User: License # 6999 Training Program Emergency Medical Services Regulatory Board Login
navigate your state >

Maintain Web Confirmation Parameters - Record Specific Data

Introduction ✖ **License** ✖ **Confirmation**

Please click "Yes" on both buttons if you wish to use "3rd Party Confirmation"

Third Party Confirmation Parameters

Third Party Confirmation Parameters

* I would like to receive weekly e-mail reports of exam results that require my input. Yes No

* Perform confirm Yes No

You are now ready for the next step.

Select Yes to receive weekly email reports of exam results requiring attention and confirmation.

minnesota northstar
License Minnesota
Main Menu License Menu Logoff
Logged in as User: License # 6999 Training Program Emergency Medical Services Regulatory Board Login
navigate your state >

Maintain Web Confirmation Parameters - Confirmation

Introduction ✖ **License** ✖ **Confirmation**

By clicking "Yes", you are confirming that you want to use the "3rd Party Confirmation" option.

Yes No

Please submit to complete the process.

Select Yes to use the 3rd party system

Click Submit to complete the process

CONFIRMING EXAM RESULTS

Login to the MN E-license system with your education program username and password

minnesota northstar
License Minnesota
Logoff
Main Menu
Welcome to One-Stop Licensing!
If you have an existing license and wish to manage/renew your license, you must first "activate" your record.
Once activated, the license will appear on the right hand side of the screen.
Getting Started...
Apply for an Exam/New License
Activate An Existing License
Transaction History
Update online profile (change password)
Manage-Renew My Licenses
Click on your Education Program
Training Program #6999
Applications To Pay For

minnesota northstar
License Minnesota
Main Menu Logoff
Logged In as User License # 6999 Training Program Emergency Medical Services Regulatory Board Login
License Menu
Select the transaction you wish to perform.
Press "Back" to return to the main menu.
Available Transactions
New Application
Change of Address
Update Instructors
Update List of Classes
Maintain Web Confirmation Parameters
Confirm Exam Results
Renew Training Program
License Status: Active
License Expiration Date: 05/31/2011 (mm/dd/yyyy)

minnesota northstar
License Minnesota
Main Menu License Menu Logoff
Logged In as User License # 6999 Training Program Emergency Medical Services Regulatory Board Login
Confirm Exam Results - Introduction
Introduction Third Party Confirmations Confirmation
Welcome to 3rd party confirmation of exam results. If you wish to use a paper-less verification process for course completion for First Responder Initial, First Responder Refresher, and EMT-Basic Refresher courses, this page is where to start.
Please click on the "Third Party Confirmations" tab to continue.
Go To Next Tab - Third Party Confirmations Save My Application

minnesota northstar
License Minnesota
Main Menu License Menu Logoff
Logged in as User License # 6999 Training Program Emergency Medical Services Regulatory Board Login

**A list of students who have completed their application will appear here.
Please use the parameters below as guidance.**

Confirm Exam Results - Electronic Approval of Course Completion

Introduction * Third Party Confirmations Confirmation

Students must complete either the First Responder Initial Application, Renew First Responder Application or Renew EMT-Basic Application to appear on this list. Those that are expired will need to have a permit form filled out and sent to the EMSRB office.

The **Yes** option approves the card, assuming there aren't any other issues with the application.

The **No** option should be used only if the student is not going to pass the course. Coordinators cannot re-enter this section to change a "no" to "yes".

The **Don't Know** option should be used only if you don't know the student.

The **Yes, don't auto-approve** option requires a follow up email sent to Staff (currently Lauren) with special directions regarding the student. If staff are not contacted, no card will be issued.

Go To Next Tab - Confirmation Save My Application

YES – will approve the Course Completion and automatically issue a card.

NO – Use this ONLY IF the student DID NOT PASS THE COURSE

DON'T KNOW – If the student didn't take their course through your education program.

Go to the Next Tab and Confirm

You may also now check off this a complete on the Student Enrollment Form

Instructions for Renewal



Go to www.emsrb.state.mn.us

Click Here →

Enter username and password

**Forgot your username?
(Retrieve your User ID.)**

**Didn't receive the User ID –
Contact EMSRB Specialist for
your region**

Tom Frost
Holly Hammann-Jacobs
Robert Norlen
Mary Zappetillo
Or Call: 1-800-747-2011

Login

User name:

Password:

First time using the s

Member Support

- Reset My Password
- Retrieve My User ID
- Need Help?

View the [Tennessee Warning Notice](#)

**Any difficulties in this step should be directed to
EMSRB Staff.**

DO NOT REGISTER AS A FIRST TIME USER

Main Menu

Welcome to One-Stop Licensing!

If you have an existing license and wish to manage/renew your license, you must first "activate" your record.

Once activated, the license will appear on the right hand side of the screen.

Getting Started...

- [Apply for an Exam/New License](#)
- [Activate An Existing License](#)
- [Transaction History](#)
- [Update online profile \(change password\)](#)

Manage-Renew My Licenses

[EMS Personnel; EMT-Basic :](#)

↑ **Click on your License Number**

License Menu

Select the transaction you wish to perform.

Press "Back" to return to the main menu.

Available Transactions

- [New Application](#)
- [Complete Disclosure Unrelated to Renewal](#)
- [Change of Address](#)
- [Upgrade EMT-Basic to EMT-Paramedic](#)
- [Order Duplicate License](#)
- [Renew EMT-Basic Certification](#)

Available Documents

- [What to Expect After Application Submission](#)

Select

Renew EMT-Basic Certification

Or

First Responder Renewal

Renew EMT-Basic Certification - Introduction

Welcome to the EMS Regulatory Board's EMT-Basic Certification Renewal process.

Introduction Identification Contacts License Training Confirmation

The information requested will be used to determine your qualifications for renewal of your current certification. The information is public data. If you prefer not to make your home address available to the public, you may designate another address as your address of record. You are legally required to provide true information. Refusal to supply the requested information may result in the denial of your certification. Falsification or misrepresentation of information may be used by the EMSRB as a basis for disciplinary action.

Minnesota statute provides that you may renew your certificate by successfully completing a 24-hour EMT-Basic Refresher course at an EMSRB approved training program and successfully completing a course in cardiopulmonary resuscitation that is approved by the EMSRB or your medical director.

Instead of using the refresher course for certification renewal, you may choose to use 48 hours of continuing education. This option is outlined on the Attachments Tab.

Go To Next Tab - Identification

Save My Application

Update your information next under the Identification and contacts tabs.

Verify mailing address is correct –

Reasons complete the following:

Disclosure Statement

- * Indicate Certification Level
- * Have you been convicted or pled guilty or nolo contendere to a Felony?
- * Have you been convicted or pled guilty or nolo contendere to a Gross Misdemeanor?
- * Have you been convicted or pled guilty or nolo contendere to a Misdemeanor?
- * Has the Minnesota Dept. of Health or Minnesota Dept. of Human Services determined that you mistreated a vulnerable adult or child?
- * Has any other Health-related Licensing Authority denied, revoked, suspended, or placed conditions on your right to practice?

Add Information

Information Type: Add

Required fields are identified by *

If you answered "Yes" to one of the questions on the Disclosure Statement, you are required to use the Add Another Record control and Add button to provide information about any applicable convictions.

Go To Next Tab - Training

Save My Application

Renew EMT-Basic Certification - Training

Welcome to the renewal page for EMT-Basic certification. Many EMSRB approved training programs are using a paperless verification process of course completion. Your completion of this renewal information will allow quicker processing of your certification.

Introduction Identification Contacts License Training Confirmation

The requirement for renewing an EMT-Basic certification is the completion of a 24-hour EMT-Basic Refresher course at a
or
completion of 48 hours of continuing education in the six modules of the National Standard EMT-Basic 1994 Curriculum (with the remaining twenty-four in any modules),
or
a renewed National Registry of EMTs certification. Whichever option is used requires that your CPR certification be current.

If you are using the continuing education option or a renewed National Registry of EMTs certification to renew your Minnesota application, selecting "continuing education" for the Licensed Training Program and the submission date of your documentation or submit it by mail or fax (651-201-2812).

Application Course Information

Please provide the following information to support this application.

* Licensed Training Program

* Course Code

* Test Date

Affiliation

You are now ready for the next step.

Go To Next Tab - Confirmation

Save My Application

Enter Education/Training Program
Course Code/Type
Test Date

Renew EMT-Basic Certification - Confirmation

Please confirm that the information below is correct.

Introduction Identification Contacts License Training Confirmation

By submitting this application, I affirm that I have completed, or am in the process of completing, a 24-hour EMT-Basic Refresher course at an EMSRB approved training program and have successfully completed a course in cardiopulmonary resuscitation that is approved by the board or my medical director; or have completed 48 hours of continuing education in EMT programs that are consistent with the United States Department of Transportation National Standard Curriculum or its equivalent as approved by the board or my medical director, have passed a practical skills exam at an EMSRB approved training program, and have successfully completed a course in cardiopulmonary resuscitation approved by the board or my medical director.

I affirm that all information is true and complete to the best of my knowledge. I understand that all statements made on this application are subject to review and verification. I have read the Disclosure Statement notice.

Yes
 No

Submit

Save My Application

Confirmation will be printable at the end of the application and emailed to your email address. This is a "do not reply" formatted email, please check your junk mail if you do not receive notification.

TAB 8: APPENDICES

[Appendix A](#) – Instructional Aids and Equipment

[Appendix B](#) – Educational Infrastructure

[Appendix C](#) – Useful Links

[Appendix D](#) – Minnesota Statutes and Rules related to
Education Programs

[Appendix E](#) – Psychomotor Exam

[Appendix F](#) – Forms

[Appendix G](#) – AEMT/Paramedic/Community Paramedic
Information

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APPENDIX A

Instructional Aids and Equipment List

Forms to Include

- Classroom/Office Space and Equipment Inventory

Minnesota Statutes

Education Programs

144E.285, subd. 1

Materials and equipment to be used.

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INSTRUCTIONAL AIDS AND EQUIPMENT

(MS 144E.285 subd 1(b)(1)(v))

Classroom/Office

- Didactic Classroom Space
- Practical Skills Practice Area
- Educational Aids (AV equipment, PowerPoint, computer(s))

Personal Protective Equipment: gloves, masks, gowns, eye protection

- Sufficient amounts for student/candidate use

Mechanical Aids to Breathing

- Intubation Manikin
- O2 Cylinder (2)
- Oxygen Regulator (2)
- O2 Delivery devices (NRM, nasal cannula, connection tubing – adult and pediatric sizes)
- Bag-Valve-Mask Device with reservoir (adult, child, infant)
- Oropharyngeal/Nasopharyngeal Airways (various sizes including pediatric)
- Supraglottic Airway – Combitube[®], PTL[®] or King LT[®]
- Suction Device (mechanical or electric; tubing, rigid & flexible catheters, sterile water)
- Tongue Blade

CPR Equipment

- Manikins (adult, child, infant & supply of disposable parts)
- Manikin Cleaning Supplies
- AED Trainer(s) (with current AHA guidelines)
- Mouth-to-Barrier device

Patient Assessment & Vital Signs:

- BP cuffs (2)
- Stethoscope (3 regular, 1 training)
- Penlight (2)
- Moulage Kit or similar substitute (for psychomotor evaluation purposes)
- Outer garments to cut away (for psychomotor evaluation purposes)
- Scissors (2)
- Blankets (4)
- Tape (4)
- Watch with second hand (1)

Spinal Injury Management Equipment

- Long Spine Board with securing straps
- Short Spine Board with securing straps or Vest-type device
- Head Immobilization device
- Cervical Collars (various sizes)
- Padding (towels, cloths, etc)
- Armless chair (for psychomotor evaluation purposes)

