

EMERGENCY MEDICAL SERVICES EMS Education Manual



State of Connecticut
Department of Public Health
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This manual is designed to provide the tools necessary to ensure quality education in the EMS community subject to the Regulations of State Agencies section 19a-179-17(a) (3). Any instructor undertaking initial paramedic training MUST seek additional information from the Office of Emergency Medical Services. The complexities of national accreditation cannot be adequately addressed in this manual.

Sec. 19a-179-17. EMS training programs

(a) In order to conduct an OEMS-approved training program for any classification set forth in Sec. 19a-179-16 of these regulations, a person must:

(1) Deliver to OEMS at least thirty (30) days prior to the planned initiation of the program a written application to conduct said training program on a form prescribed by OEMS. Such application shall include, but is not limited to, the following information:

(A) A list of teaching facilities to be used, and of available teaching aids and supplies.

(B) A proposed list of instructors, assistant instructors, and physician lecturers to be used during the course of the program.

(C) A statement of compliance that the program meets the most recent National Standard Training Curricula, as approved by the United States Department of Transportation, National Highway Safety Traffic Administration, for the appropriate category.

(2) Ensure that there is a state-certified EMS-I responsible for all class sessions.

(3) Follow the training manual developed by OEMS, as kept current and on file at OEMS, and made available to the general public.

(4) Maintain complete financial and administrative records for inspection by OEMS.

(b) OEMS shall approve or disapprove such training program proposal applications and notify the appropriate regional council within twenty (20) days of the delivery of the proposal to OEMS. Prior to approval, OEMS shall consult with the regional EMS coordinator for his/her recommendation. Where a regional EMS coordinator's recommendation is not adopted, the OEMS will provide written comments to the regional EMS coordinator.

(c) To enroll in an OEMS-approved training program for any classification set forth in Sec. 19a-179-16 of these regulations as a student/trainee, an individual must apply to the person conducting the program in a form and manner set forth by the OEMS. Applicants who have not attained the age of eighteen shall submit with their application a consent form, prescribed by OEMS, which had been signed by a legal guardian.

Please note that any printed or saved copy of this manual is considered outdated, and the only current version is posted on the "Education and Training" section of the Ct.gov website at www.ct.gov/dph/ems

CONTENTS

Statutes and Regulations.....	2
OEMS Structure	4
EMS Committees and Workgroups.....	5
Non-Governmental agencies and associations.....	6
Course planning and approval.....	7
Course Sponsorship	8
Educational facilities	8
Course Personnel Roles.....	10
Recordkeeping	11
Clinical Contracts	13
OEMS Education Forms	14
EMS Course Requirements.....	15
Certification Expirations, Renewals, Reinstatements.....	22
National Incident Management System (NIMS).....	23
Course Completion	24
Course Cancellation	26
Initial Certification of EMR, EMT.....	26
Alternative Pathway to EMR Certification.....	29
Alternative Pathway to EMR Certification Curriculum	29
Candidates under age 18	31
Initial EMR or EMT Certification Application Process.....	32
EMS candidates without a Social Security Number	33
EMR, EMT & AEMT Continuing Education Requirements.....	34
Approval of EMS Continuing Education	35
Standards for Continuing Education	36
Skills Verification – for Recertification.....	38
Recognized Methods of EMS Education.....	39
Appendix A – Uploading Documents	40

EMS Instructors are subject to the **Connecticut General Statutes** and **Regulations of Connecticut State Agencies**. These resources can be found online at the OEMS website. For convenience, here are links to several of the relevant topics. Each instructor should take review and become familiar with the pertinent statutes and regulations.

[CT Gen Stat § 19a-175 \(2016\)](#)

Sec 19a-175 through 19a-199 establishes the EMS system program as part of the Department of Public Health and sets the Commissioner of Public Health as the policy-setter for this program. Two topics may be of specific interest to EMS instructors:

Sec. 19a-181a. Indemnification of emergency medical services instructors. The state shall save harmless and indemnify any person certified as an emergency medical services instructor by the Department of Public Health under this chapter from financial loss and expense, including legal fees and costs, if any, arising out of any claim, demand, suit or judgment by reason of alleged negligence or other act resulting in personal injury or property damage, which acts are not wanton, reckless or malicious, provided such person at the time of the acts resulting in such injury or damage was acting in the discharge of his duties in providing emergency medical services training and instruction.

