

Oregon Department of Education
Office of Educational Improvement and Innovation

Emergency Medical Technician Program
Accreditation Manual



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This Accreditation Manual is designed to assist administrators, faculty, support staff, and community partners as they prepare for the Emergency Medical Technician program / course accreditation process. The manual is intended to be a procedural guide through the Oregon Administrative Rules which govern accreditation of emergency medical technician training programs. A step-by-step approach to the entire accreditation process is provided.

Questions regarding the contents of this manual, or the EMT accreditation process should be addressed to:

Oregon Department of Education
255 Capitol St NE
Salem, OR 97310-0203

Program accreditation granted by ODE/CCWD is valid for a period of five years, unless major changes in the program occur.

If major changes occur (new administrator or director, budgetary limitations, equipment shortages, etc) the college or institution **must** notify ODE immediately. An on-campus visit may be necessary to ensure that standards continue to be met.



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INTRODUCTION

Emergency Medical Technicians (EMT) provide vital medical care and safe patient transport in the field (outside the hospital or clinical setting). The profession has evolved from providing very basic pre-hospital first-aid, some basic medical services, and transport to professional medical care where sophisticated life saving skills and techniques are performed. As this evolution occurred, the Oregon Department of Education (ODE), the Department of Community Colleges and Workforce Development (CCWD), and the Oregon Department of Human Services, Emergency Medical Services & Trauma Systems Section (DHS EMS & TS) have taken steps to ensure that those providing emergency medical care to its citizens are adequately educated and trained.

The Emergency Medical Services & Trauma Systems Section of the Oregon Department of Human Services, the Oregon Department of Education (ODE) for Oregon Department of Education and the Department of Community Colleges and Workforce Development, and the Oregon Board of Medical Examiners (BME) all contribute to the above mentioned educational standards. These agencies have made a conscientious effort to work cooperatively with each other, and with the institutions providing EMT education and training, to provide high quality education and avoid conflicting rules and regulations.

AUTHORITY

The Emergency Medical Services & Trauma Systems Section, through the Oregon Department of Human Services, has regulatory responsibility for the certification and educational curriculum of Emergency Medical Technicians (EMT) in Oregon.

See Oregon Administrative Rule Chapter 333, Division 265 for more details.

The Oregon Department of Education, through the State Board of Education, ensures that all EMT preparatory programs provided by Oregon Community Colleges and Private Career Schools meet the needs of students, employers and Oregon citizens.

See Oregon Administrative Rule Chapter 581, Division 049 for more details.

The Board of Medical Examiners regulates the scope of practice for all EMTs and sets the standards for medical directors and physicians supervising EMTs.

See Oregon Administrative Rule Chapter 847, Division 035 for more details.

PURPOSE

The purpose of accreditation is to ensure that EMT programs provide quality education. Accreditation is a process of internal and external review. After completing the accreditation process, programs will:

- Receive assurance that the program of study meets identified educational standards.
- Receive professional judgment as to the quality of the program in its institutional setting.
- Receive encouragement to continue the ongoing improvement process.

The process of program accreditation provides the following benefits:

- Provides consistency between institutions.
- Assures students and stakeholders that the program, including instructional staff, meet the accreditation standards.
- Protects the program against internal and external pressures to modify materials, methodology or management practice for other than sound educational reasoning.
- Involves the administration, faculty, support staff, and community partners in program evaluation and planning.
- Stimulates self-improvement of the program, including the continued professional development of a qualified teaching faculty.

DEFINITIONS

BME	Board of Medical Examiners
CCWD	Department of Community Colleges and Workforce Development
DHS	Oregon Department of Human Services
EMS	Emergency Medical Services
EMS & TS	DHS Emergency Medical Services & Trauma System Section
EMT	Emergency Medical Technician
NREMT	National Registry of Emergency Medical Technicians
OAR	Oregon Administrative Rule
ODE	Oregon Department of Education
ORS	Oregon Revised Statute

INITIAL COURSE APPROVAL AND PROGRAM ACCREDITATION

Prior to offering an EMT course for the first time, approval must be obtained from ODE/CCWD by submitting one of the following:

- An application for approval of a vocational supplementary course; or
- An application for Board of Education approval of a new professional technical program.

Contact ODE/CCWD for further information on the initial approval process.

Institutions setting up an EMT program for the first time should contact both DHS EMS & TS and ODE to learn what parts of the accreditation process must take place prior to offering any courses, and to schedule an initial accreditation site visit.

RE-ACCREDITATION

Program accreditation is granted for a five-year period. Every five years, or when a major change(s) is made in the program or its administration, the institution must submit its program for review. The review involves submission of a program self-study to ODE followed by an on-site visit by the accreditation team.

The on-site team will make recommendation(s) to accredit the program, or will identify and recommend deficiencies that must be eliminated before accreditation be granted and the program allowed to continue.

The accreditation and re-accreditation process includes:

- A self-study completed by the institution.
- A site visit by a team with expertise in EMT education and training; and
- A report of findings by the accreditation team which includes commendations, recommendations and deficiencies.

TIMELINES FOR THE ACCREDITATION PROCESS

Spring/Summer:	Prior to the academic year in which the accreditation expires, the institution president or chief executive officer (CEO) will be notified by ODE of the intent to evaluate the EMT program for accreditation during the upcoming year.
Fall:	The ODE Specialist or designee will contact the program administrator to establish timelines for the accreditation process and a date for the site visit. A letter of confirmation including the negotiated dates will follow the initial contact. Information on the accreditation process and self-study report will be enclosed with the confirmation letter.
One Month Prior to Site Visit:	The self-study is to be completed by the institution and copies submitted to ODE and the site visit coordinator for distribution to all visiting team members. 1 copy to ODE, 3 to the team coordinator.
Two Weeks Prior to Site Visit:	The institution will provide an agenda for the site visit to the ODE specialist or designee for distribution to visiting team members.
One Week Prior to Site Visit:	The ODE accreditation team coordinator will contact the program administrator and team members to answer any questions and confirm the specifics of the visit.
The Site Visit	The accreditation team will follow the agenda provided by the college to visit campus services, facilities and clinical/intern sites and to meet with program administrators, teaching faculty, advisory committee, support staff, students, etc. A sample agenda is included in the Appendices. Team members will review and confirm information presented in the self-study report for accuracy and consistency against ODE and OHD/EMS requirements. An exit interview will be conducted with the program administrators, and perhaps others, at the conclusion of the visit.
Within 30 Days Following the Site Visit	<p>A report of the findings of the accreditation team will be completed and sent to the president or chief administrator of the institution. If deficiencies are identified, the institution will have 90 days to respond to the deficiencies. If no deficiencies are found, the program will be re-accredited for a new five-year period. DHS EMS & TS will be notified of the accreditation status.</p> <p>If the chief administrative officer disputes the reported deficiencies, a hearing may be requested within 10 days of the date the report was received and a hearing will be held consistent with ORS Chapter 183.</p>
Within 90 days After the Visit:	<p>If deficiencies are identified, the institution must respond to ODE regarding corrective measures completed, or a plan to eliminate deficiencies before any new courses may begin.</p> <p>A letter indicating full accreditation, probation, or program suspension from ODE to the institution will conclude the process.</p>

SITE VISIT DETAILS

The site visit process provides the opportunity to validate and/or clarify the contents of the Self-Study Report and to determine the extent to which the program complies with the OARs for EMT programs.

The team will generally include the following:

- A team coordinator assigned by ODE who is knowledgeable about the laws and administrative rules related to EMT programs and who is familiar with the Oregon community college and private career school systems.
- A representative of DHS EMS & TS.
- An educator with expertise in Emergency Medical Services.

The visit will encompass a period of no more than two days during which the site team will review and confirm the information presented in the community college's Self-Study Report. The team will look for information that is accurate, consistent with ODE state requirements, and meets the requirements of DHS EMS & TS.

The team will meet with selected administrators, instructors, clinical supervisors, intern preceptors, advisory committee members, counselors, students, medical director and others. They will visit the classrooms, clinical and intern sites and review institutional resources, instructional materials, equipment, student records and school and admissions policies related to the EMT program.

At the conclusion of the visit, an exit interview will be held with the program administrator and others invited by the program administrator (e.g., dean, instructors, advisory members, etc.). A verbal non-binding report on the commendations, potential deficiencies and recommendations of the team will be presented at this time.

PREPARATION

In preparing for the site team visit, please include:

- A place for the team to meet privately.
- Transportation to any off-campus site visits.
- Lunch facilities, morning and afternoon coffee breaks.
- Directions and maps of campus and the local area, parking instructions and passes, if necessary. Include directions for finding the appropriate department on campus.

Reimbursement for team member lodging and travel is the responsibility of ODE.

AGENDA

The agenda for the site visit will vary from one institution to another depending on the EMT level (Basic, Intermediate, Paramedic) offered, the number of classes and locations offered, the distance between visitation sites, etc. A sample agenda is provided in the appendix.

Most visits will include the following:

1. An opening session providing an overview of the region, school, and program and to review and answer questions about the self-study. Generally the following persons are included in this meeting:
 - The division dean or associate dean;
 - The EMT program administrator;
 - Administrative support staff;
 - The course/program coordinator or lead instructor; and
 - Others involved with the EMT Program and deemed appropriate by the college.
2. Opportunities for the visiting team to meet with:
 - Instructors, lab assistants, preceptors, clinical coordinators; and assigned field;
 - A counselor or advisor who works with EMT and/or allied health students;
 - The registrar or appropriate persons in records and registration;
 - Students from various levels (if a class is in session during the site visit, schedule 20 to 30 minutes for team members to visit with students in the classroom); and
3. Visits to:
 - Advisory committee members.
 - Classrooms and laboratory settings to see the facilities and equipment available for student use;
 - Faculty offices;
 - Independent study areas, resource center, library and audio-visual center;
 - Some clinical sites as appropriate.
 - Off-campus sites where classes are available such as fire departments, campus extension facilities; and
 - EMS agencies where students do clinical rotations or internships, as appropriate.
4. If not included in the self-study, please have the following available in one area for team review:
 - Records and registration data;
 - Admission policies and procedures;
 - Student counseling or advising data, tutoring, career planning and placement services data;
 - Institution catalog;
 - Lesson plans, course outlines and syllabi including course and class objectives, textbooks and periodicals;
 - A selection of unit tests and quizzes, mid-term and final exams;
 - Examples of clinical evaluation forms;

- EMT-Paramedic prehospital charts and evaluation forms, if appropriate;
 - Student course evaluations and program completer follow-up evaluations;
 - Current class lists and, as appropriate, program enrollment lists;
 - Course attendance rosters
 - Copy of the safety policy of the institution;
 - Evidence of liability insurance;
 - Program recruitment brochure or other materials, any student handbooks distributed by the institution, department or the program; and
 - Application form(s) for the EMT program or coursework.
5. Schedule approximately one-half to one hour for the exit interview. The team will give a preliminary report of their findings. The same individuals invited to the opening session should be invited to the exit interview.