Splinting & Bandaging Equipment

- Rigid Splint materials (various sizes: board, air, vacuum, commercial)
- Traction Splint
- Commercial Tourniquet
- Dressings & Bandages (various: Cravats (6), Kling, Kerlix, etc (2ea), bleeding, burn)

Enrichments (please list any additional)

- Extrication (various extrication tools & supplies)
- Moulage
- Other:

Advanced Emergency Medical Technician

- Blood Glucose Monitor
- IV Infusion
 - Infusion arm
 - IV solutions (need a selection but may be expired)
 - Administration sets (need a selection but must have microdrip tubing (60gtts/cc)
 - IV catheters (need a selection)
 - Tourniquets, alcohol preps, gauze pads (2x2, 4x4), tape
 - Approved sharps container
- IO Infusion
 - Intraosseous infusion manikin (extra tibias)
 - IV solutions
 - Administration sets
 - IV extension sets or 3 way stopcocks
 - Intraosseous needles (Jamshidi[®], drill or spring loaded type)
 - Alcohol preps, gauze pads (2x2, 4x4), tape, bulky dressings
 - Syringes (various sizes including 10, 20 & 35 mL)
 - Approved sharps container
- Medication Administration
 - Nebulizer administration sets
 - Prefilled medications (atropine, epinephrine 1:10,000, naloxone, dextrose 50%, plus others)
 - Syringes & needles various sizes to include 1,3 or 5, 10,20 & 35mL)

APPENDIX B

Educational Infrastructure

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Educational Infrastructure

	EMR	EMT	AEMT	Paramedic
Educational Facilities	<ul style="list-style-type: none"> • Facility sponsored or approved by sponsoring agency • ADA compliant facility • Sufficient space for class size • Controlled environment 	Same as Previous Level	Same as Previous Level	<ul style="list-style-type: none"> • Reference Committee on Accreditation for EMS Professions (CoAEMSP) <i>Standards and Guidelines</i> (www.coaemsp.org)¹
Student Space	<ul style="list-style-type: none"> • Provide space sufficient for students to attend classroom sessions, take notes and participate in classroom activities • Provide space for students to participate in kinematic learning and practice activities 	Same as Previous Level	Same as Previous Level	
Instructional Resources	<ul style="list-style-type: none"> • Provide basic instructional support material • Provide audio, visual, and kinematic aids to support and supplement didactic instruction 	Same as Previous Level	Same as Previous Level	
Instructor Preparation Resources	<ul style="list-style-type: none"> • Provide space for instructor preparation • Provide support equipment for instructor preparation 	Same as Previous Level	Same as Previous Level	
Storage Space	<ul style="list-style-type: none"> • Provide adequate and secure storage space for instructional materials 	Same as Previous Level	Same as Previous Level	

¹ The *National EMS Education Agenda for the Future: A Systems Approach* calls for national accreditation of Paramedic programs. CoAEMSP is currently the only national agency that offers EMS paramedic education program accreditation; it is used or recognized by most States. While the CoAEMSP *Standards and Guidelines* are adopted for the Education Infrastructure section, this does not itself require the program to be CoAEMSP accredited. Recognition of national accreditation is the responsibility of each State.

Educational Infrastructure

	EMR	EMT	AEMT	Paramedic
Sponsorship	<ul style="list-style-type: none"> • Sponsoring organizations shall be one of the following: • Accredited educational institution, or • Public safety organization, or • Accredited hospital, clinic, or medical center, or • Other State approved institution or organization 	Same as Previous Level	Same as Previous Level	
Programmatic Approval	<ul style="list-style-type: none"> • Sponsoring organization shall have programmatic approval by authority having jurisdiction for program approval (State) 	Same as Previous Level	Same as Previous Level	
Faculty	<p>The course primary instructor should</p> <ul style="list-style-type: none"> • be educated at a level higher than he or she is teaching; however, as a minimum, he or she must be educated at the level he or she is teaching • Have successfully completed an approved instructor training program or equivalent 	Same as Previous Level	Same as Previous Level	
Medical Director Oversight	<ul style="list-style-type: none"> • Provide medical oversight for all medical aspects of instruction 	Same as Previous Level	Same as Previous Level	

Educational Infrastructure

	EMR	EMT	AEMT	Paramedic
Hospital/Clinical Experience	<ul style="list-style-type: none"> • None required at this level 	<ul style="list-style-type: none"> • Students should observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care. Students must perform ten patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc. or on standardized patients if clinical settings are not available. 	<ul style="list-style-type: none"> ▪ The student must demonstrate the ability to safely administer medications (the student should safely, and while performing all steps of each procedure, properly administer medications at least 15 times to live patient). ▪ The student must demonstrate the ability to safely gain vascular access (the student should safely, and while performing all steps of each procedure, successfully access the venous circulation at least 25 times on live patients of various age groups). ▪ The student should demonstrate the ability to effectively ventilate unintubated patients of all age groups (the student should effectively, and while performing all steps of each procedure, ventilate at least 20 live patients of various age groups). 	<ul style="list-style-type: none"> • The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for patients with chest pain. • The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for patients with respiratory distress. • The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for

Educational Infrastructure

	EMR	EMT	AEMT	Paramedic
			<p>patients with altered mental status.</p> <ul style="list-style-type: none"> The student must demonstrate the ability to perform an adequate assessment on pediatric, adult and geriatric patients. 	
Field Experience	<ul style="list-style-type: none"> None required at this level 	<ul style="list-style-type: none"> The student must participate in and document patient contacts in a field experience approved by the medical director and program director. 	<ul style="list-style-type: none"> The student must participate in and document team leadership in a field experience approved by the medical director and program director. 	
Course Length	<ul style="list-style-type: none"> Course length is based on competency, not hours Course material can be delivered in multiple formats including but not limited to: <ul style="list-style-type: none"> Independent student preparation Synchronous/Asynchronous distributive education Face-to-face instruction Pre- or co-requisites Course length is estimated to take approximately 48-60 didactic and laboratory clock hours 	<ul style="list-style-type: none"> Course length is based on competency, not hours Course material can be delivered in multiple formats including but not limited to: <ul style="list-style-type: none"> Independent student preparation Synchronous/Asynchronous distributive education Face-to-face instruction Pre- or co-requisites Course length is estimated to take approximately 150-190 clock hours including the four integrated phases of education (didactic, laboratory, clinical and field) to cover material 	<ul style="list-style-type: none"> Course length is based on competency, not hours Course material can be delivered in multiple formats including but not limited to: <ul style="list-style-type: none"> Independent student preparation Synchronous/Asynchronous distributive education Face-to-face instruction Pre- or co-requisites Course length is estimated to take approximately 150-250 clock hours beyond EMT requirements including the four integrated phases of education (didactic, laboratory, clinical and field) to cover material 	
Course Design	<ul style="list-style-type: none"> Provide the following components of instruction: <ul style="list-style-type: none"> Didactic instruction Skills laboratories 	<ul style="list-style-type: none"> Provide the following components of instruction: <ul style="list-style-type: none"> Didactic instruction Skills laboratories Hospital/Clinical experience Field experience 	Same as Previous Level	

Educational Infrastructure

	EMR	EMT	AEMT	Paramedic
Student Assessment	<ul style="list-style-type: none"> • Perform knowledge, skill, and professional behavior evaluation based on educational standards and program objectives • Provide several methods of assessing achievement • Provide assessment that measures, as a minimum, entry level competency in all domains 	Same as Previous Level	Same as Previous Level	
Program Evaluation	<ul style="list-style-type: none"> • Provide evaluation of program instructional effectiveness • Provide evaluation of organizational and administrative effectiveness of program 	Same as Previous Level	Same as Previous Level	

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APPENDIX C

Useful Links

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State of Minnesota EMS Regulatory Board

The EMSRB is the lead state agency responsible for certifying emergency medical personnel and approving emergency medical services education programs <http://www.emsrb.state.mn.us/>

National Registry of EMTs (NREMT)

The National Registry of EMTs website provides information for cognitive testing, practical skills testing, as well as providing individual educational program information beginning at the EMT level <http://www.nremt.org/>

Minnesota Association of EMS Educators

<http://www.maemse.org/>

National Association of EMS Educators (NAEMSE)

The National Association of EMS Educators provides educational materials for all levels. Some of the areas are for members only. They also have a yearly symposium for educators.

<http://www.naemse.org/>

NHTSA DOT EMS Office

The federal NHTSA DOT EMS office website provides direct access to the National EMS Education Standards and instructional guidelines

<http://www.ems.gov/EducationStandards.htm>

National EMS Education Standards and Instructional Guidelines

<http://www.ems.gov/pdf/811077b.pdf>

<http://www.ems.gov/pdf/811077c.pdf>

National Incident Management System Online Courses

NIMS ICS-100b Introduction to Incident Command System (All Levels)

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=is-100.b>

NIMS IS-700 National Incident Management System Introduction (All Levels)

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=is-700.a>

NIMS IS-200.b ICS for Single Resources and Initial Action Incidents (Paramedic only)

<http://training.fema.gov/EMIWeb/IS/courseOverview.aspx?code=is-200.b>

*If you lost your NIMS certificate you can contact the following for a copy of your certificate of completion. Phone: 301-447-1200 Email: Independent.Study@fema.dhs.gov.

Minnesota Department of Human Services – Background

Studies http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_008631

Center for Disease Control Field Triage Guidelines

<http://www.cdc.gov/fieldtriage/>

Textbooks

Textbooks need to meet the NHTSA DOT National EMS Education Standards.

The standards can be found at: <http://www.ems.gov/EducationStandards.htm>

National Association of EMS State Officials (NASEMSO)

The National Association of EMS State Officials has a comprehensive toolkit with a large amount of national information on the EMS Education Standards. There is information to help understand goals and objectives, depth and breadth, and instructor qualifications. In the toolkit are the National EMS Education Standards, transitional templates for each level, instructional guidelines for each level, and gap analysis documents. www.nasemso.org

These links have been assembled by your peers and posted to the EMSRB website in the Toolkit.

APPENDIX D

Minnesota Statutes Related to Education Programs

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MN Statutes for Education Program Inspection

Effective August 1, 2013

Minnesota Statute 144E.285: Education Programs.

DOCUMENTS

License Application Documentation

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (1) submit an application prescribed by the board that includes:
 - (i) type and length of course to be offered;
 - (ii) names, addresses, and qualifications of the program medical director, program education coordinator, and instructors;
 - (iii) names and addresses of clinical sites, including a contact person and telephone number;
 - (iv) admission criteria for students; and
 - (v) materials and equipment to be used;
 - (3) have a program medical director and a program coordinator;
 - (7) retain documentation of program approval by the board, course outline, and student information;

Minnesota Statute 144E.001: Definitions.

Subdivision 14. Education program coordinator.

"Education program coordinator" means an individual who serves as the administrator of an emergency care education program and who is responsible for planning, conducting, and evaluating the program; selecting students and instructors; documenting and maintaining records; developing a curriculum according to the National EMS Education Standards by the National Highway Transportation Safety Administration (NHTSA), United States Department of Transportation; and assisting in the coordination of examination sessions and clinical training.

Subdivision 11. Program medical director.

"Program medical director" means a physician who is responsible for ensuring an accurate and thorough presentation of the medical content of an emergency care education program; certifying that each student has successfully completed the education course; and in conjunction with the program coordinator, planning the clinical training.

Instructor Qualifications

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (4) utilize instructors who meet the requirements of section **144E.283** for teaching at least 50 percent of the course content. The remaining 50 percent of the course may be taught by guest lecturers approved by the education program coordinator or medical director;

DOT Certification

Minnesota Statute 144E.283: Instructor Qualifications.