[CT Gen Stat § 20-206jj \(2016\)](#)

Sec 20-206jj through 206oo are the statutes that govern certification and licensure of EMS personnel in Connecticut.

[Office of Emergency Medical Services \(19a-179-1 to 19a-179-21\)](#)

Suggested topics for review:

Sec. 19a-179-9: Specifically prohibited acts. – This regulation lists specific things that persons involved in EMS may not do, for example carry a dangerous weapon or firearm, carry handcuffs or smoke in an EMS vehicle.

Sec. 19a-179-13. Release of care to physician on scene – This regulation identifies when and how an EMS provider may allow a patient's physician to assume care.

Sec. 19a-179-16a. Minimum personnel qualifications - certification and licensure – Identifies the levels of certification, required education and refresher requirements for each level of care.

Sec. 19a-179-17. EMS training programs – Identifies the required steps to prepare for and keep records of an OEMS approved training program.

Sec. 19a-437 Mass Gatherings – EMS – Requires a written plan for the provision of EMS for an assembly of 2000 or more persons that will continue for twelve or more hours. (annual agricultural fairs are exempted.)

OEMS STRUCTURE

The Office of Emergency Medical Services is part of the Healthcare Quality and Safety Branch of the Department of Public Health. OEMS oversees all aspects of the EMS system in Connecticut including planning, regulation and oversight. OEMS is located at 410 Capitol Ave in Hartford, just up the road from the State Capitol. It is a “secure facility” – make sure to call ahead before visiting. 860-509-7975

Within OEMS, the Education and Training Coordinator and Licensing and Certification Specialist work together to ensure that educational programs and certification examinations lead to a capable and compliant workforce.

<http://www.portal.ct.gov/DPH/Emergency-Medical-Services/EMS/About-the-Office-of-EMS>

EMS COMMITTEES AND WORKGROUPS

The Department of Public Health, Office of Emergency Medical Services rely on several voluntary committees to guide the policies and operations of the Office. These committees have regular meetings which are open to the public. Several of particular interest to instructors are listed, others may be found on the OEMS webpage.

Connecticut EMS Advisory Board – Established by state statute to "*assist in coordinating the efforts of all persons and agencies in the state concerned with the emergency medical service system and shall render advice on the development of the emergency medical service system where needed*". The Board's membership is dictated by Statute and includes members of the professional community and members appointed by various authorities.

Connecticut EMS Medical Advisory Committee – A physician-based committee of the Advisory Board established to "*provide the commissioner, the advisory board and other ad hoc committees with advice and comment regarding the medical aspects of their projects. The standing committee may submit reports directly to the commissioner regarding medically-related concerns that have not, in the standing committee's opinion, been satisfactorily addressed by the advisory board.*"

Education and Training Committee – A committee of the Advisory Board that provides insight and opinion to training, education and testing of EMS providers. The committee also produces training program content as requested by the Advisory Board.

<http://www.portal.ct.gov/DPH/Emergency-Medical-Services/EMS/OEMS--Committees--Work-Groups>

As used throughout this document, "**Department**" refers to the Department of Public Health and "**Office**" refers to the Office of Emergency Medical Services.

NON-GOVERNMENTAL AGENCIES AND ASSOCIATIONS

Several interest groups, agencies and associations exist to benefit EMS instructors and educators. Listing in this section does not indicate endorsement and is provided for information only.

Connecticut Association of EMS Instructors (CtAEMSI) – www.ctaemsi.org – Non-profit membership organization committed to ongoing support to instructors emphasizing service excellence, communication, continuous learning, teamwork, and community involvement. CSEMSI sponsors two EMS-I CEU sessions each year.

National Association of EMS Educators (NAEMSE) – www.NAEMSE.org – Membership organization that offers several instructor level training programs, an accreditation examination and annual seminar.

EMS Pro International EMS Conference – www.EMSpro.com – Annual event at Mohegan Sun focused on EMS topics.

National Association of EMTs (NAEMT) – www.NAEMT.org – National membership based organization dedicated to professional interest of EMS providers. Provides several EMS educational courses including safety, pediatrics, vehicle operations and trauma life support.

Every approved EMS course shares similar common elements that provide a structure and organization. The role of OEMS in approving courses is to ensure that each course meets the minimum statutory and regulatory standards, has proper clinical oversight and follows current educational standards. OEMS as a regulatory agency does not mandate specific methods of education or training, however enforces basic standards to ensure quality and safety for the general public.