SITE VISIT REPORT

Upon completion of the site visit, the accreditation team will prepare a written report to be submitted to the Assistant Superintendent for the ODE. A copy of the report will be sent to the college within 30 days after the visit. A letter from the ODE Assistant Superintendent will accompany the report notifying the college of its accreditation status. Colleges and private career schools will be accredited for specific levels of EMT instruction offered.

If no deficiencies are found, ODE will accredit the EMT program for five years, unless significant changes are made in the program or its administration. ODE will notify DHS EMS & TS of the accreditation status.

If deficiencies are found, the institution will have 90 days to respond to ODE regarding those deficiencies and steps being taken to meet the requirements. If the deficiencies cannot be corrected within 90 days, the college may submit a detailed plan to correct each deficiency. Upon ODE approval of the plan, the college may continue to offer EMT courses with conditional accreditation. Once the deficiencies have been resolved, a follow-up visit by the specialist and/or the accreditation team may be necessary to assure compliance with the standards.

CORRESPONDENCE

Copies of all correspondence regarding the accreditation process will be sent to:

- The EMT program administrator at the institution;
- The Commissioner of the Oregon Community College Services or the Director of the Private Career Schools, Oregon Department of Education, whichever is appropriate;
- The Assistant Superintendent of the Oregon Department of Education/Department of Community Colleges and Workforce Development; and
- The EMS & TS Section, Oregon Department of Human Services.

STANDARDS AND SELF-STUDY OUTLINE

The self-study is a process of internal program review, analysis and assessment of the educational program conducted by the faculty and other appropriate members of the academic and professional community. The self-study report is keyed to the Oregon Administrative Rules (581-49-000 through 040 and 333-265-000 through 030) which sets forth the program standards for EMT education.

This section outlines the data collection and questions to be answered in the self-study. Documentation guidance follows each component of the self-study process.

Summary of Elements to be Included in a Self-Study

- A. Program Data
- B. Instructional Program
- C. Staffing
- D. Financial Resources
- E. Facilities
- F. Instructional Aids, Supplies and Materials
- G. Equipment
- H. Support Services
- I. Admission Policies and Procedures
- J. Program Information
- K. Job Search and Placement
- L. Advisory Committee
- M. Safety
- N. Student Records
- O. Program and Course Evaluation

A. Program Data

1. Name and address of community college or private career school.
2. Name, title and phone number of person preparing self-study.
3. Name, title and phone number of program administrator.
4. Institutional accreditation status. (e.g. Northwest Association of Schools and Colleges, Commission on Accreditation of Allied Health Education Programs).
5. Program title and levels of EMT courses offered.
6. Type of degree or certificate offered, if applicable.
7. List the number of students enrolled in the program as described below;
 - Number of classes (all levels of EMT) offered during the past two years.
 - Number of students enrolled in each class listed above.
 - Number of students completing / dropping the classes listed above.
 - Pass/fail rates on NREMT / state certifying exams for classes listed above.
8. Degrees and Certificates Conferred
 - Number of EMT related Associate Degrees or Certificates conferred during the past two years, if applicable.
9. If this program articulates with secondary programs, please describe.

10. Provide a narrative on the historical development, goals and objectives of the program and any unique characteristics.

B. Instructional Program

1. State the length of the program(s) and or the course(s) offered. Include the number of clock and credit hours, and type of degree/certificate offered if applicable.
2. List any and all courses which comprise the total curriculum. Include course numbers, titles, credit values and clock hours for didactic, clinical and internship components of each course.
3. Include copies of all DHS EMS & TS course approval forms for courses offered in the past two years.
 - The Division shall approve an EMT course conducted by an Oregon teaching institution.
Ref: OAR 333-265-0010(1)

Didactic Instruction

4. Describe how the curriculum follows the DHS EMS & TS prescribed curriculum at each level.
 - Each EMT course shall follow, without substantial variation, DHS EMS & TS prescribed curriculum for the level of EMT course being presented.
Ref: OAR 581-049-0020(2)
 - *Refer to OAR 333-265-0010(2) for the DHS EMS & TS approved curriculum.*

Include an appendix with a copy of all course outlines, including the course description, goals and objectives and other information as appropriate. Also include a sample syllabi in the self-study with others available for review during the site visit.

- Courses must have outlines and or syllabi that include course description, goals and objectives stated in terms of competencies students are expected to achieve upon successful completion.
Ref: OAR 581-049-0020(2)(a)
- Each student must receive a course syllabus in a timely fashion at the beginning of each course.

Clinical Instruction

5. Provide a comprehensive list of agencies where students complete clinical observations and or ride times. List the names, titles and phone numbers of the primary contact between the school and each agency listed.
 - Current written agreements must be in place between the institution and each clinical facility. These agreements should be available for review during the site-visit.
Ref: OAR 581-049-0020(2)(b)
 - Clinical affiliation agreements should clearly identify program and institution responsibilities for clinical supervision.
6. Provide a copy of the goals and objectives for each clinical rotation site.
 - Goals and identified competencies to be attained shall be written for each clinical rotation site.
Ref: OAR 581-049-0020(2)(b)(A)
 - Each student must receive a copy of the clinical rotation site goals and competencies prior to each clinical experience.
Ref: OAR 581-049-0020(2)(b)(A)
7. Describe how the overall clinical resources are educationally efficient and effective in achieving the program's goals and objectives.

- Students shall be assigned to clinical settings where experiences are educationally efficient and effective in achieving the program's goals and objectives.
Ref: OAR 581-049-0020(2)(b)(B)
8. Describe the supervision that occurs in each clinical rotation.
 - Students in clinical settings shall be supervised by appropriate medical personnel or by an instructor from the program as outlined in the written affiliation agreement.
Ref: OAR 581-049-0020(2)(b)(C)
 - The ratio of students to instructors in the clinical facilities shall be adequate to ensure effective learning.
Ref: OAR 581-049-0020(2)(b)(C)
 9. Provide any evidence to suggest that students have adequate and appropriate access to patients in each clinical setting.
 10. Provide any evidence to suggest that clinical sites are adequate to meet program goals.

Field Internships

11. Provide a comprehensive list of agencies where students complete internships. List the names, titles and phone numbers of the primary contact between the school and each agency listed.
 - Current written agreements must be in place between the institution and each agency. These agreements should be available for review during the site-visit.
Ref: OAR 581-049-0020(2)(c)(A)
 - Internships shall meet or exceed the requirements of DHS EMS & TS, as defined in OAR 333-265-0010(2)(c)(D).
Ref: OAR 581-049-0020(2)(c)

- Field internship sites must provide sufficient experience to permit every student enrolled to complete program and state requirements within the timeframe of the approved course.

Ref: OAR 581-049-0020(2)(c)(A)

12. Describe the process by which students are assigned preceptors.

- A clinical preceptor shall be assigned to supervise each student intern.

Ref: OAR 581-049-0020(2)(c)(B)

13. Describe the medical accountability in each internship site.

- All field internships shall occur within an emergency medical system which demonstrates medical accountability.

Ref: OAR 581-049-0020(2)(c)(B)

14. Provide a copy of the written goals and competencies to be attained by the student during the field internship.

- Written goals and competencies to be attained shall be established for all field internships.

Ref: OAR 581-049-0020(2)(c)(C)

- Goals and competencies must meet or exceed DHS EMS & TS requirements, as stated in OAR 333-265-0010.

Ref: OAR 581-049-0020(2)(c)(C)

- Copies of the goals and competencies must be received by the student and preceptor.

Ref: OAR 581-049-0020(2)(c)(C)

C. Staffing

1. Describe the qualifications of the program administrator, and attach a resume or CV, and position description.

- The program administrator should be responsible for managing all aspects of the program, including the

organization, administration, and evaluation of the program.

Ref: OAR 581-049-0020(3)

- Acquisition of adequate resources and staff to assure a quality program is a primary responsibility of the administrator.

Ref: OAR 581-049-0020(3)

- The program administrator shall be a senior manager or administrative officer with general managerial responsibility who has training and experience in education administration and evaluation (i.e., dean, associate dean, administrator, or associate administrator).

Ref: OAR 581-049-0020(5)

2. List the course director for each course presently being offered, or that has been offered in last the two years. Provide documentation indicating that each director meets the requirements as outlined in OAR 333-265-0020(1)(c), 2, 3, and 4.

Ref: OAR 581-049-0020(6)

- The course director for a specific course must have appropriate training and experience to fulfill the role and hold credentials which demonstrate at least equivalent training and experience.

Ref: OAR 333-265-0020(1)(c)(A)

- Additional requirements for course directors can be found within OAR 333-265-0020.

3. Provide a list of lab assistants, and their level of certification. Indicate which classes they assist with.

4. Provide a list of guest lecturers, and topics they present.

- It is the responsibility of the course director to establish that each guest lecturer possesses the necessary expertise and teaches in compliance with all course standards.