- (a) An emergency medical technician instructor must:
 - (1) possess valid certification, registration, or licensure as an EMT, AEMT, paramedic, physician, physician's assistant, or registered nurse;
 - (2) have two years of active emergency medical practical experience;
 - (3) be recommended by a medical director of a licensed hospital, ambulance service, or education program approved by the board;
 - (4) successfully complete the United States Department of Transportation Emergency Medical Services Instructor Education Program or its equivalent as approved by the board; and
 - (5) complete eight hours of continuing education in educational topics every two years, with documentation filed with the education program coordinator.
- (b) An emergency medical responder instructor must possess valid registration, certification, or licensure as an EMR, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.

USDOT Standards

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (2) for each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to EMT, AEMT, or paramedic education;
 - (7) retain documentation of program approval by the board, course outline, and student information;

Clinical/Field Rotation

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (6) maintain a written agreement with a licensed hospital or licensed ambulance service designating a clinical training site;

Student Criteria

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (1) submit an application prescribed by the board that includes:
 - (iv) admission criteria for students; and
 - (7) retain documentation of program approval by the board, course outline, and student information;
 - (10) maintain a minimum average yearly pass rate as set by the board on an annual basis. The pass rate will be determined by the percent of candidates who pass the exam on the first attempt. An education program not meeting this yearly standard shall be placed on probation and shall be on a performance improvement plan approved by the board until meeting the pass rate standard. While on probation, the education program may continue providing classes if meeting the terms of the performance improvement plan as determined by the board. If an education program having probation status fails to meet the pass rate standard after two years in which an EMT initial course has been taught, the board may take disciplinary action under subdivision 5.

Instructor/Student Ratio

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (5) have at least one instructor for every ten students at the practical skill stations;

Course Notification

Minnesota Statute 144E.285: Education Programs.

Subdivision 1: Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (8) notify the board of the starting date of a course prior to the beginning of a course;

INSTRUCTIONAL AIDS AND EQUIPMENT

Minnesota Statute 144E.285 Education Programs

Subdivision 1: Approval required.

- (b) To be approved by the board, an education program must:
 - (1) submit an application prescribed by the board that includes:
 - (i) type and length of course to be offered;
 - (ii) names, addresses, and qualifications of the program medical director, program education coordinator, and instructors;
 - (iii) names and addresses of clinical sites, including a contact person and telephone number;
 - (iv) admission criteria for students; and
 - (v) materials and equipment to be used;

Applicants shall retain in their files documentation of all statements made in applications for licensure.

Complete Statutes Related to Educational Programs

Minnesota Statute 144E.27 Emergency Medical Responder Registration.

Subdivision 1. Education programs.

An education program instructor must be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.

Subd. 1a. Approval required.

- (a) All education programs for an emergency medical responder must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (1) submit an application prescribed by the board that includes:
 - (i) type and length of course to be offered;
 - (ii) names, addresses, and qualifications of the program medical director, program education coordinator, and instructors;
 - (iii) admission criteria for students; and
 - (iv) materials and equipment to be used;
 - (2) for each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to Emergency Medical Responder registration education;
 - (3) have a program medical director and a program coordinator;
 - (4) have at least one instructor for every ten students at the practical skill stations;
 - (5) retain documentation of program approval by the board, course outline, and student information; and
 - (6) submit the appropriate fee as required under section 144E.29.
- (c) The National EMS Education Standards by the NHTSA, United States Department of Transportation contains the minimal entry level of knowledge and skills for emergency medical responders. Medical directors of emergency medical responder groups may expand the knowledge and skill set.

Minnesota Statute 144E.283: Instructor Qualifications.

- (a) An emergency medical technician instructor must:
 - (1) possess valid certification, registration, or licensure as an EMT, AEMT, paramedic, physician, physician's assistant, or registered nurse;
 - (2) have two years of active emergency medical practical experience;
 - (3) be recommended by a medical director of a licensed hospital, ambulance service, or education program approved by the board;
 - (4) successfully complete the United States Department of Transportation Emergency Medical Services Instructor Education Program or its equivalent as approved by the board; and
 - (5) complete eight hours of continuing education in educational topics every two years, with documentation filed with the education program coordinator.
- (b) An emergency medical responder instructor must possess valid registration, certification, or licensure as an EMR, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.

Minnesota Statute 144E.286 Examiner Qualifications for Emergency Medical Technician Testing.

Subdivision 3. Examiner qualifications. An examiner testing EMT, AEMT, or paramedic practical skills must be certified at or above the level the examiner is testing or must be a registered nurse, physician, or physician assistant familiar with current out-of-hospital care.

A physician must be available to answer questions relating to the evaluation of skill performance at the AEMT and paramedic practical examination.

Minnesota Statute 144E.285 EDUCATION PROGRAMS.

Subdivision 1. Approval required.

- (a) All education programs for an EMT, AEMT, or paramedic must be approved by the board.
- (b) To be approved by the board, an education program must:
 - (1) submit an application prescribed by the board that includes: (i) type and length of course to be offered;
 - (ii) names, addresses, and qualifications of the program medical director, program education coordinator, and instructors;
 - (iii) names and addresses of clinical sites, including a contact person and telephone number;
 - (iv) admission criteria for students; and
 - (v) materials and equipment to be used;
 - (2) for each course, implement the most current version of the United States Department of Transportation EMS Education Standards, or its equivalent as determined by the board applicable to EMT, AEMT, or paramedic education;
 - (3) have a program medical director and a program coordinator;
 - (4) utilize instructors who meet the requirements of section [144E.283](#) for teaching at least 50 percent of the course content. The remaining 50 percent of the course may be taught by guest lecturers approved by the education program coordinator or medical director;
 - (5) have at least one instructor for every ten students at the practical skill stations;
 - (6) maintain a written agreement with a licensed hospital or licensed ambulance service designating a clinical training site;
 - (7) retain documentation of program approval by the board, course outline, and student information;
 - (8) notify the board of the starting date of a course prior to the beginning of a course;
 - (9) submit the appropriate fee as required under section [144E.29](#); and
 - (10) maintain a minimum average yearly pass rate as set by the board on an annual basis. The pass rate will be determined by the percent of candidates who pass the exam on the first attempt. An education program not meeting this yearly standard shall be placed on probation and shall be on a performance improvement plan approved by the board until meeting the pass rate standard. While on probation, the education program may continue providing classes if meeting the terms of the performance improvement plan as determined by the board. If an education program having probation status fails to meet the pass rate standard after two years in which an EMT initial course has been taught, the board may take disciplinary action under subdivision 5.

Subd. 2. AEMT and paramedic requirements.

- (a) In addition to the requirements under subdivision 1, paragraph (b), an education program applying for approval to teach AEMTs and paramedics must be administered by an educational institution accredited by the Commission of Accreditation of Allied Health Education Programs (CAAHEP).
- (b) An AEMT and paramedic education program that is administered by an educational institution not accredited by CAAHEP, but that is in the process of completing the accreditation process, may be granted provisional approval by the board upon verification of submission of its self-study report and the appropriate review fee to CAAHEP.
- (c) An educational institution that discontinues its participation in the accreditation process must notify the board immediately and provisional approval shall be withdrawn.
- (d) This subdivision does not apply to a paramedic education program when the program is operated by an advanced life-support ambulance service licensed by the Emergency Medical Services Regulatory Board under this chapter, and the ambulance service

meets the following criteria:

- (1) covers a rural primary service area that does not contain a hospital within the primary service area or contains a hospital within the primary service area that has been designated as a critical access hospital under section 144.1483, clause (11);
- (2) has tax-exempt status in accordance with the Internal Revenue Code, section 501(c)(3);
- (3) received approval before 1991 from the commissioner of health to operate a paramedic education program;
- (4) operates an AEMT and paramedic education program exclusively to train paramedics for the local ambulance service; and
- (5) limits enrollment in the AEMT and paramedic program to five candidates per biennium.

Subd. 3. Expiration.

Education program approval shall expire two years from the date of approval.

Subd. 4. Reapproval.

An education program shall apply to the board for reapproval at least three months prior to the expiration date of its approval and must:

- (1) submit an application prescribed by the board specifying any changes from the information provided for prior approval and any other information requested by the board to clarify incomplete or ambiguous information presented in the application; and
- (2) comply with the requirements under subdivision 1, paragraph (b), clauses (2) to (10).

Subd. 5. Disciplinary action.

(a) The board may deny, suspend, revoke, place conditions on, or refuse to renew approval of an education program that the board determines:

- (1) violated subdivisions 1 to 4 or rules adopted under sections [144E.001](#) to [144E.33](#); or
- (2) misrepresented or falsified information on an application form provided by the board.

(b) Before taking action under paragraph (a), the board shall give notice to an education program of the right to a contested case hearing under chapter 14. If an education program requests a contested case hearing within 30 days after receiving notice, the board shall initiate a contested case hearing according to chapter 14.

(c) The administrative law judge shall issue a report and recommendation within 30 days after closing the contested case hearing record. The board shall issue a final order within 30 days after receipt of the administrative law judge's report.

(d) After six months from the board's decision to deny, revoke, place conditions on, or refuse approval of an education program for disciplinary action, the education program shall have the opportunity to apply to the board for reapproval.

Subd. 6. Temporary suspension.

(a) In addition to any other remedy provided by law, the board may temporarily suspend approval of the education program after conducting a preliminary inquiry to determine whether the board believes that the education program has violated a statute or rule that the board is empowered to enforce and determining that the continued provision of service by the education program would create an imminent risk to public health or harm to others.

(b) A temporary suspension order prohibiting the education program from providing emergency medical care training shall give notice of the right to a preliminary hearing according to paragraph (d) and shall state the reasons for the entry of the temporary suspension order.

(c) Service of a temporary suspension order is effective when the order is served on the education program personally or by certified mail, which is complete upon receipt, refusal, or return for non-delivery to the most recent address provided to the board for the education program.

- (c) At the time the board issues a temporary suspension order, the board shall schedule a hearing, to be held before a group of its members designated by the board, that shall begin within 60 days after issuance of the temporary suspension order or within 15 working days of the date of the board's receipt of a request for a hearing from the education program, whichever is sooner. The hearing shall be on the sole issue of whether there is a reasonable basis to continue, modify, or lift the temporary suspension. A hearing under this paragraph is not subject to chapter 14.
- (d) Evidence presented by the board or the individual may be in the form of an affidavit. The education program or counsel of record may appear for oral argument.
- (e) Within five working days of the hearing, the board shall issue its order and, if the suspension is
- (f) continued, notify the education program of the right to a contested case hearing under chapter 14.
- (g) If an education program requests a contested case hearing within 30 days of receiving notice under paragraph (f), the board shall initiate a contested case hearing according to chapter 14. The administrative law judge shall issue a report and recommendation within 30 days after the closing of the contested case hearing record. The board shall issue a final order within 30 days after receipt of the administrative law judge's report.

Subd. 7. Audit.

The board may audit education programs approved by the board. The audit may include, but is not limited to, investigation of complaints, course inspection, classroom observation, review of instructor qualifications, and student interviews.

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APPENDIX E

NREMT Psychomotor Exam

In this section:

- **Psychomotor Exam process and role definitions**
- **Guide to the Guide Psychomotor Exam Duties**
- **Approved Agent and Examiner Application**
- **Remediation Verification Form**
- **Exam Coordinators guide to the NREMT Psychomotor Exam Guide**

Note: The NREMT Written and Psychomotor Exams are the Board approved exams for Minnesota certification at the EMT, AEMT and Paramedic levels.

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APPENDICES

Psychomotor Exam

Board Policy: The Board has approved the National Registry of Emergency Medical Technicians (NREMT) written and psychomotor exam criteria as the standard for Minnesota at the EMT, AEMT and Paramedic certification levels.