Regulated Courses

The following courses are regulated by the Office of Emergency Medical Services:

1. Emergency Medical Responder (EMR)
2. EMR to EMT Bridge
3. Emergency Medical Technician (EMT)
4. Advanced Emergency Medical Technician (AEMT)
5. Paramedic (MEDIC)
6. EMS Instructor (EMSI)
7. EMS Instructor Trainer (EMS IT)
8. EMS Instructor Continuing Education (EMSI CEU)
9. EMR National Continued Competency Requirement (NCCR)
10. EMT National Continued Competency Requirement (NCCR)
11. AEMT National Continued Competency Requirement (NCCR)
12. Paramedic National Continued Competency Requirement (NCCR)*
13. EMS Continuing Education
14. EMS Instructor Continuing Education

* - This office provides a registry of approval for paramedic level continuing education to support NREMT recertification.

Other types of education may be incorporated in an approved course or offered at different times. The Office does not provide approval or regulation of those courses such as CPR, ACLS, PALS, PHTLS, CEVO and others. The accrediting agencies maintain responsibility for those courses. When an approved course includes a specific brand of course, the Office expects the course coordinator to ensure that the accrediting agency policies are followed.

COURSE SPONSORSHIP

EMS courses may be sponsored or hosted by a licensed or certified EMS agency, an educational institution, hospital or private entity. Individual certified EMS instructors may sponsor courses provided they meet the medical direction, educational facility and equipment requirements of the Department.

EDUCATIONAL FACILITIES

The primary learning environment for all approved EMS courses should have reasonable facilities to support educational techniques and learner comfort. OEMS does not prescribe a specific arrangement or structure, however certain minimum standards should be considered.

ADA Requirements

All course sponsors should have a plan to address the needs of students with disabilities. Each sponsor is individually responsible for accommodating their need for compliance with the Americans with Disabilities Act. Some sponsors, due to their business nature (hospitals, colleges, public entities) may have a higher level of compliance.

The Department will grant reasonable accommodation for the EMR or EMT psychomotor examination provided the accommodation does not compromise the nature of the skill performed. For example, a scenario may be set-up in an area that is accessible to a person using a mobility assistance device, however the manikin used may not be relocated to a table or bed. Candidates **MUST** contact OEMS at least 30-days prior to an exam to arrange for accommodations.

All ADA accommodations for EMS cognitive exams are handled by NREMT. Visit <https://www.nremt.org/Policies/Examination-Policies/ADA-Accommodations> for more information.

Lecture and Classroom

There should be adequate seating and work area for lecture and classroom sessions. Tables, desks, chairs and similar classroom elements should be provided to support the learning environment. Area for separate skills and small-group work should be provided. Overhead projectors, large screen television monitors, marker/chalk boards and audio-video equipment relevant to the topic should be available.

Laboratory Space

Areas for skill practice and development should be provided. The classroom lecture space may be utilized for this purpose, provided there is sufficient space for free movement and equipment. Appropriate simulation equipment and supplies shall be provided.

Heating, Ventilation and Cooling

Season appropriate heating, ventilation and cooling systems should be in place to support the learning environment.

COURSE PERSONNEL ROLES

Each approved course will have several identified personnel roles. Some roles may be held by the same person and some programs utilize different titles.

Course Coordinator** – Is the instructor of record for the course for regulatory purposes. The course coordinator must be a currently certified emergency medical services instructor (EMS-I) who holds at least the same level of provider certification as the course being held. *For example, an Advanced EMT may coordinate an EMT course, but may not be the Course Coordinator for a paramedic course.* The course coordinator is responsible for the overall leadership and coordination of the course and ensures compliance with regulations and educational standards.

Medical Director** – Each approved EMS provider course must have a Medical Director who is a physician currently licensed and authorized to practice in the location of the program, with experience and current knowledge of emergency care of acutely ill and injured patients, have adequate training or experience in the delivery of out-of-hospital emergency care, including the proper care and transport of patients, medical direction, and quality improvement in out-of-hospital care, be an active member of the local medical community and participate in professional activities related to out-of-hospital care, and be knowledgeable about the education of the Emergency Medical Services professions, including professional, legislative and regulatory issues regarding the education of the Emergency Medical Services professions. Where a program has a non-Connecticut based Medical Director, an Associate Medical Director, who meets the above requirements may be selected.

