



**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
Office of Emergency Medical Services**



## Parental Consent Form

This form shall be completed by the parent of any student in an EMR or EMT course of training who is under the age of 18 for any period during such training. **DPH provides certification for EMR at age 14 and EMT at age 16.**

**COURSE OVERVIEW:** The course emphasizes emergency medical care skills and attempts to teach these skills in a job-related context. The following medical conditions are included: inadequate airway; cardiac arrest; external and internal bleeding; shock; injuries to all body parts; fractures; dislocations; sprains; poisons; heart attack; stroke; diabetes; acute abdomen; communicable diseases; patients with abnormal behavior; alcohol and drug abuse; the unconscious state; emergency childbirth; burns (chemical, electrical, heat and radiation); emergencies caused by hot and cold environmental conditions and emergencies resulting from water hazards. In addition, the program also includes training in the use of the following equipment and materials; suctioning devices; airways; bag-mask resuscitation devices; oxygen equipment and delivery systems; sphygmomanometer and stethoscope; splints of all types (including backboards), bandages, automated external defibrillator and assisting the patient with certain medications.

**ROLES AND RESPONSIBILITIES:** EMS provider functions include the following: patient examination; prompt and efficient care; appropriate patient handling; safe and efficient patient transport; orderly patient transfer to emergency department; communications; reporting and record keeping; vehicle driving, maintenance and care; if rescue crews are absent, controlling the accident scene. The EMS provider is expected to carry out these responsibilities in a professional manner. The EMS provider should be well groomed and properly attired and exhibit appropriate concern for the patient.

**LEGAL ASPECTS OF EMERGENCY CARE:** The EMS provider needs to keep current, relative to legal requirement in the area in which he provides services. Specifically, he should be knowledgeable about his responsibilities relative to the following: duty to act or respond to the need for care and standards of care including professionals or institutional standards; consent; actual consent; implied consent; minor’s consent; consent of mentally ill; right to refuse treatment; immunities; government immunities; Good Samaritan Laws; EMS and Paramedic statues; exemption from the Medical Practice Act; effect of licensing and certification.

**METHODS OF EDUCATION:** The EMS provider student will be involved in lectures given by certified EMS instructors and other healthcare professional. Students also will participate in simulated emergencies, skill development exercises, local Emergency Department observations and a clinical internship with an EMS agency.

**I, the undersigned parent or legal guardian of the named student, have reviewed this course description and give my consent for the named student to attend this course and obtain certification from the Department of Public Health.**

Parent Name	Parent Signature
Student Name	Student Date of Birth
Course Instructor Name	Course Approval #

**Parents:** You may contact the Department of Public Health, Office of Emergency Medical Services by calling 860-509-7975 or emailing [dph.emsi@ct.gov](mailto:dph.emsi@ct.gov) with questions or concerns.

**Candidate:** Upload this document when submitting an application at [www.elicense.ct.gov](http://www.elicense.ct.gov)

**Instructor:** Retain a copy of this document in course files.