- **Psychomotor Exam (Board) Purpose**
- **Based on guidelines from the National Registry of Emergency Medical Technicians (NREMT), the Psychomotor Exam is to be offered to each candidate in a standardized format. By adopting the NREMT Psychomotor Exam at both the EMT Initial and Refresher levels the State of Minnesota EMSRB ensures the public’s protection by verifying the minimum competencies.**

▪ **Considered a State Exam**



- Authority to Act: **M.S. 144E.28 CERTIFICATION OF EMT, AEMT, AND PARAMEDIC.**
Subdivision 1: **Requirements.**

To be eligible for certification by the board as an EMT, AEMT, or paramedic, an individual shall:

(2) pass the written and practical examinations approved by the board and administered by the board or its designee, specific to the EMT, AEMT, or paramedic classification;

▪ **Exam Staff**

- **State Official:** EMSRB Staff that oversees the exam process
- **Approved Agent:** EMSRB on-site Approved Agent for conducting the psychomotor exam on behalf of the State of Minnesota in accordance with National Registry guidelines.
- The State of Minnesota has adopted the National Registry Psychomotor Exam utilizing Approved Agents to act on behalf of the State. To be eligible as an Approved Agent, the applicant must provide verification of the following:
 - Credentialed at the level of, or higher, than the exam being conducted
 - Current CPR Certification
 - Completed a Board approved “Best Practices for Psychomotor Examination Scoring” Webinar and EMSRB Training Course (Staff is finalizing course content to include any additional EMSRB-related standards and/or policies.)
(<https://www.nremt.org/nremt/about/resourcesWebinars.asp>)

- **Exam Coordinator:** Provides logistic support for conducting the psychomotor exam and works closely with the Approved Agent conducting the exam.
- **Examiner:** Person that meets requirements of MS § 144E.286, subdivision 3
 - The State of Minnesota has adopted the National Registry Psychomotor Exam utilizing Examiners to evaluate candidates. To be eligible as an Examiner, the applicant must provide verification of the following:
 - Current CPR Certification
 - Completed Board approved; Examiner training
 - Credentialed at the level of the exam or higher

Examiner Process:

- 1) Qualified examiners would be listed on the EMSRB website for access by education programs.
- 2) The examiners will need to complete the “Best Practices for Psychomotor Examination Scoring. <https://www.nremt.org/nremt/about/resourcesWebinars.asp>

Note: During the transition cycle, April 2, 2014 through March 31, 2016, require all renewing EMT’s to take the exam outlined in the NREMT Psychomotor Guideline. (Allow continuous training throughout the year; however, during the transition renewal require psychomotor exams be taken from one of the EMSRB Approved Agents.)

REFERENCE DOCUMENTS AND HELPFUL INFORMATION



- [Approved Agent / Examiner Application](#)
- [Psychomotor Exam Evaluation Form](#)
- [Guide to the NREMT Psychomotor Exam User Guide](#)

Conducting the EMT Initial Psychomotor Examination

State Official = EMSRB Staff

Approved Agent = Persons approved by the ESMRB to oversee psychomotor examinations

Exam Coordinator = is responsible for the overall planning, staffing, implementation, quality control, and validation of the psychomotor examination process in conjunction with the State EMS Official or approved agent.

As defined by the NREMT User guide, the State EMS Official or approved agent must ensure that all candidates complete the psychomotor examination in the same standardized format. All Basic Level examinations are administered by the State EMS Office or approved agents.

NREMT Guidelines apply to both Initial and Refresher candidates which includes 6 skills stations for 7 skills

Duty	State EMS	Approved Agent	Exam Coordinator	State Timeline	NREMT pg #	Notes
Exam Approval						
Determine Exam Date			X	4-5 Weeks	11-16	With Approved Agent
Secure Facilities			X	4-5 Weeks		
Find Approved Agent			X	4-5 Weeks		
Request to host exam			X	4-5 Weeks		With State Official
Approval of Exam Date	X			4-5 Weeks		

Reservations						
Maintain Reservation List			X	3-4 Weeks	12-13, 91	
Submit Examiner List to State Official			X	3-4 Weeks	102-103	To State Official 1 week prior to exam
Verify Examiners qualifications	X			2-3 Weeks	53-55	
Forward Rosters to Approved Agent	X			2-3 Weeks		

Exam Day						
Set Up Skills Stations			X	1 day	105-106	If possible
Supply Examiners with Items			X		57-89	Essays, Candidate Instructions, Skill Sheets, Clipboard, Pencil, timer
Arrange Staffing			X		14-16	20 Candidates requires 6 Examiners, 2 EMT assistants, 4 Simulated Patients
Confirm Availability of MD			X		37-41	Must be available by Phone or pager
Serves as QA Team for Exam		X	X			MD, Exam Coordinator and either State Official or Approved Agent
Responsible for Flow of Exam		X	X		16-17	
Orientation of Skills Examiners		X			27-30	
Orientation of Candidates		X			31-35	
Verification of Candidates		X			18-22	Photo ID
Dispatching Candidates			X			
Visit Skills throughout exam		X				
Review Skill Evaluation Forms		X			46-50	Runner provides exam sheets to State Official or Approved Agent
Score Results and Tabulate Retest Needs		X				
Privately Inform candidates of Results		X				These are Unofficial results only

Completing Exam						
Submitting Records to NREMT			X		24-25	Official results are 3rd party confirmed on NREMT website by Exam Coord
Submitting Records to State Office		X			52	
Retention of Official Records	X					12 - 24 months or in accordance with retention schedule

Conducting the EMT Refresher Psychomotor Examination during the Transition Period

State Official = EMSRB Staff

Approved Agent = Persons approved by the ESMRB to oversee psychomotor examinations

Exam Coordinator = is responsible for the overall planning, staffing, implementation, quality control, and validation of the psychomotor examination process in conjunction with the State EMS Official or approved agent.

As defined by the NREMT User guide, the State EMS Official or approved agent must ensure that all candidates complete the psychomotor examination in the same standardized format. All Basic Level examinations are administered by the State EMS Office or approved agents.

NREMT Guidelines apply to both Initial and Refresher candidates which includes 6 skills stations for 7 skills

Duty	State EMS	Approved Agent	Exam Coordinator	State Timeline	NREMT pg #	Notes
Exam Approval						
Determine Exam Date			X	4-5 Weeks	11-16	With Approved Agent
Secure Facilities			X	4-5 Weeks		
Find Approved Agent			X	4-5 Weeks		
Request to host exam			X	4-5 Weeks		With State Official
Approval of Exam Date	X			4-5 Weeks		
Reservations						
Maintain Reservation List			X	3-4 Weeks	12-13, 91	
Submit Examiner List to State Official			X	3-4 Weeks	102-103	To State Official 1 week prior to exam
Verify Examiners qualifications	X			2-3 Weeks	53-55	
Forward Rosters to Approved Agent	X			2-3 Weeks		
Exam Day						
Set Up Skills Stations			X	1 day	105-106	If possible
Supply Examiners with Items			X		57-89	Essays, Candidate Instructions, Skill Sheets, Clipboard, Pencil, timer
Arrange Staffing			X		14-16	20 Candidates requires 6 Examiners, 2 EMT assistants, 4 Simulated Patients
Confirm Availability of MD			X		37-41	Must be available by Phone or pager
Serves as QA Team for Exam		X	X			MD, Exam Coordinator and either State Official or Authorized Agent
Responsible for Flow of Exam		X	X		16-17	
Orientation of Skills Examiners		X			27-30	
Orientation of Candidates		X			31-35	
Verification of Candidates		X			18-22	Photo ID
Dispatching Candidates			X			
Visit Skills throughout exam		X				
Review Skill Evaluation Forms		X			46-50	Runner provides exam sheets to State Official or Approved Agent
Score Results and Tabulate Retest Needs		X				
Privately Inform candidates of Results		X				These are Unofficial results only
Completing Exam						
Submitting Records to NREMT			X		24-25	Official results are 3rd party confirmed on NREMT website by EC
Submitting Records to State Office		X			52	
Retention of Official Records	X					12 - 24 months or in accordance with retention schedule

State Official may fill the role of Approved Agent at anytime.

Advanced Psychomotor Exam Requirements

All Advanced exams, AEMT and Paramedic must be coordinated with the National Registry of EMT's.

Please contact the National Registry at:

www.nremt.org

614-888-4484

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Approved Agent / Examiner Application

* Contact information provided will be listed on the EMSRB website.

*Last Name:		*First Name:		*Middle Initial:	
Street Address:		City:		State:	Zip:
*Phone Number:	*Email Address:				

Applicant Information: Check all that apply

<input type="checkbox"/>	Applying as EMT Psychomotor Exam Approved Agent	EMSRB Certification # <i>(required)</i> :
<input type="checkbox"/>	Applying as Basic Examiner	CPR and/or ACLS Expire Date:
<input type="checkbox"/>	Applying as Advanced Examiner	ACLS Instructor Expire Date:

Please circle which region(s) you are applying for:

Northwest	Northeast	West Central	Central	Metro
South Central	Southeast	Southwest	All Regions	

Please identify other credentials that may be helpful:

As an examiner in the State of Minnesota, I understand, I must be certified or licensed at or above the level being tested, perform the skill being evaluated, must be current in CPR, must have completed a board approved training course. I certify the information provided is true and correct to the best of my knowledge.

Applicant's Signature:	Date:
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Approved Agents Applicants Only

I, as medical director for _____ (Ambulance Service or Education Program) to the best of my knowledge, verify this applicant is competent to act as an approved agent in the State of Minnesota during a Psychomotor Skills Examination.

Medical Director _____ MN. Physician License # _____
 (Print Name)

Signature _____ Date _____
 (Original Signature)

State Official Checklist:	
Completed Applications:	Yes / No
Approved Agent Training Completion:	Yes / No
Verified Credentials:	Yes / No
E-licensing Modifier:	Yes / No
* State Official Approval:	Date:

Applicants must complete this form and have it on approved by the EMSRB prior to acting as an examiner or Approved Agent in the State of Minnesota.

Approved Agent/Examiner Process

Examiner:

- 1) Qualified examiners may be listed on the EMSRB website for access by education programs.
- 2) The examiners will need to complete the “Best Practices for Psychomotor Examination Scoring. <https://www.nremt.org/nremt/about/resourcesWebinars.asp>

National Registry of Emergency Medical Technicians (NREMT)

Exam Attempt Guidelines

Purpose: To ensure psychomotor skill competency of Minnesota EMTs and provide clarification to the psychomotor exam process related to retest and options to ensure successful completion of the psychomotor exam during the transition to the New EMS Education Standards.