The Medical Director is responsible for ensuring that the selected curriculum, text and training plans meet current medical standards and EMS educational standards. The Medical Director should be available to the Course Coordinator or other educators to answer clinical questions. The Medical Director need not be present for course sessions. (Adapted from the CoAEMSP Standards and Guidelines for the Accreditation of Educational Programs in the Emergency Medical Services Professions)

Medical direction is a matter of private contract between the instructor, training entity and medical director. The medical director may set any terms and conditions of the sponsorship and may modify or revoke such direction as needed. OEMS does not regulate any costs or terms of medical direction.

Clinical Coordinator – EMT, AEMT and paramedic initial courses should have a clinical coordinator to identify and work with clinical experience sites. The clinical coordinator typically manages all clinical experiences outside the classroom and laboratory. Refresher programs typically do not need clinical coordinators.

Lecturer – Any person deemed appropriate to present a topic may be allowed to present specific portions of an EMS course provided a certified emergency medical services instructor is immediately available should questions regarding EMS educational or practice standards arise. For example, a nurse midwife may lecture on childbirth, however if that person is not qualified as an EMS-I, an EMS-I must be available for EMS curriculum related questions.

Classroom Aide – Any person deemed appropriate to assist in the educational process may assist in teaching. The EMS instructor on site is responsible to ensure that such aide teaches in accordance with generally accepted techniques and according to current education standards.

** If there is a change in Course Coordinator or Medical Director, the outgoing Course Coordinator or Medical Director must formally relinquish control of the course to the incoming Course Coordinator or Medical Director. In some cases, such as abrupt resignations, terminations, or death, the incoming Course Coordinator or Medical Director may make the notification without the release of the outgoing party.

RECORDKEEPING

The Course Coordinator must ensure that the following files are kept for five (5) years after the completion of any approved EMS course. (19a-179-7) Files may be kept as paper or digital files and must be produced for OEMS inspection upon request. Initial courses typically require a master course file and individual student files. A list of recommended records is below:

Course File

- Course Approval from OEMS
- Course policies, handbook etc.
- Any clinical agreements or contracts
- Course schedule
- Master copy of any major exam or final exam given
- Initial roster (T4 – Preliminary)
- Final roster, if different
- Cognitive and psychomotor grades
- Attendance records
- Course Completion Report (T-4 as applicable)
- Student feedback forms

Student File

- Course policies acknowledgements (if utilized)
- Answer sheets for major exams and final exams
- Formative and summative psychomotor skills documentation
- Counseling or remediation memoranda
- Student grievances and responses thereto
- Clinical internship reports
- Field internship reports
- Copy of completion document (certificate, diploma, letter)

CLINICAL CONTRACTS

Initial EMT, AEMT and Paramedic courses must have at least one site for clinical skills practice. The course must execute a mutually agreeable clinical contract with each hospital, clinic, ambulance company, fire department or other entity with which it will affiliate. The contract should, at a minimum include the following terms:

- Liability insurance requirements
- Health physical requirements
- Student responsibilities
- Preceptor responsibilities
- Methods of communication
- Dress and behavior guidelines
- Methods of recording and reporting progress
- Processes for managing student exposure to bloodborne pathogens or injury
- Emergency contact personnel information
- Authorizing signatures on behalf of educational organization and clinical site
- Beginning and ending dates of clinical contract

A copy of each clinical contract must be submitted with applications for course approval.

State regulations require that EMS instructors submit various requests and other information on a form designed or approved by the Office of Emergency Medical Services. Several of the approved forms are listed below and may be obtained online at the OEMS website.

The T-1 and T-2 forms have been replaced by the online EMS Education Approval System at www.DPHsubmissions.ct.gov

T-3 Medical Director Sponsorship - Use this form to document medical director sponsorship of EMS instructor led EMS initial or continuing education. A letter of sponsorship may be submitted in place of this form.

T-4 Initial EMS Course Roster and Completion Report – This form must be submitted at the beginning and again at the completion of an initial EMR, EMT, AEMT or EMS instructor course. If students remain “incomplete”, submit an updated form when course requirements are met. Provided in spreadsheet form. Please save and upload as XLS format. Upload via eLicense account in 73 account.

T-5 CME Certificate- This may be issued by and EMS instructor in place of a certificate of CME completion. If the instructor uses their own form, this form is not needed.