Ref: OAR 581-049-0020(7)

5. Identify the medical director, and briefly describe his or her background and role within the program.
 - The medical director must meet the qualifications of a supervising physician as defined in OAR 847-035-0020.
Ref: OAR 333-265-0020(1)(b)
 - The medical director shall currently be approved by DHS EMS & TS as an EMT supervising physician.
Ref: OAR 581-049-0020(8)
 - The medical director shall advise the program administrator and course director on medical aspects of the EMT program.
Ref: OAR 581-049-0020(8)
6. Describe any financial support provided to faculty to meet continuing education requirements.
 - It is recommended that financial support be provided for faculty education to keep mandatory certifications current.
Ref: OAR 581-049-0020(9)

D. Financial Resources

1. What is the amount of the annual operating budget for the program?
 - The operational budget for the program shall be sufficient to maintain the continuous operation of the program.
Ref: OAR 581-049-0020(10)
2. Provide evidence that the financial resources are assured for continued operation of the classes for the students enrolled.
3. Does the program administrator have direct control over budget expenditures and allocations?

4. Does the budget provide adequate funds for instructional materials, supplies, equipment repair, etc.?
5. Where might the program put additional resources, if available?
6. How is funding for new and replacement equipment procured?

E. Facilities

Classrooms, laboratories, administrative and faculty offices shall be provided with sufficient space to accommodate the number of students enrolled in the program and the program faculty.
Ref: OAR 581-049-0020(11)

Classrooms

1. List the location of class(es). Be specific (e.g., building number or room number, etc.). If classes are offered off campus, give specific location(s).
 - Classrooms at all locations must have adequate lighting, ventilation, and storage for instructional materials and equipment.
Ref: OAR 581-049-0020(11)(a)
 - All furniture must be in good repair and comfortable, with appropriate writing surfaces.
Ref: OAR 581-049-0020(11)(a)
 - Laboratory space shall be available for student to practice skills. Floors, where skills are practiced, shall be covered with carpet or other appropriate protective materials.
Ref: OAR 581-049-0020(11)(b)
 - Running water shall be available in the class / lab facility.
Ref: OAR 581-049-0020(11)(b)
 - All rooms shall meet all Oregon Occupational Safety and Health Administrative standards.
Ref: OAR 581-049-0020(11)(b)

- Each classroom site shall have sufficient toilet facilities to reasonably accommodate the number of students enrolled in the course.
Ref: OAR 581-049-0020(11)(c)
2. List the location of staff and faculty office space(s).
 - Administrative staff and faculty shall be provided adequate office space to manage the program, keep adequate records and instructional materials, and prepare lesson plans.
Ref: OAR 581-049-0020(11)(d)
 3. List the location of where faculty / student conferences may occur.
 - Space shall be provided for confidential faculty / student conferences.
Ref: OAR 581-049-0020(11)(d)

F. Instructional Aids, Supplies, and Materials

Sufficient up-to-date instructional aids, supplies, and materials shall be provided to facilitate learning for the number of students in the program and the level of EMT course being offered.
Ref: OAR 581-049-0020(12)

1. List the teaching aids and instructional materials readily available to the instructor(s).
 - Teaching aids and instructional materials shall be readily available to the instructor.
Ref: OAR 581-049-0020(12)(a)
2. List AV materials and equipment available for instructor and student use.
 - Adequate AV materials and equipment shall be available for instructor and student use.
Ref: OAR 581-049-0020(12)(b)
3. Identify independent study areas with TV monitors / audio outlets that

are available for student use as needed.

- Independent study areas with TV monitors / audio outlets shall be available for student use as needed for make-up work and independent study.
Ref: OAR 581-049-0020(12)(c)
4. Identify budget allocations for supplies and annual updating of instructional materials.
 - The budget shall provide for supplies and annual updating of instructional materials.
Ref: OAR 581-049-0020(12)(d)

G. Equipment

Each EMT course shall be supported by the prescribed quantity of equipment necessary to support the level of EMT education and training being provided.
Ref: OAR 581-049-0020(13)

1. List equipment available at each site for student use as well as for laboratory demonstration. Indicate quantities available for students use and note their adequacy for the programs offered. Include a copy of the plan to replace and upgrade equipment.
 - Equipment shall be technologically up-to-date and readily accessible to faculty and students.
Ref: OAR 581-049-0020(13)(a)
 - All equipment shall be kept in good repair.
Ref: OAR 581-049-0020(13)(b)
 - An annual and long-term budget for capital equipment shall be in place to maintain and provide for replacement of equipment.
Ref: OAR 581-049-0020(13)(c)

H. Support Services

Support services necessary to ensure student success shall be made available to all students in EMT programs. These services include, but are not limited to, library, counseling, tutoring, and placement services.

Ref: OAR 581-049-0020(14)

1. Provide a list of periodicals and books available for student use, and indicate the location of where these materials are located.
2. Indicate the operating hours of the library. If off campus EMT courses are held, indicate how students access library materials.
 - A library with appropriate up-to-date periodical and books open during hours which will provide maximum accessibility to students is required.
Ref: OAR 581-049-0020(14)(a)
3. Describe the counseling staff available for academic and career planning.
 - Counseling staff must be available for academic and career planning.
Ref: OAR 581-049-0020(14)(b)
4. Describe the tutoring assistance available to students. How are they made aware of such services?
 - Tutoring assistance must be available on an “as needed” basis.
Ref: OAR 581-049-0020(14)(c)
5. Describe student recruitment efforts.
 - Funding and staff time must be available to facilitate student recruitment, selection, and placement.
Ref: OAR 581-049-0020(14)(d)

6. Describe the process for taking placement tests, and how the results are utilized.

- Students are required to pass reading and math placement tests at appropriate levels for each course prior to acceptance into the program.
Ref: OAR 581-049-0020(14)(d)

I. Program Admission

Admission of students shall be made in accordance with clearly defined and published practices of the institution. Specific academic and technical requirements for program and course admission shall also be clearly defined and published. The standards and prerequisites shall be made known to all potential program applicants.

Ref: OAR 581-049-0020(15)

1. Describe the student selection process. Include a description of the methods or criteria used.
2. Provide copies of admission policies, recruitment materials, and all information provided to prospective or enrolling students.
3. If applicable, quantify the number of students turned away from the program each offering.

J. Program Information

The program shall comply with ORS 659.850 and shall not discriminate with respect to race, religion, sex, marital status, age, disabling condition, or national origin.

Ref: OAR 581-049-0020(18)

Accurate information regarding program requirements, tuition and fees, institutional and programmatic policies, procedures and supportive services shall be available upon request to all prospective students and provided to all enrolled students.

Ref: OAR 581-049-0020(16)

1. Describe where students receive information about class or program entrance procedures. This includes information such as tuition and fees, institutional and program policies, procedures and support services.
 - Include a copy of the institution catalog and EMT Student Handbook (if applicable), or other documents used to inform students.
 - Include a copy of all course outlines, class and lab schedules, and a sample clinical / internship schedule if applicable. If course outlines are the same as requested in Section B of this document, please cross reference.
2. Describe the number of written and practical examinations or evaluations for each course offering.
 - Each approved course shall culminate in written and practical certification examinations prescribed by the DHS EMS & TS. For academic purposes, a teaching institution may administer its own final written and practical examination prior to the conduct of DHS EMS & TS certification examinations.

Ref: OAR 581-049-0020(19)(a)

3. Describe how students are evaluated in cognitive, affective and psychomotor performance for each course.

4. Describe how the institution complies with DHS EMS & TS and NREMT standards for conducting certifying examinations. Include information such as who administers the exam (for most schools, this will be a testing center) and how practical evaluators are verified to be in good standing with DHS EMS & TS prior to each examination.

- The written certification examination shall be administered by a proctor provided by the teaching institution. The proctor shall be subject to the approval of DHS EMS & TS, shall not be certified as an EMT at any level, and shall not be otherwise involved in the delivery of EMT training.

Ref: OAR 581-049-0020(19)(b)

- Evaluators for the final practical examination shall be individuals meeting the requirement prescribed by DHS EMS & TS to serve as final practical examination evaluators. A DHS EMS & TS representative shall be present at final practical examinations and shall provide evaluations instruments to be used in the conduct of all final practical evaluations.

Ref: OAR 581-049-0020(19)(c)

K. Job Search and Placement

Students who successfully complete the program shall be provided access to job search and placement services.

Ref: OAR 581-049-0020(20)

1. Describe the job search and placement program at the institution.
2. How do students learn about the career center and the placement services?

L. Advisory Committee

Each program shall have an advisory committee to provide guidance and information regarding local community practices and needs.

Ref: OAR 581-049-0020(21)

1. Describe the make up of the advisory committee, how members are selected, retained and replaced. Include a list of names, titles, places of employment, and phone numbers of all committee members.
 2. Describe how often the advisory committee meets and how they contribute to the program. Include meeting minutes for the past two years.
- The advisory committee shall consist of representatives from local employers of EMT personnel, current or former students, and other community members as appropriate. The medical director shall be a member of the advisory committee and serve as a primary source of information. A roster of the advisory committee members, their place of employment and phone numbers shall be kept on file and easily accessible.

Ref: OAR 581-049-0020(21)(a)

- The advisory committee shall meet a minimum of three times each year and minutes of the meeting shall be recorded and kept on file.

OAR 581-049-0020(21)(b)

M. Safety

A safe working and learning environment shall be provided to all students and staff so students can learn to be safety conscious in the classroom and carry that consciousness into practice in the clinical and internship experience and ultimately into the profession.

Ref: OAR 581-049-0020(22)

1. Attach a copy of the safety policy.
 2. Attach a copy of the most recent safety inspection.
 3. Identify the administrator responsible for monitoring the safety policy.
- The teaching institution shall have a safety policy that meets all state and federal requirements. The teaching institution shall identify an administrator who is responsible for monitoring the safety policy and assures that regular safety inspections are made and documented.

Ref: OAR 581-049-0020(22)(a)

4. Describe how the institution verifies that it complies with the Oregon Safe Employment Act, OR-OSHA standards, and ORS 656.046.

- All instructional activities shall be carried on in accordance with the Oregon Safe Employment Act, OR-OSHA standards, and ORS 656.046 (Jan 1995), which requires coverage of person in college work experience vocational education programs.