Definition: The language **Full attempt** is in reference to attempts at the psychomotor in accordance with NREMT guidelines as follows:

#1A -The Candidate takes 1 Full Attempt (attempting all 7 skills in the exam, referred to as #1A by the NREMT)

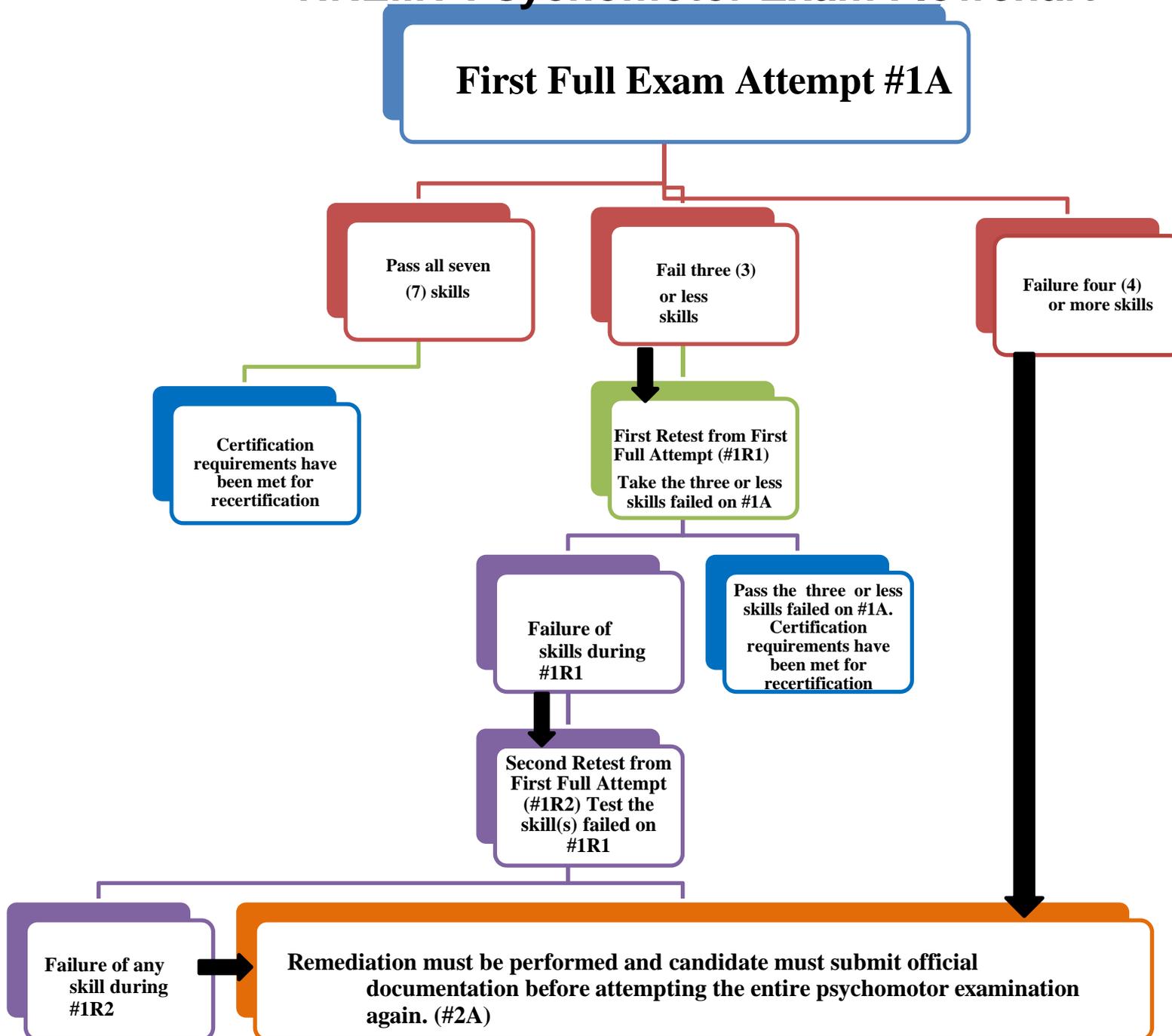
- Candidate Passes all 7 Stations
- The candidate is eligible to retest if they fail three (3) or less skills when taking a full attempt.
 - The candidate may complete a retest for up to three (3) skills.
 - Failure of any skill on Retest #1 (referred to #1R1 by the NREMT) constitutes examination at a different site location, which is referred to as retest #2
 - Failure of any skill on Retest #2 (referred to #1R2 by the NREMT) constitutes complete failure of the entire psychomotor examination.
- Candidates failing 4 or more skills or failure of any skill on retest #2 have failed the entire exam, which constitutes remediation before attempting the entire psychomotor examination (all 7 skills) on the next full attempt of the psychomotor examination on another date.

#2A- On the 2nd Full Attempt (attempting all 7 skills in the exam)

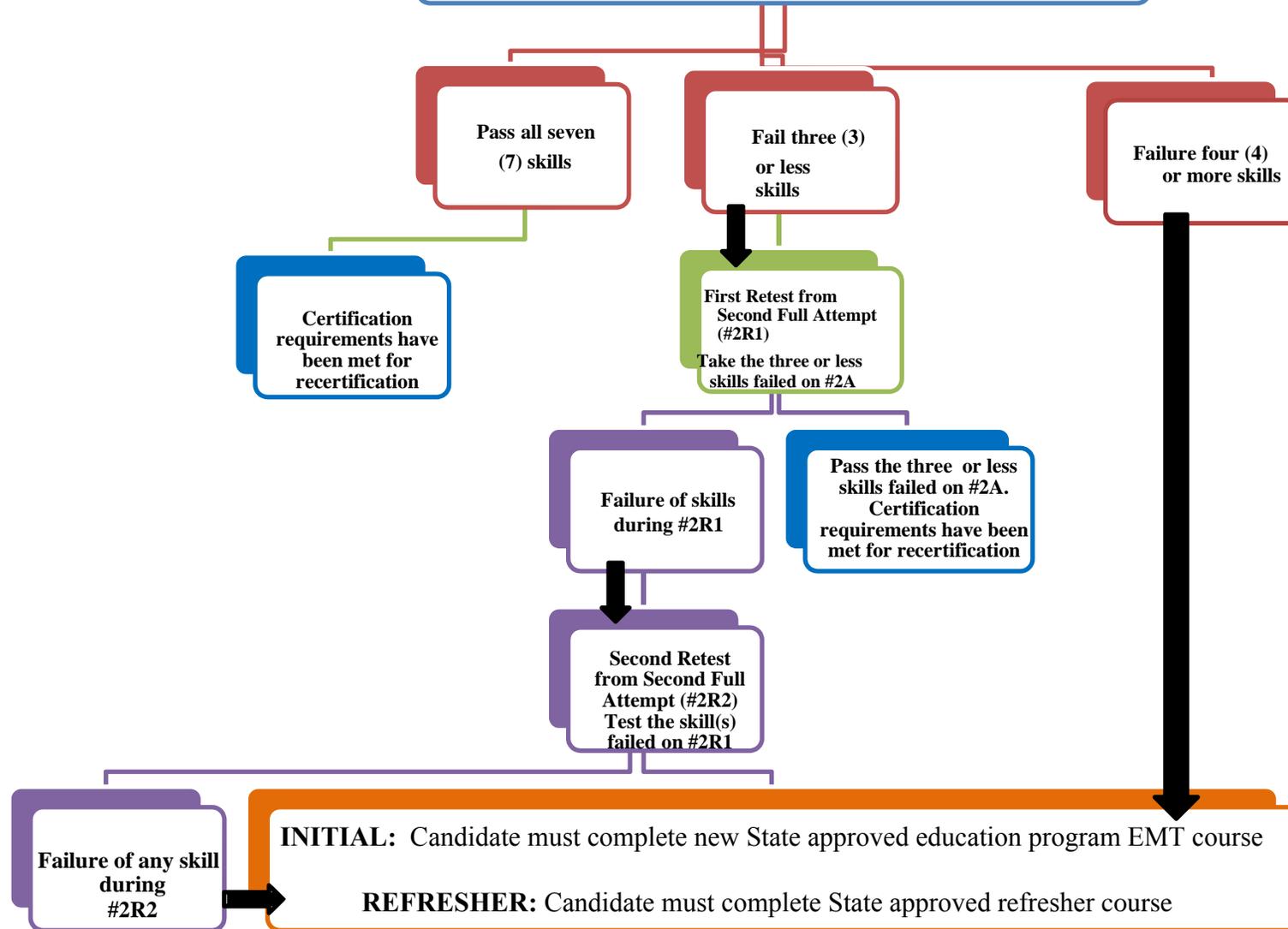
- The Candidate takes 2nd full attempt (referred to as #2A by the NREMT)
 - The candidate may complete a retest for up to three (3) skills.
 - Failure of any skill on Retest #1 (referred to #2R1 by the NREMT) constitutes examination at a different site location, which is referred to as retest #2
 - Failure of any skill on Retest #2 (referred to #2R2 by the NREMT) constitutes a complete failure of the entire psychomotor examination.
- Candidates failing 4 or more skills or failure of any skill on retest #2 have failed the entire exam. At the initial level, the candidate must complete the entire course again. At the refresher level.

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NREMT Psychomotor Exam Flowchart



Second Full Exam Attempt #2A



Psychomotor Exam Remediation Verification Form

This form may be used as official documentation to verify remediation during the psychomotor exam process.

- * Remediation Includes - review and approval by the Education Program Medical Director or:
- * Review and approval by Ambulance Medical Director the candidate is operating under.

CANDIDATE: _____

EDUCATION PROGRAM: _____

DATE(S) OF REMEDIATION: _____

1. Patient Assessment Trauma: _____

2. Patient Assessment Medical: _____

3. Oxygen Administration by NRM: _____

4. BVM Ventilation-Adult Apneic Patient: _____

5. Cardiac Arrest Management/AED: _____

6. Spinal Immobilization - Supine: _____

7. Random Skills (specify): _____

***PLEASE INDICATE THE PROCESS OF REMEDIATION AND VERIFYING SKILL COMPETENCY FOR THE CANDIDATE.**

I verify remediation has been conducted in accordance with the Minnesota EMS Regulatory Board guidelines.

Program Coordinator Signature & Date

Medical Director Signature & Date

A copy of the remediation verification form must be kept on file with the education program in accordance with the program retention schedule or at a minimum the certification period of the individual.

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EMT Psychomotor Exam Approval and Verification

The purpose of the approval and verification form is to help the examination coordinator along with the EMSRB establish a quality control process. This evaluation must be completed and signed by the examination coordinator and forwarded to the appropriate EMSRB office.

PSYCHOMOTOR EXAMINATION DATE:			
EXAMINATION SITE:			
STATE OFFICIAL or APPROVED AGENT:		DATE APPROVED BY STATE OFFICIAL:	
EXAM COORDINATOR:			
PHYSICIAN MEDICAL DIRECTOR:			
Examiners Assigned to Skills Stations			
Practical Skills Exam:	Name	State Certification number	Expire Date
Pt. Assessment - Trauma			
Pt. Assessment - Medical			
Oxygen Administration by Non-rebreather mask			
BVM Ventilation – Apneic Adult Pt.			
Cardiac Arrest Management/AED			
Spinal Immobilization - Supine			
Random			
The expected standards for this examination are found in the: NATIONAL REGISTRY PSYCHOMOTOR EXAMINATION USERS GUIDE – Emergency Medical Technician			
Name of person that read the “Skill Examiner Orientation to the Psychomotor Examination” found on pages 27-30 of the NREMT Psychomotor Examination Users Guide: _____			
Name of person that read the “Candidate Orientation to the Psychomotor Examination” found on pages 32-36 of the NREMT Psychomotor Examination Users Guide: _____			
EXAMINATION PROBLEMS ENCOUNTERED: _____ _____			
I verify this psychomotor examination has been conducted in accordance with the guideline of the National Registry of EMT’s and the Minnesota EMSRB. _____			
Exam Coordinator Signature / Date			



State Official
Approved Agent
Exam Coordinator

Guide to Administration of the NREMT Psychomotor Examination

Dear Education Program Coordinator:

The National Registry has provided and Psychomotor Examination guide for Education Programs on their website at www.nremt.org . This guide has several references in regards to coordination with your State EMS Official. Please use this document as a guide to the NREMT guide as you coordinate exams. Minnesota Statute 144E.28 establishes the requirements for eligibility for certification of EMTs and Paramedics. To be eligible for certification an individual shall pass the written and psychomotor examinations approved by the Board and administered by the Board or its designee. The Psychomotor Examination Guide for Education Programs is the accepted guiding document for proper administration of the practical exam and must be adhered to.

144E.28 CERTIFICATION OF EMT, AEMT, AND PARAMEDIC.

Subdivision 1. Requirements.