T-6 Skills Verification - This may be issued by and EMS instructor (for EMR and EMT) or by a physician medical director or their designee (for AEMT and paramedic) to verify minimum skills for NREMT certification. It may be used for EMR, EMT and AEMT verification of skills for Connecticut recertification.

T-7 Review and Retrain Form - Submit this form to document an EMR or EMT candidate who has failed ONE station at a psychomotor exam and has demonstrated entry-level competency in the failed skill. To be signed by two EMS instructors and send to OEMS directly from an EMS instructor.

EMS COURSE REQUIREMENTS

Each type of EMS course has different requirements and the course coordinator should plan and organize the course to meet regulatory requirements and to prepare the student for their profession. In general, OEMS expects that EMS courses will follow current national educational guidelines as provided by the National Highway Transportation Safety Administration at www.EMS.gov . The EMR, EMT, AEMT and paramedic instructional Guidelines provide a blueprint for training programs.

The National Registry of EMTs Paramedic Psychomotor Competency Portfolio (PPCP) is a “best practice” program that allows paramedic students to have access to a well distributed population of patients during the laboratory, clinical and field phases of education. Paramedic programs should become familiar with this program by researching this at the [NREMT website](http://NREMT_website). EMT and AEMT programs will find useful tools within this program to develop similar educational experiences also.

Instructors should consider the National EMS Scope of Practice Model to assist them in developing curriculum and training plans

EMERGENCY MEDICAL RESPONDER - INITIAL

The initial EMR certification course prepares the candidate to gain simple knowledge of the EMS system and provide initial care for a patient while awaiting EMT and paramedic response. EMR is the basic level of certification for police officers, some firefighters, junior and explorer groups and volunteer ambulance association members. While all EMS training should be competency based, the Office has determined that the minimum time for an initial course should be sixty (60) hours.

The course coordinator must maintain documentation of all skills competencies and final exam records.

Minimum Hours: **Refer to current National EMS Education Standards**

Clinical Experience: **Refer to current National EMS Education Standards**

Written Exam: **NREMT Cognitive Computer Adaptive Test, administered by Pearson**

Practical Exam: **5 stations, administered by OEMS approved Examination Sites**

Renewal: **Every 2 years**

EMERGENCY MEDICAL TECHNICIAN - INITIAL

The initial EMT certification course prepares the candidate to gain fundamental knowledge of the EMS system and provide ongoing care for a patient during transport. EMT is the basic level of care for transporting ambulance crews and is a pre-requisite to many paramedic education programs. While all EMS training should be competency based, the Office has determined that the minimum time for an initial course should be one hundred-fifty (150) hours.

The course coordinator must maintain documentation of all skills competencies and final exam records.

Minimum Hours: **Refer to current National EMS Education Standards**

Clinical Experience: **Refer to current National EMS Education Standards**

Written Exam: **NREMT Cognitive Computer Adaptive Test, administered by Pearson**

Practical Exam: **5 stations, administered by OEMS approved Examination Sites**

Renewal: **Every 2 years**

EMR TO EMT BRIDGE COURSE

A currently certified Emergency Medical Responder (EMR) seeking to become an Emergency Medical Technician (EMT) may complete an abbreviated course that considers the prior learning of the EMR. This course should include a basic entry requirement of demonstrating basic EMR skills prior to commencing with EMT level training. An EMR who fails to complete this training or completes training and fails NREMT exams may maintain current EMR certification subject to the usual EMR recertification process. To enter this course, the EMR must have been certified for a period of one (1) year and maintain current certification throughout the course.

Minimum Hours: **90**

Clinical Experience: **Refer to EMT above.**

Written Exam: **NREMT Cognitive Computer Adaptive Test, administered by Pearson**

Practical Exam: **5 stations, administered by OEMS approved Examination Sites**

Renewal: **Every 2 years**

ADVANCED EMERGENCY MEDICAL TECHNICIAN – INITIAL

A pre-requisite to AEMT training is certification as an EMT. AEMTs are to be educated according to the latest standard, currently provided by NHTSA dated January 2009.

A document entitled “**Guideline for Conducting AEMT Program**” is located in the EMS Education section of the OEMS website. Course coordinators seeking to conduct an AEMT course should refer to this document.