Ref: OAR 581-049-0020(22)(b)

- Occupational safety shall be an integral part of the curriculum.

Ref: OAR 581-049-0020(22)(c)

5. Attach a copy of applicable insurance policies.

- Each student enrolled in the program shall be covered by professional liability insurance in the amount of not less than \$1,000,000 per occurrence. Copies of the insurance policies documenting the coverage shall be on file at the institution.

Ref: OAR 581-049-0020(22)(d)

N. Student Records

The institution shall maintain complete, accurate student records in a safe, secure place within the educational institution.

Ref: OAR 581-049-0020(23)

1. Describe the institution or program record retention policy (for how long do you keep records, where, and how?).
 2. How are records stored for classes currently in session?
 3. Describe what records are kept.
- The following records shall be maintained until the student has been certified by DHS EMS & TS at the level corresponding to the education program or for a minimum of five years following the student's enrollment in the program:
Ref: OAR 581-049-0020(23)(a)
 - Student admission into the program (A)
 - Class attendance (B)
 - 85% of didactic hours, 100% of clinical and field hours, and completion of all required clinical and internship skills and procedures is required.
Ref: OAR 333-265-0010(6)
 - Evidence of competencies attained throughout (C)
 - Copies of examinations and assessments throughout the program (D)
 - Evidence of satisfactory completion of all didactic, clinical,

and field internship requirements (E)

4. Describe what documentation exists indicating that students have successfully completed all required didactic, skills, and internship requirements prior to certification exams.

- Prior to certification exams, the course director must have written documentation indicating that a student has successfully completed all required didactic material, properly demonstrated all skills obtained in both the classroom laboratory and hospital setting, and successfully completed the required field internship if applicable.
Ref: OAR 333-265-0010(5)

- A record of all grades and credits earned by each student shall be kept permanently by the institution.
Ref: OAR 581-049-0020(23)(b)

- All records shall be confidentially maintained in accordance with Family Education Rights and Privacy Act.
Ref: OAR 581-049-0020(23)(c)

Note: All records must be available for the accreditation team during the site visit.

O. Program and Course Evaluation

To assure a high quality program, it is essential that all aspects of the program be evaluated on both an ongoing and periodic basis.

Ref: OAR 581-049-0020(24)

1. Describe the process for evaluation of ongoing effectiveness of the instructional program.
2. Describe how and what data is gathered from students, administrators, clinical supervisors, intern preceptors and advisory committee members. How is this data used to improve the program?

- Include copies of graduate and employer surveys in the self-study report. Include a copy of student course/program evaluations.
- If your program or institution holds other accreditations that overlap with this area, please note.
- The teaching institution shall establish processes to evaluate on an ongoing basis the effectiveness of the instructional program. These will include gathering evaluative data from students, administrators, clinical supervisors, intern preceptors and advisory committee members. Follow-up surveys of graduates and the employers of graduates shall be conducted to evaluate the effectiveness of the curriculum, teaching, and the services offered by the institution. Data gathered through these processes should be analyzed and utilized for program improvement.

Ref: OAR 581-049-0020(24)(a)

APPENDIX A

SAMPLE AGENDA

Day One:

- 0800 Opening Session
 Introductions
 Overview of College and EMT Program
- 0830 Campus Tour: Visit Library, Testing Center, Registrar, Financial Aid
 Office, Counseling Office, EMT classrooms and lab, View equipment.
- These are only drop in visits. The library visit will be very short, just to see
the titles on the shelf. Looking at the equipment will take a little
longer.*
- 1030 Self-Study Review (team members and program director)
- 1200 Working Lunch with Advisory Committee Representative(s)
*Only one or two members are necessary. Medical Director should be
invited, but not mandatory he / she be present. Also invite EMT
instructor(s) / lab assistants if appropriate.*
- 1300 Self-Study Review (team members and program director)\
*Review Curriculum Documents, Safety Policies, Affiliation Agreements,
Program Handbooks*
- 1700 Adjourn

Day Two:

- 0800 Self-Study Review
- 1100 Exit Interview

Visit EMT Class(es) at some point. If none in session, phone contact will be made with students. Visit EMT instructors / lab assistants at some point.

Paramedic programs require more site time. Plan to visit an internship site, and primary clinical locations on Day 1.

APPENDIX B

PERTINENT RULES AND REGULATIONS

(As of July 1, 2007)

Oregon Administrative Rule

333-265-0010 (DHS EMS & TS)

Approved EMT Courses

- (1) The Division shall approve an EMT course conducted by an Oregon teaching institution which:
- (a) Is accredited by the Oregon Department of Education or the Oregon State Board of Higher Education as specified in OAR 581-049-0000 through 581-049-0040. Where it is determined by the Division that in a rural area, adequate training at the EMT-Basic level is not available through a teaching institution, the Division may, in its sole discretion, authorize a hospital licensed by the Division to conduct the EMT-Basic course. Such authorization shall be subject to such terms and conditions as the Division may specify;
 - (b) Meets the requirements prescribed by the Division for the EMT course for which approval is sought;
 - (c) No teaching institution shall begin an EMT course unless and until that teaching institution has received course approval from the Division; and
 - (d) Submits an Application to Conduct Course to the Division, using an application form provided by the Division. The application to conduct a course must be received by the Division at least 30-days prior to beginning the course. An application which is in any way incomplete may be rejected by the Division.
- (2) A teaching institution, as specified below, may offer one or more of the following Division-approved EMT curricula under the direction of a course medical director who is formally and currently affiliated with the teaching institution:
- (a) A two-year community college, four-year college or a licensed vocational school may offer an Emergency Medical Technician Basic Course. A copy of the EMT-Basic National Standard Curriculum, U.S. Department of Transportation, National Highway Traffic Safety Administration, 1994, as amended and supplemented by the Division is on file at the Division office and consists of a minimum of:
 - (A) Didactic - 140 hours; and
 - (B) Clinical - eight hours in a hospital emergency department, during which skills as required by the Division are performed under a preceptor.
 - (b) A two-year community college, four year college or a licensed vocational school may offer an Emergency Medical Technician-Intermediate Course. A copy of the Oregon Health Division's EMT-Intermediate Course Curriculum and Reference Guide, July 1995, Second Edition are on file at the Division office. The minimum requires are as follows:
 - (A) Didactic - 76 hours; and
 - (B) Skills Laboratory - 44 hours, during which skills as required by the Division are performed under a skills laboratory preceptor.
 - (c) A two-year community college or a four-year college may offer an Emergency Medical Technician-Paramedic Course. A copy of the EMT-Paramedic National Standard Curriculum, U.S. Department of Transportation, National Highway Traffic Safety Administration, 1999-Edition, as amended and supplemented by the Division is on file at the Division office. The emphasis of a paramedic course must be the competence of the graduate and not just or only the number of hours of education received. In order to obtain and demonstrate the necessary competencies, it may require a student to receive approximately 1000 to 1200 hours of:
 - (A) Didactic instruction;
 - (B) Skills laboratory;
 - (C) Clinical education, hospital clinical areas as prescribed by the Division, during which skills as required by the Division are performed under a preceptor;
 - (D) Field internship represents final evaluative phase of the paramedic program. The student must actively participate in providing care in at least 40 ambulance calls; no less than ten each in cardiac, respiratory, general medical, and trauma emergencies, during which clinical skills as required by the Division are performed under a preceptor; and
 - (E) The student must successfully demonstrate a skill in classroom lab or hospital clinical setting before that skill is performed and evaluated in a field internship.

(3) Every approved EMT-Basic, EMT-Intermediate and EMT-Paramedic course must utilize Division-approved lesson plans and supporting materials for those portions of the EMT program which address laws and regulations governing the EMS system, medicolegal issues, roles and responsibilities of EMTs and EMS professional ethics. The teaching institution is responsible for replicating student handouts from master copies provided by the Division.

(4) A Division representative may attend any didactic, skills laboratory, clinical or field internship session for the purpose of observation and evaluation.

(5) The EMT course director must:

(a) Have each student enrolled in an approved EMT course complete a Division-approved student registration form at his or her first class session and forward the completed student registration forms to the Division within 21-days of the course enrollment deadline;

(b) Inform each student that the failure of the student to complete and submit the Division-approved student registration form to the Division within the specified time may make the student ineligible to apply for and take any certification examinations; and

(c) Have written documentation that the student has:

(A) Successfully completed all required didactic material;

(B) Properly demonstrated all skills obtained in both the classroom laboratory and hospital setting; and

(C) Successfully completed the required field internship.

(6) Upon successful completion of the didactic, skills laboratory, clinical experience and field internship portion of an approved course and submission of a completed application and the appropriate fee, the student is eligible to take the certification examination(s). Successful completion includes, beginning with the effective date of these rules, completion of all objectives of the didactic curriculum, actual physical attendance of at least 85 percent of the didactic hours and 100 percent of clinical and field internship hours and completion of all required clinical and internship skills and procedures. At the discretion of the course director, scheduled class makeup sessions may be conducted under the instruction of the course director or others chosen by the course director.

(7) A person applying for initial certification as an EMT-Paramedic must present evidence that he or she possess at least an associate level degree from an accredited institution of higher learning that includes course work equivalent to the uniform associate of applied science degree in emergency medical technology "AAS-EMT Degree" as approved by the State Board of Education and offered by Oregon's two-year community colleges or four-year colleges.

(8) The Division shall be the sole agency authorized to determine equivalency of course work presented from teaching institutions not authorized to grant the Oregon AAS-EMT Degree.

(9) A person who has satisfactorily completed an approved EMT-Paramedic course, including didactic, clinical, and field internship components prior to July 1, 1999 shall not be subject to the requirements specified in section (7) of this rule.