To be eligible for certification by the board as an EMT, AEMT, or paramedic, an individual shall:

- (1) successfully complete the United States Department of Transportation course, or its equivalent as approved by the board, specific to the EMT, AEMT, or paramedic classification;
- (2) pass the written and practical examinations approved by the board and administered by the board or its designee, specific to the EMT, AEMT, or paramedic classification; and
- (3) complete a board-approved application form.

State Official: EMSRB Staff that oversees the entire psychomotor exam process. (Education Program Coordinators should be in contact with the EMSRB staff person assigned to their program or region.)

Approved Agent: EMSRB on-site Approved Agent for conducting the psychomotor exam on behalf of the State of Minnesota in accordance with National Registry guidelines.

Exam Coordinator: Provides logistic support for conducting the psychomotor exam and works closely with the Approved Agent conducting the exam.

General Responsibilities *(taken directly from NREMT guide)*

The State EMS Official or approved agent is responsible for the following to help ensure a smooth-flowing examination as found on *pages 19-21 in the NREMT guide*:

- The State EMS Official or approved agent, Examination Coordinator, Skill Examiners, and all other staff must conduct all aspects of the examination in a courteous and professional manner at all times.
- The State EMS Official or approved agent is responsible for showing up ***promptly*** and beginning the examination at the scheduled time without causing delay.
- The State EMS Official or approved agent must ensure that all candidates complete the psychomotor examination in the same standardized format. Administration of any part of the examination in any manner different than other candidates constitutes an examination accommodation. All Basic Level examinations are administered by the State EMS Office or approved agents. Candidates need to contact the State EMS Office for information about requesting accommodations. **You are not authorized to make any determination for accommodations at the examination site.** You must notify the State EMS Office immediately if any such requests are received at the examination site.
- The State EMS Official or approved agent must politely and attentively deal with each candidate's concerns throughout the examination. The State EMS Official or approved agent must also ensure that the Examination Coordinator and Skill Examiners conduct themselves in a similar manner. (Identifies the state official/approved agent and exam coordinator as two different individuals.)
- The State EMS Official or approved agent must inspect all facilities for the psychomotor examination to ensure their adequacy. All facilities must be in compliance with those outlined under the "Facilities for the Psychomotor Examination" (*page 13 of the NREMT Psychomotor Exam user's guide*).
- The State EMS Official or approved agent is responsible for controlling and overseeing administration of the psychomotor examination.
- The State EMS Official or approved agent is responsible for appropriately dealing with cases of dishonesty or any other irregular occurrences during administration of the psychomotor examinations.
- The State EMS Official or approved agent is responsible for calling the roll of all registered candidates for the psychomotor examinations and appropriately recording the candidate's attendance on the official roster accordingly (✓ if present, "N/S" if no show).
- The State EMS Official or approved agent is responsible for overseeing and controlling all related aspects of psychomotor examination administration.

- The State EMS Official or approved agent is responsible for orienting all candidates to the psychomotor examination by reading all printed instructions (*see p. 31 of the NREMT Psychomotor Exam user's guide.*).
- The State EMS Official or approved agent is responsible for assuring identity of all candidates for the psychomotor examination with an official form of photo identification (government-issued identification, such as a driver's license).
- The State EMS Official or approved agent is responsible for orienting all Skill Examiners to the psychomotor examination by reading all printed instructions (*see p. 27 of the NREMT Psychomotor Exam user's guide.*).
- The State EMS Official or approved agent must ensure that all Skill Examiners and other staff conduct them in a professional manner throughout the examination.
- The State EMS Official or approved agent must initially visit all skills as soon as possible after the psychomotor examination begins to ensure that everything is progressing satisfactorily and according to NREMT and state-approved criteria.
- The State EMS Official or approved agent must observe each Skill Examiner during an actual evaluation to detect errors in "objectivity" while observing and recording the candidate's performance according to NREMT and state-approved criteria. If any errors are detected, the State EMS Official or approved agent must then thoroughly brief the Skill Examiner as to what constitutes "objectivity." The State EMS Official or approved agent must continue observing the Skill Examiner to ensure that the problem has been corrected. If the State EMS Official or approved agent continues to question the Skill Examiner's "objectivity," the State EMS Official or approved agent must notify the Examination Coordinator and dismiss the Skill Examiner in question.
- The State EMS Official or approved agent oversees administration of the complaint procedure and acts as a member of the Quality Assurance Committee.
- The State EMS Official or approved agent is responsible for dealing with instances of any irregular behavior during the examination, such as threats made towards any staff (including all personnel who are assisting with administration of the EMT psychomotor examination), the use of unprofessional (foul) language, or any other irregular behavior that may occur in connection with the administration of the examination that is not consistent with the normal expected behavior for EMS professionals.
- The State EMS Official or approved agent determines the need for and possibility of administering a same-day retest and all associated logistics in conjunction with the Examination Coordinator.
- The State EMS Official or approved agent may add and enter the total points on forms that were not tallied by the Skill Examiner as long as points for all steps have been recorded by the Skill Examiner. The State EMS Official or approved agent must determine, based upon the "Critical Criteria" and minimum point totals, if a candidate has passed or failed each skill.

- The State EMS Official or approved agent must contact the Skill Examiner for explanation, clarification, and correction when the examiner has left any areas of the form blank, if comments written by the Skill Examiner do not support the points awarded or deducted, or any other areas of confusion or contradiction exist. If it is determined that the examiner made any errors in scoring, the Skill Examiner must make any necessary corrections to the evaluation form and initial any changes he/she makes.
- If at any point the State EMS Official or approved agent is uncomfortable with the objectivity of any Skill Examiner, the State EMS Official or approved agent must again observe the Skill Examiner until you are satisfied that the skill is being conducted within NREMT guidelines.
- The State EMS Official or approved agent must transcribe all results onto the EMT Psychomotor Examination Report Form based upon availability of private space to score psychomotor results, the flow of the examination, and the possibility of administering a same-day retest.
- The State EMS Official or approved agent is not permitted to change a score. The only permissible action by anyone in relationship to final scores is nullification following the procedure outlined in the Quality Assurance Committee Procedure.
- If candidates are being informed of their unofficial psychomotor examination results at the site, the State EMS Official or approved agent must privately inform each candidate individually of his/her psychomotor examination results. The State EMS Official or approved agent may only show the candidate the completed EMT Psychomotor Examination Report Form and must in no way inform the candidate of any specific reason(s) for failure.
- After scoring all results, the State EMS Official or approved agent may advise the Examination Coordinator of general trends in psychomotor performance to help guide remedial training.

Examination Coordinator Responsibilities *(Page 10 of the NREMT user's guide)*

The Examination Coordinator is responsible for the overall planning, staffing, implementation, quality control and validation of the psychomotor examination process in conjunction with the State EMS Official or approved agent. **The Examination Coordinator is responsible for the following upon approval by the State EMS Office or its agents:**

- Conducting examination-related activities on an equal basis for all candidates, paying particular attention to eliminate actual or perceived discrimination based upon race, color, national origin, religion, gender, age, disability, position within the local EMS system, or any other potentially discriminatory factor. The Examination Coordinator must help ensure that each Skill Examiner conducts himself/herself in a similar manner throughout the examination.

- Coordinating the examination with an approved agent to oversee administration of the psychomotor examination.
- Maintaining a reservation list of candidates who will be attending the psychomotor examination.
- The **reservation list must include** name, call-back phone number, and portion(s) of the examination that each candidate needs to complete. This will help the Examination Coordinator to appropriately plan, staff, and set-up the facilities to help assure a smooth examination. If the examination is postponed or canceled, the Examination Coordinator is responsible for the immediate notification of all candidates, Skill Examiners, Simulated Patients and State EMS Officials.
- Assuring that the approved State EMS Official or agent receives a copy of the final reservation list of candidates registered for the psychomotor examination by the appropriate cut-off date prior to the scheduled examination.
- Ensuring that the facilities for the psychomotor examinations meet the National Registry and acceptable educational standards.
- Selection of qualified Skill Examiners. At a minimum, each examiner must be certified or licensed to perform the skill that he/she is to evaluate. State of MN requires licensure at the level being tested or higher.
- Selection of appropriate individuals of average adult height and weight to serve as Simulated Patients. Simulated Patients must be adults or adolescents who are greater than sixteen (16) years of age. **Candidates who are registered to take the examination may not serve as patients or assistants for any skill.** A high fidelity simulation manikin capable of responding as a real patient given the scenario(s) may be used as the Simulated Patient.
- Obtaining clean, functional, and required equipment for each skill and ensuring that all equipment is operational (See Appendix D of the NREMT guide).
- Overseeing the timely flow of all candidates through the skills in conjunction with the State EMS Official or approved agent.
- Ensuring that excessive "hall talk" between candidates or discussing specific examination scenarios or material does not occur throughout the examination.

The Examination Coordinator must be present at the site during the examination. The Examination Coordinator may not serve as a Skill Examiner during the examination. If the Examination Coordinator is not able to be present at the examination due to unforeseen circumstances, he/she must assign a competent, informed, and capable person to coordinate all examination activities in his/her absence. In such a case, this person shall serve as and assume all responsibilities of the "Examination Coordinator" throughout the examination.

Examination Coordinator's Timeline *(Page 11 of the NREMT user's guide)*

A timeline has been developed to assist the Examination Coordinator with planning the examination, please refer to it as a guide to ensure you are able to secure your exam date with the State EMS Official.

Requesting to Host the Psychomotor Examination

A request to host the EMT psychomotor examination must be communicated with the State EMS Official in accordance with current policies and procedures. It must be received from an approved requesting agency or institution within the specified timelines. *Please contact the EMSRB Specialist serving your region to obtain approval for your exam.*

Maintaining a Reservation List of Candidates *(Page 12 of the NREMT user's guide)*

Please refer to the EMT Examination Reservation List printed in Appendix A of the NREMT manual to assist in gathering information from all candidates who will be attending the examination.

The Examination Coordinator is solely responsible for maintaining a reservation list of all candidates who will be attending the examination. Every candidate who is planning on attending the examination site must be listed on the "Reservation List". A copy of this completed reservation list must be submitted to the State EMS Official according to guidelines to the scheduled exam. **The State EMS Office will not be responsible for candidates who must be dismissed from an examination site when the Examination Coordinator did not submit that candidate's information on the reservation list by the deadline for the examination.** It is imperative that the completed and final reservation list is forwarded by the due date or the examination may be subject to postponement.

The State EMS Office or approved agent will not be responsible for any candidate who does not complete the appropriate portion(s) of the examination if he/she was not listed on the final reservation list for that examination. The candidate bears full responsibility for completing all appropriate portions of the examination in accordance with currently approved state policies and procedures.

Physician Medical Director *(Pages 14 and 15 of the NREMT user's guide)*

At a minimum, the **Physician Medical Director for the examination must be available by phone or pager throughout the examination.** If the Program Physician Medical Director is not available on the day of the examination, the Examination Coordinator must obtain a substitute Physician Medical Director who will at least be available by phone or pager throughout the examination.

The Physician Medical Director, along with the Examination Coordinator and the State EMS Official or approved agent, serves as one (1) of the three (3) members of the Quality Assurance Committee for the psychomotor examination. This Committee is responsible for:

1. Reviewing and rendering official and final decisions for all candidate complaints in

the psychomotor examination.

2. Reviewing and rendering official and final decisions in cases where a specific performance, treatment protocol, or other situations arise in which the State EMS Official needs assistance to objectively make a final determination.

The NREMT encourages physician involvement with the NREMT Psychomotor Examination process. The physician may serve as an excellent resource throughout the examination. Most Physician Medical Directors are qualified to serve as a Skill Examiner in any skill. His/her involvement increases the credibility of the certification process as well as provides an opportunity to observe the abilities of those who may soon be functioning under his/her medical oversight.