Stat. Auth.: ORS 682.145 & ORS 682.215

Stats. Implemented: ORS 682.145, ORS 682.157 & ORS 682.215

Hist.: HD 63, f. 6-6-74, ef. 6-25-74; HD 1-1981, f. & ef. 1-14-81; Renumbered from 333-023-0630; HD 19-1984, f. & ef. 9-10-84; HD 16-1986, f. & ef. 9-9-86; HD 19-1991, f. & cert. ef. 10-18-91; HD 8-1993, f. 6-22-93, cert. ef. 7-1-93; HD 18-1994, 6-30-94, cert. ef. 7-1-94; Renumbered from 333-028-0030; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01

Oregon Administrative Rule

333-265-0020 (DHS EMS & TS)

Approved EMT Course Director

(1) An Oregon teaching institution conducting EMT-Basic, EMT-Intermediate or EMT-Paramedic courses must have a program faculty consisting of a designated program director, course medical director, course directors and guest instructors. The number of persons carrying out the responsibilities of conducting an EMT course may vary from program to program. One person, if qualified, may serve in multiple roles.

(a) The program director:

(A) Is responsible for course planning, organization, administration, periodic review, program evaluation, continued development, and effectiveness; and

(B) Must have appropriate training and experience to fulfill the role.

(b) The course medical director:

(A) Must meet the qualifications of a supervising physician as defined in OAR 847-035-0020;

(B) Shall provide medical direction to the didactic, clinical and field internship portions of an EMT course; and

(C) Shall act as the ultimate medical authority regarding course content, procedures and protocols.

(c) The course director for a specific course:

(A) Must have appropriate training and experience to fulfill the role and hold credentials which demonstrate at least equivalent training and experience;

(B) Is responsible for scheduling lectures and coordinating and arranging clinical rotations and field internships;

(C) Is the primary instructor, in that the person must conduct at least 50 percent of the didactic sessions, unless waived by the Division; and

(D) Must attend at least 80 percent of the didactic sessions.

(d) The guest instructor:

(A) Is a person that teaches a specific course subject;

(B) If an EMT, the EMT must be in good standing with the Division;

(C) Must be qualified and have the expertise in the specific course subject; and

(D) Must follow the course curriculum and meet the course objectives for that specific subject.

(2) An EMT-Basic course director must:

(a) Be at least an Oregon EMT-Basic with three years of EMT-Basic prehospital emergency and non-emergency care experience or an approved medical director;

(b) Be in good standing with the Division;

(c) Hold a current CPR Instructor certificate from the American Heart Association or American Red Cross;

(d) Have completed one of the following:

(A) National Standard Curriculum for Emergency Medical Technician Instructors, U.S.

Department of Transportation, 1986 Edition;

(B) National Fire Protection Association (NFPA) Fire Instructor 1 or Fire Service Instructor I and II programs as provided by the Department of Public Safety Standards and Training;

(C) Instructor Development Program (40 hours) as provided by the Department of Public Safety Standards and Training; or

(D) A minimum of three college credits in adult or vocational education theory and practice presented by an accredited institution of higher learning.

(e) Participate in a course director program presented by the Division.

(f) Participate in a course director update program presented by the Division, biennially thereafter, unless waived by the Division.

(3) An EMT-Intermediate course director must:

(a) Be at least an Oregon EMT-Intermediate with three years of EMT-Intermediate prehospital emergency and non-emergency care experience or an approved medical director;

(b) Be in good standing with the Division;

(c) Hold a current CPR Instructor certificate from the American Heart Association, American Red Cross or equivalent as approved by the Division

(d) Have completed one of the following:

- (A) National Standard Curriculum for Emergency Medical Technician Instructors, U.S. Department of Transportation, 1986;
 - (B) NFPA Fire Instructor 1 or Fire Service Instructor I and II programs as provided by the Department of Public Safety Standards and Training;
 - (C) Instructor Development Program (40 hours) as provided by the Department of Public Safety Standards and Training; or
 - (D) A minimum of three college credits in adult or vocational education theory and practice presented by an accredited institution of higher learning.
- (e) Participate in a course director program presented by the Division.
- (f) Participate in a course director update program presented by the Division, biennially thereafter, unless waived by the Division.
- (4) An EMT-Paramedic course director must:
- (a) Possess at least an associate degree from an accredited institution of higher learning that includes course work equivalent to the uniform associate of applied science degree in emergency medical technology "AAS-EMT Degree" as approved by the State Board of Education and offered by Oregon's community colleges;
 - (b) Be an Oregon EMT-Paramedic with three years of EMT-Paramedic prehospital emergency and non-emergency care experience;
 - (c) Be in good standing with the Division;
 - (d) Hold a current CPR Instructor certificate from the American Heart Association or the American Red Cross;
 - (e) Hold a current ACLS Instructor certificate from the American Heart Association or equivalent as approved by the Division;
 - (f) Hold either a Basic Trauma Life Support (BTLS) or Prehospital Trauma Life Support (PHTLS) Instructor certificate or equivalent as approved by the Division;
 - (g) Have completed one of the following:
 - (A) National Standard Curriculum for Emergency Medical Technician Instructors, U.S. Department of Transportation, 1986;
 - (B) NFPA Fire Instructor 1 or Fire Service Instructor I and II programs as provided by the Department of Public Safety Standards and Training;
 - (C) Instructor Development Program (40 hours) as provided by the Department of Public Safety Standards and Training; or
 - (D) A minimum of three college credits in adult or vocational education theory and practice presented by an accredited institution of higher learning.
 - (h) Participate in a course director program presented by the Division.
 - (i) Participate in a course director update program presented by the Division, biennially thereafter, unless waived by the Division
- (5) The Division may deny course approval in accordance with the provisions of ORS 183.310 to 183.550 for failure to comply with the requirements listed in this section.

Stat. Auth.: ORS 682.215

Stats. Implemented: ORS 682.215

Hist.: HD 8-1993, f. 6-22-93, cert. ef. 7-1-93; HD 18-1994, 6-30-94, cert. ef. 7-1-94; Renumbered from 333-028-0032; HD 8-1995, f. & cert. ef. 11-6-95; OHD 9-2001, f. & cert. ef. 4-24-01

Oregon Administrative Rule

581-049-0000 (ODE)

Purpose

(1) The purposes of the rules in this Division are to set the minimum standards with which Emergency Medical Technology (EMT) programs must comply prior to approval of courses by Emergency Medical Services Section of the Oregon Health Division (OHD-EMS) and to set forth the process of accreditation for determining if the offering institution is meeting these standards.

(2) EMT education and training programs are offered by teaching institutions pursuant to OAR 333-265-0000 through 333-265-0020 effective July 1, 1994, including community colleges, licensed private vocational schools, and institutions of higher education. If OHD-EMS determines that training is not available in a rural area through a teaching institution, hospitals licensed by the Health Division may be authorized to teach basic levels of EMT courses.

(3) The standards in OAR 581-049-0000 - 581-049-0040 effective (as of date rules are adODEd) apply to EMT basic, intermediate, and paramedic levels of education and training offered by or through Oregon community colleges and licensed private vocational schools.

Stat. Auth.: [ORS 326.051](#)

Stats. Implemented: [ORS 823.130](#) - ORS 823.150

Hist.: EB 22-1993, f. & cert. ef. 6-2-93; EB 19-1995, f. & cert. ef. 7-11-95

Oregon Administrative Rule

581-049-0010 (ODE)

Definitions

Definitions for the purposes of Division 049:

- (1) "Administrator" means a person responsible for all aspects of planning and managing an Emergency Medical Technology (EMT) Program.
- (2) "Class" means scheduled meeting of persons for instructional purposes.
- (3) "Clinical Experiences" means those experiences acquired by a student during an approved EMT program under the direct supervision of appropriate medical direction and clinical supervision. Experience must include the application of specific knowledge, assessment, and treatment skills required to meet written clinical experience competencies.
- (4) "Clinical Preceptor" means a person who has been trained as a preceptor and appointed by an accredited teaching institution and approved by the EMS provider, having the responsibility of supervising and evaluating the performance of an EMT student during the clinical and field internship phases of an EMT course. A preceptor must be a physician, physician assistant, registered nurse, or certified EMT in good standing at or above level for which the student is in training.
- (5) "Course" means aggregation of classes to achieve a completed set of competencies as identified by OHD-EMS and established in OAR 333-265-0000 et seq. effective July 1, 1994.
- (6) "Course Director" means a person who is the principal instructor of an EMT course and is responsible for scheduling lectures and coordinating and arranging clinical rotations and field internships.
- (7) "Emergency Medical Technician (EMT)" means a person who has received formal training in prehospital emergency care and is state-certified to attend an ill, injured, or disabled person ([ORS 823.020](#)) effective July 1, 1993.
- (8) "Field Internship" means those hours and calls acquired by a student during an approved clinical EMT paramedic course under the direct visual supervision of a preceptor. A call shall be accepted when the clinical preceptor providing direct visual supervision has documented and verified satisfactory student performance. Calls must include the application of specific assessment and treatment skills required of a certified EMT.
- (9) "Guest Lecturer" means a person who presents one or more lectures on specific topics in which the lecturer has personal expertise.
- (10) "In Good Standing" means the status of a person who is currently certified or licensed, who does not have any restrictions placed on his/her certificate, and who is not on probation with the certifying or licensing agency for any reason.
- (11) "Medical Director" means a licensed physician who shall provide medical direction to the didactic, clinical and field internship portions of an EMT course or serves as the medical director of an EMT, registered nurse or physician assistant associated with a licensed ambulance service. The medical director must meet the qualifications of a supervising physician as defined in OAR 847-035-0020 effective January 1, 1995.
- (12) "OCCS" means the Office of Community College Services.
- (13) "OHD-EMS" means the Emergency Medical Services Section of the Oregon Health Division.
- (14) "ODE" means the Office of Professional Technical Education.
- (15) "Patient" means an ill, injured, or disabled person who may be transported in an ambulance.

(16) "Physician" means a person licensed under ORS 677.010, actively registered and in good standing with the Board of Medical Examiners as a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO).

(17) "Private Vocational Schools Section" means the section within the Oregon Department of Education which has the responsibility for the licensure of private vocational schools (ORS 345.010 to 345.470 effective July 1, 1994).

(18) "Registered Nurse (RN)" means a person licensed under [ORS 678.040](#) effective July 1, 1994, actively registered and in good standing with the Oregon Board of Nursing.

(19) "Scope of Practice" means the maximum level of emergency care that an EMT may provide as set forth in OAR 847-035-0030 effective July 1, 1994.

(20) "Teaching Institution" means a two-year community college or a licensed vocational school that is currently licensed and in good standing with the Private Vocational Schools Section of the Office of Professional Technical Education of the Oregon Department of Education.

Stat. Auth.: [ORS 326.051](#)

Stats. Implemented: [ORS 823.130](#) - ORS 823.150

Hist.: EB 22-1993, f. & cert. ef. 6-2-93; EB 19-1995, f. & cert. ef. 7-11-95

Oregon Administrative Rule

581-049-0020 (ODE) Standards

(1) The standards and accreditation process in this rule pertain specifically to EMT programs offered by community colleges (including satellite courses and programs), and licensed private vocational schools.

(2) Each EMT course shall follow, without substantial variation, the OHD-EMS prescribed curriculum for the level of EMT course being presented. The curriculum consists of three components: Didactic instruction, including laboratory skills; supervised clinical experience in health care facilities; and supervised field internship. Didactic instruction and supervised clinical experience are required for Basic and Intermediate level EMT courses. A supervised field internship is required as well as didactic instruction and supervised clinical experience for EMT paramedic level courses. Each curriculum component shall comply with all OHD-EMS requirements for the particular level of EMT certification involved. All psycho-motor skills shall be taught in accordance with the Health Division/OHD-EMS EMT Skills Manual:

(a) Didactic Instruction: Each EMT course shall have a written planned course statement that contains course goals and objectives stated in terms of the competencies students will be expected to achieve upon successful completion of the course;

(b) Clinical Experiences: Clinical affiliations shall be established and confirmed in written affiliation agreements between the teaching institution and hospitals and other institutions and agencies that provide clinical experiences for students under appropriate medical direction and clinical supervision:

(A) Goals and identified competencies to be attained shall be written for each clinical rotation site. Students shall be provided a copy of the clinical rotation site goals and competencies prior to each clinical experience;

(B) Students shall be assigned to clinical settings where experiences are educationally efficient and effective in achieving the program's goals and objectives;

(C) Students in clinical settings shall be supervised by appropriate medical personnel or by an instructor from the program as outlined in the written affiliation agreement. The ratio of students to instructors in the clinical facilities shall be adequate to ensure effective learning.

(c) Field Internship: A field internship shall be established for each student for whom such is required by OHD-EMS. The internship shall meet requirements established by OHD-EMS and defined in OAR 333-265-0010(f)(C)(iii) effective July 1, 1994.

(A) The school shall enter into written agreements for clinical experiences and field internships that provide sufficient clinical experiences and field internships to permit every student enrolled to complete these requirements within the timeframe of the approved course;

(B) All field internships will occur within an emergency medical system which demonstrates medical accountability. A clinical preceptor shall be assigned to supervise each student intern. The preceptor's qualifications shall meet guidelines set by OHD-EMS;

(C) Written goals and competencies to be attained shall be established for all field internships. Copies shall be provided the student and the student's assigned preceptor. These competencies shall meet requirements of OHD-EMS as stated in OAR 333-265-0010 effective July 1, 1994.

(3) Program Administrator: Each program shall have a qualified program administrator primarily responsible for managing all aspects of the program, whose responsibilities include, but are not limited to, the organization, administration, and evaluation of the program. Acquisition of adequate resources and staff to assure a quality program is a primary responsibility of the program administrator.

(4) The intent of section (3) of this rule is to assure that appropriate officials of the sponsoring teaching institution are directly involved in program planning and management and to provide OHD-EMS and ODE-OCES with a single focus for resolution of problems arising as a result of EMT program delivery.

(5) The program administrator shall be a senior manager or administrative officer with general managerial responsibility who has training and experience in education administration and evaluation (i.e., dean, associate dean, administrator, or associate administrator).

(6) Course Director: Each course shall have a course director who shall be the principle teacher for the course. The course director shall be responsible for all aspects of course planning and delivery. The course director shall meet the requirements as outlined in OAR 333-265-0020(f)(C)(iii) effective July 1, 1994.

(7) Guest Lecturers: These are individuals who do not regularly assist in the delivery of EMT education and training who present one or more lectures on specific topics in which they possess personal expertise. Guest lecturers do not need to have any particular level of certification. It is the responsibility of the course director to establish that each guest lecturer possesses the necessary expertise and teaches in compliance with all course standards.

(8) Medical Director: Each EMT education and training program shall have a medical director, who shall advise the program administrator and course director on medical aspects of the EMT program. The medical director shall currently be approved by OHD-EMS as an EMT supervising physician.

(9) Continuing Education for Faculty and Staff. It is recommended that financial support be provided for faculty education required to keep mandatory certifications current.

(10) Financial Resources: The operational budget for the program shall be sufficient to maintain the continuous operation of the EMT program.

(11) Facilities: Classroom, laboratories, administrative, and faculty offices shall be provided with sufficient space to accommodate the number of students enrolled in the program and the program faculty:

(a) Classrooms shall be clean and have adequate lighting, ventilation, and storage for instructional materials and equipment. Furniture should be in good repair and comfortable with appropriate writing surfaces;

(b) Laboratory space shall be available for students to practice skills. This may be the same room as the classroom, providing there is adequate space for students to perform the required skills (e.g., CPR, patient packaging, splinting, etc.). Floors, where skills are practiced, shall be covered with carpet or other appropriate protective materials. Running water shall be available in the class/lab facility. The room should meet all Oregon Occupational Safety and Health Administrative standards for safety;

(c) Each classroom site shall have sufficient toilet facilities to reasonably accommodate the number of students enrolled in the course;

(d) Administrative staff and faculty shall be provided adequate office space to manage the program, keep adequate records and instructional materials, and prepare lesson plans. Space should also be provided for confidential faculty/student conferences.

(12) Instructional Aids, Supplies, and Materials: Sufficient up-to-date instructional aids, supplies, and materials shall be provided to facilitate learning for the number of students in the program and the level of EMT course being offered:

(a) Teaching aids and instructional materials shall be readily available to the instructor;

(b) Adequate AV materials and equipment shall be available for instructor and student use;

(c) Independent study areas with TV monitors/audio outlets shall be available for student use as needed for make-up work and independent study;

(d) The budget shall provide for supplies and annual updating of instructional materials.

(13) Equipment: Each EMT course shall be supported by the prescribed quantity of equipment necessary to support the level of EMT education and training being provided. Required equipment shall be specified by OHD-EMS:

(a) Equipment shall be technologically up-to-date and readily accessible to faculty and students;

(b) All equipment shall be kept in good repair;

(c) An annual and long-term budget for capital equipment shall be in place to maintain and provide for replacement of equipment.

(14) Support Services: Support services necessary to ensure student success shall be made available to students in the EMT program. These services include, but are not limited to:

(a) A library with appropriate up-to-date periodicals and books open during hours which will provide maximum accessibility to students;

- (b) Counseling staff available for academic and career planning;
- (c) Tutoring assistance available on an "as needed" basis;
- (d) Funding and staff time available for student recruitment, selection, and placement procedures. It is required that students pass reading and math placement tests at appropriate levels for each course prior to acceptance into the program.

(15) Admission Policies and Procedures: Admission of students shall be made in accordance with clearly defined and published practices of the institution. Specific academic and technical requirements for admission shall also be clearly defined and published. The standards and prerequisites shall be made known to all potential program applicants.

(16) Program Information: Accurate information regarding program requirements, tuition and fees, institutional and programmatic policies, procedures and supportive services shall be available upon request to all prospective students and be provided to all enrolled students. It is recommended that this information be compiled in an EMT student handbook.

(17) Program Descriptions: A description of each EMT course, a statement outlining course competencies, course outlines, class and laboratory schedules, clinical and field internship experience schedules, and teaching plans shall be on file and available to candidates and enrolled students;

(18) Equal Opportunity: The program shall comply with [ORS 659.150](#) effective January 1, 1995 and shall not discriminate with respect to race, religion, sex, marital status, age, disabling condition, or national origin.

(19) Evaluation: Each approved course shall provide the number of written and practical examinations prescribed by OHD-EMS. The content of examinations for each level of EMT course shall be prescribed by OHD-EMS:

- (a) Each approved course shall culminate in written and practical certification examinations prescribed by the OHD-EMS. For academic purposes, a teaching institution may administer its own final written and practical examination prior to the conduct of OHD-EMS certification examinations;
- (b) The written certification examination shall be administered by a proctor provided by the teaching institution. The proctor shall be subject to the approval of the OHD-EMS, shall not be certified as an EMT at any level, and shall not be otherwise involved in the delivery of EMT training;
- (c) Evaluators for the final practical examination shall be individuals meeting the requirements prescribed by OHD-EMS to serve as final practical examination evaluators. An OHD-EMS representative shall be present at final practical examinations and shall provide evaluation instruments to be used in the conduct of all final practical evaluations.

(20) Job Search and Placement: Students who successfully complete the program shall be provided access to job search and placement services.

(21) Advisory Committee: Each program shall have an advisory committee to provide guidance and information regarding local community practices and needs:

- (a) The advisory committee shall consist of representatives from local employers of EMT personnel, current or former students, and other community members as appropriate. The medical director shall be a member of the advisory committee and serve as a primary source of information. A roster of the advisory committee members, their place of employment and phone numbers shall be kept on file and easily accessible;
- (b) The advisory committee shall meet a minimum of three times each year and minutes of the meeting shall be recorded and kept on file.