Roster for Skill Examiners and Simulated Patients *(Page 16 of the NREMT user's guide)*

A roster to keep track of Skill Examiners and Simulated Patients is included in Appendix C of the NREMT manual to help you coordinate the psychomotor examination.

Running an Efficient Psychomotor Examination *(Pages 16 and 17 of the NREMT user's guide)*

The psychomotor examination consists of seven skills. Each skill is designed to approximate the out-of-hospital setting by presenting realistic situations that the EMT can expect to see. Each candidate is tested individually in each skill and is responsible for communicating with the patients or bystanders. The candidate should pass or fail based solely on his/her actions and decisions.

The following is a list of the skills to be completed and the maximum time limits permissible for each skill:

SKILL	MAXIMUM TIME LIMIT
Patient Assessment/Management – Trauma	10 minutes
Patient Assessment/Management – Medical	15 minutes
Bag-Valve-Mask Ventilation of an Apneic Adult Patient	5 minutes
Oxygen Administration by Non-rebreather Mask	5 minutes
Cardiac Arrest Management/AED	10 minutes
Spinal Immobilization (Supine Patient)	10 minutes
Random EMT Skills	Ranges from 5 – 10 minutes

The Examination Coordinator is responsible for the timely flow of candidates through all skills. It is imperative to promptly begin the psychomotor examination at the scheduled time or you will add unnecessary stress to the candidates. It is best to schedule the Skill Examiners Orientation (including all Simulated Patients) one-half (½) to one (1) hour before scheduling candidates to arrive at the examination site. This should permit ample opportunity for orientation of all examiners; time for each examiner to thoroughly read the specific skill essay, instructions, and review the specific skill evaluation form; briefing and moulaging of the Simulated Patients; checking all equipment for the examination; and time for the State EMS Official or approved agent to individually address any areas in question before actual evaluation of any candidate begins. **If this is the first EMT psychomotor examination you have coordinated, we strongly advise permitting one (1) full hour for the Skill Examiners Orientation with the State EMSRB Official or authorized agent before requiring candidates to arrive at the examination site.**

After the Skill Examiners have been oriented, the State EMS Official or approved agent should meet with all candidates registered for the examination and provide the candidates with an orientation to the psychomotor examination. All candidates should complete any additional required paperwork before beginning the examination. The candidate orientation process to the psychomotor examination should take approximately twenty (20) to thirty (30) minutes.

At this point, actual evaluation of the candidates can begin. We have found that a grid and pass card (hall pass) system is perhaps the easiest and most effective method of controlling the timely flow of all candidates through the skills. This system helps minimize excessive noise which may affect skill performances, requires all candidates to assemble in one waiting area between skills, controls the candidates from discussing specific examination-related information, and provides the Examination Coordinator and the State EMS Official or approved agent with immediate feedback on the progress of the examination at any time. The State EMS Official or approved agent will be visiting all skills as the psychomotor examination begins to ensure fairness, consistency, and adherence to all requirements for the examinations. The State EMS Official or approved agent will observe the interaction between all Skill Examiners and candidates during actual evaluation to help ensure the evaluations are in accordance with the examination criteria. The Examination Coordinator or his/her designee should ensure that candidates do not discuss specific examination information throughout the examination. The Examination Coordinator or his/her designee is responsible for reporting any discussions that may have occurred between candidates if these discussions are believed to have resulted in an unfair advantage or inequality among the candidates. This should be communicated immediately to the State EMS Official or approved agent.

Administration of the Psychomotor Examination *(Page 18 of the NREMT user's guide)*

The State EMS Official or approved agent's primary responsibility in administration of the psychomotor examination is to ensure that all candidates complete the examination in the same standardized format in accordance with approved policy and procedure.

The State EMS Official or approved agent should critically review all skill evaluation forms the Skill Examiner has completed up until that point. If there are any errors or omissions, the State EMS Official or approved agent should discuss these findings with the Skill Examiner for explanation, clarification, and correction.

Please note that the NREMT and/or the State EMS Office reserve the right to nullify and invalidate scores from any NREMT psychomotor examination that does not meet acceptable criteria for validation of equivalent psychomotor competencies outlined herein.

Psychomotor Examination Accommodations *(Page 26 of the NREMT user's guide)*

All candidates must complete the psychomotor examination in the same standardized format. The presentation of any skill may not be altered to accommodate a candidate's request without first obtaining approval from the State EMS Office. The State EMS Official or approved agent is not authorized to individually make any determination for accommodation of the psychomotor

examination. For example, it is not appropriate to move the Simulated Patient in the Patient Assessment/Management – Trauma skill from the floor to an examination table at the candidate's request because the candidate is physically unable to bend down and assess a patient found lying on the floor. The psychomotor examination is intended to present simulated patients with realistic situations that approximate the candidate's ability to function in the out-of-hospital environment. The State EMS Official or approved agent and all Skill Examiners must remain vigilant for any situation that may alter the normal presentation of any skill other than that which is intended throughout the psychomotor examination. When in doubt, contact the State EMS Office for assistance.

Skill Examiners and Candidate Orientation to the Psychomotor Examination

Each Skills Examiner and Candidate must go through the orientation process at each exam site by the State EMS Official or its approved agent as identified in the NREMT guide on pages 20 through 31.

Quality Assurance Committee Procedures *(Page 38-42 of the NREMT user's guide)*

The Quality Assurance Committee is responsible for the following:

1. Review and rendering of official and final decisions for all candidate complaints
2. Review and rendering of official and final decisions in cases where a specific performance, treatment protocol, or other situations arise in which the State EMS Official or approved agent needs assistance to objectively make a final determination.

The Quality Assurance Committee will consist of only the Physician Medical Director, Examination Coordinator, and the State EMS Official or approved agent. When the State EMS Official or approved agent is also acting as the Examination Coordinator, a third uninvolved, unbiased person must be appointed to the Quality Assurance Committee. Likewise, an uninvolved, unbiased person should replace any involved and potentially biased party before the Quality Assurance Committee can begin deliberations. The State EMS Official or approved agent serves as the Chairperson of the Quality Assurance Committee. No Quality Assurance Committee meetings can be held without all members assembled. The Physician Medical Director may participate by phone (speaker) in unable to attend in person.

Complaint & Quality Assurance Committee forms can be found on p. 40-42 of the NREMT Practical Exam User's Guide.

Issues addressing candidate behavior can be found on pages 43 through 46 in the NREMT guide.

- False Identification
- Late Arrivals
- Interruption of the Psychomotor Examination
- Use of Prohibited Materials

- Candidates Suspected of Dishonest Action
- Irregular Behavior
- Dismissal from the Psychomotor Examination

Reporting Psychomotor Examination Results *(Page 46 of the NREMT user's guide)*

The psychomotor examination skill evaluation forms should be totaled by the Skill Examiner. The State EMS Official or approved agent may total the points on forms that have not been added-up as long as the points for each individual step have been entered. The State EMS Official or approved agent should determine, based upon the "Critical Criteria" and minimum point totals, if a candidate has passed or failed each skill. The State EMS Official or approved agent should re-calculate the point total on all sheets where it appears as though the minimum number of points has not been gained.

The State EMS Official or approved agent should transcribe all results onto the EMT Psychomotor Examination Report Form (see Appendix E in the NREMT guide). This may be accomplished at the examination site or following the examination at the discretion of the State EMS Official or approved agent based upon availability of private space to score psychomotor results, the flow of the examination, and the possibility of administering a same-day retest. All official records of the psychomotor examination should be retained by the State EMS Official or approved agent in accordance with State EMS Office recommendations (12 months).

Same-Day Retest Considerations *(Page 48 of the NREMT user's guide)*

The State EMS Official or approved agent, in conjunction with the Examination Coordinator, may decide to administer a psychomotor examination retest on the same day if permissible under local policies and procedures. The decision should be made as early as possible during the day of the examination.

The State EMS Official or approved agent should inform all candidates that they will be entitled to only one (1) retest attempt at that test. No candidate is permitted to complete the entire EMT Psychomotor Examination again during a same-day retest attempt. The State EMS Official or approved agent should also remind all candidates that no complaint will be valid if it is issued after being informed of his/her results.

Completion of the Psychomotor Examination *(Page 52 of the NREMT user's guide)*

The Exam Coordinator must ensure to follow the proper procedure on page 52 in the NREMT guide, report and return all required paperwork to both the NREMT and State EMS Official.

STATE EMS OFFICIALS

Region	Name	Email	Phone
Central	Mary Zappetillo	Mary.zappetillo@state.mn.us	651.201.2805
Metro	Mary Zappetillo	Mary.zappetillo@state.mn.us	651.201.2805
Northeast	Robert Norlen	Robert.norlen@state.mn.us	218.834.5271
Northwest	Tom Frost	Tom.frost@state.mn.us	218.236.2709
West Central	Tom Frost	Tom.frost@state.mn.us	218.236.2709
South Central	Holly Hammann-Jacobs	Holly.hammann@state.mn.us	507.523.3302
Southwest	Holly Hammann-Jacobs	Holly.hammann@state.mn.us	507.523.3302
Southeast	Holly Hammann-Jacobs	Holly.hammann@state.mn.us	507.523.3302
EMSRB Office			651.201.2800 800.747.2011

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APPENDIX F

Links to Forms

- Education Program Application Forms
 - [EMR/EMT](#)
 - [AEMT / Paramedic](#)
 - [Change in Medical Director or Program Coordinator](#)
- Education Program Inspection Forms
 - [EMR/EMT](#)
 - [AEMT / Paramedic](#)
- [Student Enrollment form for EMR/EMT](#)
- [Sample Student Interview Form](#)
- [Sample Student Remediation Form](#) (for use during the educational process)
- [Approved Agent / Examiner Application](#)
- [Psychomotor Exam Remediation Form](#)
- [Psychomotor Exam Evaluation Form](#)

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APPENDIX G

AEMT/Paramedic Information

Minnesota Statutes

AEMT and Paramedic Requirements

M.S. 144E.285, subd. 2

An education program applying for approval to teach AEMTs and paramedics must be administered by an educational institution accredited by the Commission Accreditation of Allied Health Education Programs (CAAHEP).

Is in the process of completing the accreditation process, may be granted provisional approval by the board upon verification of submission of it self-study report and the appropriate review fee to CAAHEP.

Board Action: EMSRB Approved Accredited Paramedic programs can teach AEMT courses after the state transition, on or about April 2, 2014.

Note: EMSRB Approved Accredited Paramedic programs must apply for approval for conducting AEMT courses by January 2, 2014.



Informational:

- All renewing Paramedics must provide a medical director's signed confirmation that the Paramedic meets the new EMS Education Standards criteria.
- Current EMT-I's will have the choice of changing to an EMT certification or completing an AEMT program.