(22) A safe working and learning environment shall be provided to all students and staff so that students learn to be safety conscious in the classroom and carry that consciousness into practice in clinical and internship experiences and ultimately into the profession:

- (a) Safety Policy: The teaching institution shall have a safety policy that meets all state and federal requirements. The teaching institution shall identify an administrator who is responsible for monitoring the safety policy and assures that regular safety inspections are made and documented;

(b) Instructional Activities: All instructional activities (i.e., didactic, clinical, and internship) shall be carried on in accordance with the Oregon Safe Employment Act, OR-OSHA standards, and ORS 656.046 effective January 1, 1995, which requires coverage of persons in college work experience and vocational educational programs;

(c) Curriculum: Occupational safety shall be an integral part of the curriculum;

(d) Insurance: Each student enrolled in the program shall be covered by professional liability insurance in the amount of not less than \$1,000,000 per occurrence. Copies of insurance policies documenting the coverage shall be on file at the institution.

(23) The institution shall maintain complete, accurate student records in a safe, secure place within the educational institution:

(a) The following records shall be maintained until the student has been certified by OHD-EMS at the level corresponding to the education program or for a minimum of five years following the student's enrollment in the program:

(A) Student admission into the program;

(B) Class attendance;

(C) Evidence of competencies attained throughout the program;

(D) Copies of examinations and assessments throughout the program;

(E) Evidence of satisfactory completion of all didactic, clinical, and field internship requirements.

(b) A record of all grades and credits earned by each student shall be kept permanently by the institution;

(c) All records shall be confidentially maintained in accordance with Family Education Rights and Privacy Act.

(24) To assure a high quality program it is essential that all aspects of the program be evaluated on both an ongoing and periodic basis:

(a) The teaching institution shall establish processes to evaluate on an ongoing basis the effectiveness of the instructional program. These will include gathering evaluative data from students, administrators, clinical supervisors, intern preceptors and advisory committee members. Follow-up surveys of graduates and the employers of graduates shall be conducted to evaluate the effectiveness of the curriculum, teaching, and the services offered by the institution. Data gathered through these processes should be analyzed and utilized for program improvement;

(b) Every EMT program shall be evaluated through a process of accreditation at least once every five years. This process shall occur as outlined in OAR 581-049-0030 effective (date these rules are adopted).

Stat. Auth.: [ORS 326.051](#)

Stats. Implemented: [ORS 823.130](#) - ORS 823.150

Hist.: EB 22-1993, f. & cert. ef. 6-2-93; EB 28-1993, f. & cert. ef. 9-29-93; EB 19-1995, f. & cert. ef. 7-11-95

Oregon Administrative Rule

581-049-0030 (ODE)

Process of Accreditation

The purpose of the accreditation process is to assure quality Emergency Medical Technology Educational programs and to provide recognition for those programs which meet or exceed the minimum standards as outlined in these rules. The accreditation process shall consist of two components, an internal self-study conducted by the teaching institution, and an external evaluation conducted by an accreditation team:

(1) Self-Study: The teaching institution shall complete an internal review of the EMT program that will result in a self-study which documents that the program meets the minimum requirements as outlined in these rules. The self-study will be sent to the ODE at least 30 days prior to the date set for the external team visit. Guidelines for preparing the self-study can be obtained from the ODE-OCCS.

(2) External Evaluation Review Team: The review team shall consist of at least three people, an ODE-OCCS assigned coordinator, and EMT 4 who has had active field patient care experience and is knowledgeable regarding educational needs and issues related to EMT training, and an education curriculum person designated by the ODE-OCCS. The team will:

- (a) Review the self-study completed by the institution prior to the site visit;
- (b) Participate in a site visit where the team will confirm that the information in the self-study is accurate and meets the minimum requirements set forth in these rules; and
- (c) Report to the associate superintendent, ODE-OCCS, the team findings, specifically identifying strengths, weaknesses, and any deficiencies of the program. The associate superintendent shall send a copy of the report, along with a letter of accreditation status, to the chief administrative officer of the institution in which the program is located. A copy of the letter and report also will be sent to OHD-EMS.

(3) Site Team Coordinator: The role of the coordinator will be to:

- (a) Work with the institution's program administrator to schedule the site visit;
- (b) Select and orient the review team members;
- (c) Serve as a team leader on the site visit;
- (d) Conduct an exit interview summarizing the team's findings;
- (e) Coordinate the writing of the team report and provide it to the associate superintendent who will send a copy to the chief administrative officer of the institution within 30 days of the site visit; and
- (f) Conduct follow-up activities as necessary.

Stat. Auth.: [ORS 326.051](#)

Stats. Implemented: [ORS 823.130](#) - ORS 823.150

Hist.: EB 22-1993, f. & cert. ef. 6-2-93

Oregon Administrative Rule

581-049-0040 (ODE)

Deficiencies

(1) If deficiencies are reported by the External Evaluation Review Team, the program has 90 days from the date the report was received by the chief administrative officer to correct the deficiencies. The institution shall not start any new courses until the deficiencies are corrected or a detailed plan to correct each deficiency has been submitted reviewed and accepted by ODE/OCCS.

(2) If the chief administrative officer disputes the reported deficiencies, he or she may request, within ten days from the date the report was received, a hearing which shall be held in accordance with ORS Chapter 183 effective January 1, 1995.

(3) If deficiencies are not corrected within 90 days or an approved plan to correct the deficiency(s) has not been submitted to ODE/OCCS, the program accreditation shall be revoked after a hearing held in accordance with ORS Chapter 183 effective January 1, 1995.

(4) The associate superintendent may issue an interim order prohibiting the teaching institution from starting any new classes or accepting any new students until either the deficiencies are corrected or a hearings officer determines that the alleged deficiencies did not occur.

Stat. Auth.: [ORS 326.051](#)

Stats. Implemented: [ORS 823.130](#) - ORS 823.150

Hist.: EB 22-1993, f. & cert. ef. 6-2-93; EB 19-1995, f. & cert. ef. 7-11-95

Oregon Administrative Rule

847-035-0020 (BME)

Application and Qualifications for a Supervising Physician and Agent

- (1) A physician must receive approval from the Board in order to supervise one or more EMT or First Responder.
- (2) Any physician who desires to function as a supervising physician or agent must apply and receive approval from the Board.
- (3) Applications are to be submitted on forms provided by the Board.
- (4) A supervising physician and agent must meet the following qualifications:
 - (a) Be a medical or osteopathic physician currently licensed under ORS Chapter 677, actively registered and in good standing with the Board;
 - (b) Be in current practice;
 - (c) Be a resident of or actively practicing in the area in which the emergency service is located;
 - (d) Possess thorough knowledge of skills assigned by standing order to EMTs and First Responders; and
 - (e) Possess thorough knowledge of laws and rules of the State of Oregon pertaining to EMTs and First Responders.

Oregon Revised Statute

656.046 (Board of Education)

Coverage of persons in college work experience and professional education programs.

(1) All persons registered at a college and participating as unpaid trainees in a work experience program who are subject to the direction of noncollege-employed supervisors, and those trainees participating in college directed professional education projects, are considered workers of the college subject to this chapter for purposes of this section. However, trainees who are covered by the Federal Employees Compensation Act shall not be subject to the provisions of this section.

(2) A college conducting a work experience program or college directed professional education project shall submit a written statement to the insurer, or in the case of self-insurers, to the Director of the Department of Consumer and Business Services, that includes a description of the work to be performed by such persons and an estimate of the total number of persons enrolled in the program or project.

(3) Persons covered under this section are entitled to the benefits of this chapter. However, such persons are not entitled to benefits under ORS 656.210 or 656.212. They are entitled to such benefits if injured as provided in ORS 656.156 and 656.202 while performing any duties arising out of and in the course of their participation in the work experience program or college directed professional education project, provided the duties being performed are among those:

- (a) Described on the application of the college; and
- (b) Required of similar full-time paid employees.

(4) The filing of claims for benefits under this section is the exclusive remedy of a trainee or a beneficiary of the trainee for injuries compensable under this chapter against the state, its political subdivisions, the college district board, members, officers and employees of the board or any employer, regardless of negligence.

(5) A college may elect to make trainees subject to this chapter for college directed professional education projects not enumerated in subsection (8) of this section or for work experience programs under the direction of college-employed supervisors by filing a written request with the insurer of the college, or in the case of self-insured colleges, with the director. Coverage under such election shall become effective no sooner than the date of receipt by the insurer. The coverage request shall include a description of the work to be performed and an estimate of the number of participating trainees. The insurer or director shall accept a request that meets the criteria of this section.

(6) The provisions of this section shall be inapplicable to any trainee who has earned wages for such employment.

(7) As used in this section, "college" means any community college district or community college service district as defined in ORS chapter 341.

(8) As used in this section, "college directed professional education project" means an assigned on-campus or off-campus project that is a component of a program approved by the college board or the operating procedures of the State Board of Education and involves work that provides practical experience beyond the initial instruction and demonstration phases, performed outside of the college classroom or laboratory environment and requiring substantial hands-on participation by trainees. Such projects are further limited to logging, silvicultural thinning, slash burning, fire fighting, stream enhancement, woodcutting, reforestation, tree surgery, construction, printing and manufacturing involving formed metals. [1991 c.534 §3; 1993 c.18 §139; 1995 c.343 §53]

Oregon Revised Statute

659.850

Discrimination in education prohibited

(1) As used in this section, “discrimination” means any act that unreasonably differentiates treatment, intended or unintended, or any act that is fair in form but discriminatory in operation, either of which is based on age, disability, national origin, race, marital status, religion or sex.

(2) No person in Oregon shall be subjected to discrimination in any public elementary, secondary or community college education program or service, school or interschool activity or in any higher education program or service, school or interschool activity where the program, service, school or activity is financed in whole or in part by moneys appropriated by the Legislative Assembly.

(3) The State Board of Education and the State Board of Higher Education shall establish rules necessary to insure compliance with subsection (2) of this section in the manner required by ORS chapter 183.
[Formerly 659.150]

APPENDIX B

SUPPLMENETARY DOCUMENTS THAT MAY BE OF USE

Specific Requirements for EMT Course Instructors

Name of the Course Director: _____

DHS EMS & TS Certification #: _____: EMT-B EMT-I EMT-P
Verified to be in Good Standing: Yes / No

Other Registrations or Credentials: (e.g., nurse, physician, etc.) _____

Three years active prehospital care experience: (Where) _____
(Contact) _____

Instructor Development Program:

OR EMTI/USDOT, 1986: Date _____ Place _____

OR NFPA Instructor 1: Date _____ Place _____

OR FSAB Instructor I and II: Date _____ Place _____

OR DPSST Instructor Development: Date _____ Place _____

OR Vocational Education: Date _____ Place _____
List names and credits: _____

Course Director Update: Date _____ Place _____

Additional Certifications Required:

Current CPR Instructor: Exp Date _____

Current ACLS Instructor: Exp Date _____

Current BTLS or PHTLS Instructor: Exp Date _____

Highest Academic Degree: _____ Institution: _____
(After 7/1/99)

Assistant Instructor (List Courses of responsibility)

Two years active prehospital care experience: (Where) _____
(Contact) _____

Other specialized experience:

Required Equipment for EMT Exams

These lists are provided to give the minimum equipment necessary for an EMT course. Instructors may need greater quantities depending on the number of students. This list may not be all inclusive.

EMT Basic

Patient Assessment/Management - Trauma

1 (one) victim – One adult or adolescent Simulated Patient, at least 16 years old, of average adult height and weight dressed in appropriate undergarments (shorts or swimsuit)
Examination gloves
Pen Light
Blood pressure cuff
Stethoscope
Moulage kit
Timer
Clipboard
Evaluators Name on Posted Door Sign

Patient Assessment/Management - Medical

1 (one) victim
Examination gloves
Stethoscope
Pen Light
Blood pressure cuff
Clipboard
Evaluators Name on Posted Door Sign
Timer

Cardiac Arrest Management/AED

1 (one) EMT assistant
Examination gloves
CPR mannequin
Automated external defibrillator
Bag-valve-mask device
Pocket mask or demand valve
Oropharyngeal airway
Oxygen tank, regulator and flowmeter
Oxygen connecting tubing
PEAD
Portable suction
Rigid tip suction catheter
Backboard or CPR board
Patient securing straps
Timer
Clipboard
Evaluators Name on Posted Door Sign

Bag-Valve-Mask, PEAD Apneic Patient with Pulse

Examination gloves
Oropharyngeal airways (various sizes)
Bag-Valve-Mask device
PEAD, must be functional
Oxygen tank (may be empty), regulator and flowmeter
Oxygen connecting tubing
Ventilation mannequin (capable of recording, by light or graph, 800 ml ventilation volumes or the ability of the examiner to observe the filling of the lung.)
Timer
Clipboard
Evaluators Name on Posted Door Sign

Spinal Immobilization Skills (Seated and Supine Patient)

- 1 (one) simulated victim
- 1 (one) EMT assistant
- Examination gloves
- Short spine immobilization device (short spine board, KED, etc.)
- Long spine immobilization device (i.e. long spine board)
- Cervical collar
- Head immobilizer (commercial or improvised)
- Padding (i.e. towel, cloths)
- Patient securing straps
- Roller gauze or cravats
- Tape
- Timer
- Clipboard
- Evaluators Name on Posted Door Sign

Random Skill Station -Long Bone

- 1 (one) victim
- Examination gloves
- Eye goggles
- Traction splint and associated equipment
- Sling and swathe
- Rigid splinting material (various sizes)
- Field dressings and bandages
- Timer
- Clipboard
- Evaluators Name on Posted Door Sign

Random Skill Station - Joint Injury

- 1 (one) victim
- Examination gloves
- Eye goggles
- Traction splint and associated equipment
- Sling and swathe
- Rigid splinting material (various sizes)
- Field dressings and bandages
- Timer
- Clipboard
- Evaluators Name on Posted Door Sign

Random Skill Station - Traction Splinting

- 1 (one) victim
- 1 (one) EMT assistant
- Examination gloves
- Eye goggles
- Traction splint and associated equipment
- Sling and swathe
- Rigid splinting material (various sizes)
- Field dressings and bandages
- Timer
- Clipboard
- Evaluators Name on Posted Door Sign

Random Skill Station - Bleeding Control/Shock Management

- 1 (one) victim
- Examination gloves
- Eye goggles
- Field dressings and bandages
- PASG
- Timer
- Clipboard

Evaluators Name on Posted Door Sign

Random Skill Station - Airway/Suction

Examination gloves
Eye goggles
Ventilation mannequin (capable of recording, by light or graph, 800 ml ventilation volumes **OR** the ability of the examiner to observe the filling of the lung.)
Oxygen tank (with pressure), regulator and flowmeter
Oxygen connecting tubing
Nasal Cannula
Non-rebreather mask with reservoir
Pocket mask with one-way valve
Oropharyngeal airways (various sizes)
Nasopharyngeal airways (various sizes)
Airway lubricant
Tongue blades
Timer
Clipboard

Evaluators Name on Posted Door Sign

Random Skill Station - Mouth-to-Mask

Examination gloves
Eye goggles
Ventilation mannequin (capable of recording, by light or graph, 800 ml ventilation volumes or the ability of the examiner to observe the filling of the lung.)
Oxygen tank (with pressure), regulator and flowmeter
Oxygen connecting tubing
Nasal Cannula
Non-rebreather mask with reservoir
Pocket mask with one-way valve
Oropharyngeal airways (various sizes)
Nasopharyngeal airways (various sizes)
Airway lubricant
Tongue blades
Timer
Clipboard

Evaluators Name on Posted Door Sign

Random Skill Station - Oxygen Administration

Examination gloves
Eye goggles
Ventilation mannequin (capable of recording, by light or graph, 800 ml ventilation volumes or the ability of the examiner to observe the filling of the lung.)
Oxygen tank (with pressure), regulator and flowmeter
Oxygen connecting tubing
Nasal Cannula
Non-rebreather mask with reservoir
Pocket mask with one-way valve
Oropharyngeal airways (various sizes)
Nasopharyngeal airways (various sizes)
Airway lubricant
Tongue blades
Timer
Clipboard

Evaluators Name on Posted Door Sign

Random Skill Station - CPR

Two CPR manikins
2 child CPR manikins

- 2 infant CPR manikins
- 1 face shield per candidate
- Alcohol swabs or 2x2 gauze and liquid isopropyl alcohol
- A pad or mat for candidate to kneel on (or carpeted room)
- Evaluation sheets
- Timer
- Clipboard
- Evaluators Name on Posted Door Sign

EMT Intermediate

Patient Assessment/Management - Trauma

1- (one) victim	Pad and pencil
Infection control precaution supplies	Head immobilizer
Pen Light	Blanket
Blood pressure cuff	Stethoscope
IV solutions (for prompts)	Non-rebreather mask
Moulage kit	BVM with reservoir
Timer	Mat or pad for victim to lie on
Clipboard	Chair for victim to sit on
Evaluators Name on Posted Door Sign	Oxygen tubing
Patient medi-alert information (i.e., in a purse, billfold, necklace)	Oxygen tank (D or E) with regulator
Trauma dressings	Splinting and bandaging materials
Tape	Backboard with at least 4 straps

Bag-Valve-Mask, PEAD Apneic Patient with Pulse

- Examination gloves
- Oropharyngeal airways (various sizes)
- Bag-Valve-Mask device
- PEAD, must be functional
- Oxygen tank (may be empty), regulator and flowmeter
- Oxygen connecting tubing
- Ventilation mannequin (capable of recording, by light or graph, 800 ml ventilation volumes or the ability of the examiner to observe the filling of the lung.)
- Timer
- Clipboard

Cardiac Arrest Management –Manual defibrillation

- Infection control precaution supplies
- Upper torso or full body defibrillation manikin or CPR manikin
- AED/SAD (freshly charged batteries and spares)
- Dysthymia generator
- Defibrillator pads, cables
- Bag-valve-mask with reservoir and oxygen tubing (visual prompt)
- Oxygen tank with regulator (visual prompt)
- Oropharyngeal airways (visual prompt)
- Nasopharyngeal airways (visual prompt)
- Suction device (visual prompt)
- 8' x 3' table
- Clip-board and timer

IV Therapy

- IV infusion arm with flashback capability
- Replacement IV infusion arm with flashback capability
- Infection control precaution supplies
- IV solutions*
- IV administration sets**
- IV catheters***
- IV pole(s)
- Tourniquet(s)
- Tape or securing device(s)

Alcohol preps
 Gauze pads (2x2's, 4x4's)
 Biohazard container (sharps disposal)
 Wastebasket with liner
 Assorted clean up supplies (towels, etc.)
 Documentation labels
 Ballpoint pen
 Atropine*
 Epi 1:10,000*
 Epi 1:1,000*
 Lidocaine 2%*
 Lidocaine 20%*
 50% Dextrose*
 Naloxone (at least 2 mg)*
 Bottle nitroglycerin tablets or nitroglycerine spray*
 Container activated charcoal*
 Water for refilling "medications"
 B/P cuff
 Stethoscope
 Assorted syringes with needles
 Pen / pencil and writing tablet for candidate calculations
 8' x 3' table
 clip board and timer

* may be expired

** need selection array, but must have 60 gtt/min set

*** selection available

Pediatric IO

Examination gloves
 Intraosseous infusion manikin with replacement tibias (6-8 sticks/tibia)
 IV solutions (bottles, bags)*
 Administration sets**
 IV extension tubing or stopcock
 Intraosseous needles
 Syringes (various sizes)
 Tape
 Gauze pads (2x2, 4x4, etc.)
 Alcohol preps or similar substitute
 Bulky Dressing
 Approved sharps container
 Atropine*
 Epi 1:10,000*
 Epi 1:1,000*
 Lidocaine 2%*
 50% Dextrose*
 Naloxone (at least 2 mg)*

* Need a selection array but may be expired

** Need a selection array and must include microdrip (60 gtt/cc) tubing

NOTE: if the school trains the students on the EZ-IO it may be used in place of the Jamshidi intraosseous needles. Evaluator must know how to correctly use this tool.

Oral Station

Table
 Paper
 Pencil/pen
 Visual barrier between candidate and evaluator

Stopwatch