[Link to National Registry of Emergency Medical Technicians](#)



[\(NREMT\) Exam Requirements](#)

[Link to AEMT Education Standards](#)

APPENDIX G

Community Paramedic Information

Minnesota Statutes	
Community Paramedic Requirements	
<p>M.S. 144E.28, subd. 9 (a)</p>	<p>To be eligible for certification by the board as a community paramedic, an individual shall:</p>
<p>M.S. 144E.28, subd. 7 (b)</p> <p style="text-align: center;"><u>AEMT / Paramedic</u> <u>Community Paramedic</u></p>	<p>Before the expiration date of certification, an applicant for renewal of certification as an AEMT or paramedic shall:</p> <p>(1) for a paramedic, successfully complete a course in advanced cardiac life support that is approved by the board or the licensee's medical director;</p> <p>(2) successfully complete 48 hours of continuing education in emergency medical training programs, appropriate to the level of the applicant's AEMT or paramedic certification, that are consistent with the United States Department of Transportation National EMS Education Standards or its equivalent as approved by the board or as approved by the licensee's medical director. An applicant may take the United States Department of Transportation Emergency Medical Technician refresher course or its equivalent without the written or practical test as approved by the board, and as appropriate to the applicant's level of certification, as part of the 48 hours of continuing education. Each hour of the refresher course, the cardiopulmonary resuscitation course, and the advanced cardiac life-support course counts toward the 48-hour continuing education requirement;</p>
<p>M.S. 144E.28, subd. 9 (a)(3)(c)</p> <p style="text-align: center;"><u>Community Paramedic</u></p>	<p>A <u>community paramedic</u> is subject to all certification, disciplinary, complaint, renewal, and other regulatory requirements that apply to paramedics under this chapter.</p> <p>In addition to the renewal requirements in subdivision 7, a <u>community paramedic</u> must complete an additional <u>12 hours</u> of continuing education in clinical topics approved by the ambulance service medical director.</p>

Note: Community Paramedic Education Programs do not have to verify paramedics entering a Community Paramedic course are transitioned to the new EMS Education Standards. This will be verified by EMSRB staff during renewal processes.

Date: _____

**AEMT/PARAMEDIC
EDUCATION PROGRAM INSPECTION FORM**

Insp #: _____

Licensee: _____	License #: _____
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STATUTES:

- **MS §144E.285 & MS § 144E.27 Education Programs:** Subd.1 & Subd. 1(a): All education programs for EMR, EMT, AEMT, or paramedic must be approved by the board.
- **Subd.7 Audit.** The board may audit education programs approved by the board. The audit may include, but is not limited to, investigation of complaints. course inspection. classroom observation. review of instructor qualifications. and student interviews.

DOCUMENTS (Must be on file)

- License App. Documentation (MS 144E.285, subd.1(b)(1))
- Program Coordinator (MS 144E.285, subd.1(b)(3))
- Medical Director (MS 144E.285, subd.1(b)(3))
- Program Approval (MS 144E.285 subd.1(b)(7))
- Faculty (MS 144E.285, subd.1(b)(4))
 - Instructor Qualifications (MS 144E.283)
 - DOT Certification (MS 144E.283, (a)(4))
 - Instructor CEU Verification (MS 144E.283, (a)(5))
- USDOT EMS Standards (MS 144E.285, subd.1(b)(2))
 - Course Outline (MS 144E.285, subd.1(b)(7))
 - Lesson Plans (MS 144E.285, subd.1(b)(7))
 - Textbook and supplements; Reference Materials
 - Written Examinations
 - Skill Verification
- Clinical / Field Experience (MS 144E.285, subd. 1(b)(6))
 - Written Agreements
 - Clinical Rotations & Objectives
 - Clinical / Field Rotation Form
 - Background Study Information/Account
- Student Admission Criteria (MS 144E.285, subd. 1(b)(1)(iv))
- Student Information (MS 144E.285, subd. 1(b)(7))
- Student Success Ratio (MS 144E.285, subd. 1(b)(10))
- Operational Procedures
 - Instructor/Student Ratio (MS 144E.285, subd.1(b)(5))
 - Instructor Recruitment Process
 - Instructor Orientation Process
 - Instructor Performance Evaluation
 - Student Performance Criteria
 - Student Evaluation & Remediation
- Course Notification** (MS 144E.285, subd.1(b)(8))
- Student Course Completion Confirmation (e-Licensing system)

INSTRUCTIONAL AIDS AND EQUIPMENT (MS 144E.285 subd. 1(b)(1)(v))

- Classroom/Office**
- Didactic Classroom Space
 - Practical Skills Practice Area
 - Educational Aids (AV equipment, PowerPoint, computer(s))
- Personal Protective Equipment:** gloves, masks, gowns, eye protection
- Mechanical Aids to Breathing**
- Intubation Manikin
 - O2 Cylinder with regulator
 - O2 Delivery Devices (NRM, nasal cannula, connection tubing)
 - Bag-Valve-Mask Device with reservoir (adult, child, infant)
 - Oro/Nasopharyngeal Airways
 - Supraglottic Airway (Combitube, PTL or King LT)
 - Suction Device (tubing, rigid & flexible catheters, sterile water)
- CPR Equipment**
- Manikins (adult, child, infant & supply of disposable parts)
 - Manikin Cleaning Supplies
 - AED Trainer(s)
- Patient Assessment & Vital Signs:** (BP cuffs, stethoscope, penlight)
- Spinal Injury Management Equipment**
- Long Spine Board with securing straps
 - Short Spine Board with securing straps or Vest-type device
 - Head Immobilization device
 - Cervical Collars (various sizes)
- Splinting & Bandaging Equipment**
- Fixation Splints (board, air, vacuum, commercial)
 - Traction Splint
 - Tourniquet, Dressings & Bandages (various: bleeding, burn, roller)
- Advanced Emergency Medical Technician**
- Blood Glucose Monitor
 - IV Infusion (infusion arm, catheters, solutions, administration sets)
 - IO Infusion (manikin, needles and/or drill device)
 - Medication Administration (prefilled meds, syringes, needles, sharps)
 - Moulage Kit or similar substitute
- Enrichments (please list any additional)**
- Extrication (various extrication tools & supplies)
 - Other: _____

Comments: _____

Program Approval: Yes No

Correction Order Issued: _____ **Number(s):** _____

Licensee Authorized Official: _____	Date: _____
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EMSRB Authorized Official: _____	Date: _____
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AEMT / PARAMEDIC PROGRAM APPLICATION

STATUTES:

- **MS §144E.285 & MS § 144E.27 Education Programs:** Subd.1 & Subd.1 (a): All education programs for EMR, EMT, AEMT, or paramedic must be approved by the Board.

Program Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____ Cell _____ Fax _____

E-mail _____ Date _____

Requesting Approval for the Following Programs: Please Check Appropriate Programs

AEMT ***Length of course** _____

Included is proof of accreditation or self-study information submitted for review.

Paramedic ***Length of course** _____

Included is proof of accreditation or self-study information submitted for review.

An additional application for approval at the Basic Levels (EMR/EMT) is attached.
(Applicants applying for approval at both the basic and advanced levels must complete two applications.)

***Course Length is Based on Competency Not Hours.** Course should include didactic, laboratory, clinical & field experience as recommended in the National Education Standards.

Program Information and Personnel

Education Program Coordinator

MS § 144E.001, Subd.14. Education Program Coordinator:

"Education program coordinator" means an individual who serves as the administrator of an emergency care education program and who is responsible for planning, conducting, and evaluating the program; selecting students and instructors; documenting and maintaining records; developing a curriculum according to the National EMS Education Standards by the National Highway Transportation Safety Administration (NHTSA), United States Department of Transportation; and assisting in the coordination of examination sessions and clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____

Instructor Qualifications: _____

Education Program Medical Director

MS § 144E.001, Subd.11. Program medical director:

"Program medical director" means a physician who is responsible for ensuring an accurate and thorough presentation of the medical content of an emergency care education program; certifying that each student has successfully completed the education course; and in conjunction with the program coordinator, planning the clinical education.

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Clinic or Hospital Employed By: _____

Minnesota M.D. License Number: _____

Course Faculty

(As approved by the Medical Director)

MS § 144E.285, Subd. 1(b) (4) Education Programs:

(b) To be approved by the board, an education program must: (4) utilize instructors who meet the requirements of section 144E.283 for teaching at least 50 percent of the course content.

MS § 144E.27, Subd.1. Education Programs: *An [Emergency Medical Responder] education program instructor must be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant, or registered nurse.*

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Use Additional Sheets as Necessary

Guest Lecturers (Adjunct Faculty)

(As approved by the Program Coordinator or Medical Director)

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Name: (Last) _____ (First) _____ (MI) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Certification Level & Number: _____ Emer. Med. Experience: _____

Instructor Qualifications: _____

Use Additional Sheets as Necessary

Clinical Training Sites

(written agreement with site (s) must be available for review)

MS § 144E.285 subd.1 (b) (6) Education Programs:

(b) To be approved by the board, an education program must: (6) maintain a written agreement with a licensed hospital or licensed ambulance service designating a clinical training site;

(EMR does not currently require clinical experience)

Clinical Site: _____

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Clinical Site: _____

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Clinical Site: _____

Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

E-mail: _____ Agreement on File: (Y) (N)

Use Additional Sheets as Necessary

Admission Criteria for students

(Admission forms must be available for review)

Please list all criteria for admission to your program.

EMSRB Student Enrollment Form (completed and available for on-site review)

Instructor Recruitment and Orientation

(Program procedure must be available for review)

Please list all criteria for recruitment and orientation of instructors for your program.

Instructional Aids and Equipment

Please check appropriate boxes.

- Didactic Classroom Space
- Technical Equipment (i.e.: computer, A/V equipment.)
- Textbook
- Workbook corresponding to textbook
- Course Outlines, lesson plans
- Quizzes and exams
- Student Guides and Reference Materials
- Guest lecturers
- Enrichments
- Records Retention Policy
- Practical Skills Practice Area – student/instructor ratio
- Equipment (see Inspection Form or Appendix A)
- Clinical/Field Rotations – overview, objectives and guidelines

Original
Signature: _____ Program Coordinator Date: _____

Name: _____
(Please print)

I, _____, Medical Director of _____
Education Program have reviewed and approved the contents of this application.

Original
Signature: _____ Date: _____

Name: _____
(Please print)

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Application for EMT-Paramedic Certification Renewal

The information requested will be used to determine your qualifications for renewal of your current certification. This information is public data. If you prefer not to make your home address available to the public, you may designate another address as your address of record. You are legally required to provide true information. Refusal to supply the requested information may result in the denial of your certification. Falsification or misrepresentation of information may be used by the EMSRB as a basis for disciplinary action.

Name: _____ EMSRB certificate #: _____

Address: _____ Telephone #: _____

City, State, Zip Code: _____

Employing Minnesota ALS Ambulance Service (if applicable): _____

Renewal requirements for EMT-Paramedic are set forth in Minnesota Statutes, section 144E.28, subdivision 7, paragraph (b), clause (1) and (2), which provides:

Before the expiration date of certification, an applicant for renewal of certification as an...EMT-P shall: (1)... for an EMT-P, successfully complete a course in advanced cardiac life support that is approved by the board or the licensee's medical director; and (2) successfully complete 48 hours of continuing education in emergency medical training programs, appropriate to the level of the applicant's ... EMT-P certification, that are consistent with the United States Department of Transportation National Standard Curriculum or its equivalent as approved by the board or as approved by the licensee's medical director. An applicant may take the United States Department of Transportation Emergency Medical Technician refresher course or its equivalent without the written or practical test as approved by the board, and as appropriate to the applicant's level of certification, as part of the 48 hours of continuing education. Each hour of the refresher course, the cardiopulmonary resuscitation course, and the advanced cardiac life support course counts toward the 48-hour continuing education requirement.

Please complete the following record of your continuing education. If you wish to attach documentation, please feel free to do so. **Renewal requires completion of a disclosure statement, which can be found on the EMSRB website.**

Date of Course	Course Name	Instructor's Name	Number of Hours

COMPLAINCE MANUAL REVISIONS INFORMATION

REVISED: 2013-11

Page v: Paramedic refresher requirement & EMT Refresher requirements corrected.

Page 22: Note added on NIMS Refresher requirements in accordance with EMS Education Standards.

Page 32: Tab4 "Purpose of Section" - clarification made to statement.

Page 51: Statute cite MS 144E.285, subd. 1 (b)(6) corrected to MS 144E.285, subd. 1 (b)(5)

Page 103: Clarification to applicant form completion.

Page 108: Clarification of failure results for Initial & refresher levels.

Page 141: Added Compliance Manual revision information.