Minimum Hours: **Refer to current National EMS Education Standards**

Clinical Experience: **Refer to current National EMS Education Standards**

Written Exam: **NREMT Cognitive Computer Adaptive Test, administered by Pearson**

Practical Exam: **Effective July 1, 2024, the psychomotor exam is removed by NREMT.**

Renewal: **Every 2 years**

Notes: The Advanced EMT level of certification has seen several changes over recent years including a move from a classroom-based certification exam to the NREMT exam for certification.

PARAMEDIC INITIAL

The paramedic initial training course is a comprehensive program that requires full involvement with an educational facility, sponsor hospital facilities, medical director and field internship sites. It is not advisable for individual instructors to undertake initial paramedic training as national accreditation is required. The Committee on Accreditation of Education Programs for the Emergency Medical Services Profession (CoAEMSP) is the recognized accreditation program in Connecticut.

The T-1 Application to conduct paramedic certification form is a packet that must include clinical contracts, syllabi, CV of medical director and instructors and clinical site information.

Minimum Hours: **Refer to current National EMS Education Standards**

Clinical Experience: **Refer to current National EMS Education Standards**

Written Exam: **NREMT Paramedic Cognitive Computer Based Test**

Practical Exam: **Effective July 1, 2024, the psychomotor exam is removed by NREMT.**

Renewal: **License expires annually in month of birth. \$155 fee to renew. NREMT requires 60 hours of training every 2 years to maintain national certification. No CME is required for state license.**

Note regarding refreshers:

[Public Act No. 19-118](#), passed during the 2019 legislative session, made changes to statutory language regarding the recertification of EMS personnel including EMR, EMT, AEMT and EMS Instructor (EMSI) personnel. Section 57 and 58 of that Public Act made changes to Section 20-206jj and 20-206mm

The concept of a stand-alone traditional “refresher” course has been transitioned to a national “continued competency” program that includes a primary core education plan

and a flexible continuing education model. This applies to *all certified EMR, EMT and AEMT personnel* in Connecticut, regardless of current NREMT status.

Prior to applying for renewal of an EMS certificate, the holder shall complete the required hours of continuing education in the prescribed categories, complete a skills verification, and verify that they have completed such training on the eLicense platform when applying for renewal of certification.

EMERGENCY MEDICAL SERVICES INSTRUCTOR - INITIAL

An EMS-I course must be conducted by a Department approved EMS Instructor Trainer. The basic course content may vary from course to course, but should follow the National Guidelines for Educating EMS Instructors, 2002. The Department will also accept the NAEMSE Instructor 1 and 2 course in lieu of a local EMS instructor course.

Minimum Hours: **5 hours (up to 25% distributive)**

Teaching Experience: **25 hours under supervision of current EMS-I**

Renewal: **2 years. Coincides with EMT or AEMT.
Not with paramedic.**

EMERGENCY MEDICAL SERVICES INSTRUCTOR - RENEWAL

The EMS instructor must participate in a combination of activities that **total fifty (50) contact hours**. Those hours are broken down as follows:

Hours attending OEMS approved Continuing Education: **5 minimum**

Hours teaching EMS content: **35 minimum, covering 5 different topics**

Additional hours, either attending or teaching **10 minimum**

Teaching hours may be accrued when serving as the program director, instructor or adjunct, lecture, lab, or other method. This may include virtual live training and repeated programs.

EMERGENCY MEDICAL SERVICES INSTRUCTOR – CONTINUING EDUCATION

The PROVIDER of EMS-I Continuing Education should apply to the Office for approval of CEUs prior to the event. In general, all education-based training, clinical or non-clinical is acceptable. CEUs are granted based on actual hours of education excluding breaks. Working lunches are granted CEU if they are identified as such.

Instructors may request CEU credit for a course taken outside the EMS community by submitting on the same form and including relevant outlines, schedules and credentials of presenters and a certificate of completion. College level education courses will be granted CEU status.

CERTIFICATION EXPIRATIONS, RENEWALS, REINSTATEMENTS

This section applies to EMR, EMT, AEMT and EMS-I certified personnel. Paramedics are handled differently as they are a licensed professional position.

When a person seeks certification, the licensing and certification office at OEMS will confirm that the applicant has met all of the requirements of the position and has completed the requisite forms. The expiration date of a certificate is based on the quarterly expiration date that is not greater than 24 months from the date of submission of a complete application.

Connecticut Regulations allow for a 90-day grace period for all provider certificates, during which time a person may continue to utilize the certified title and perform the certified duties. During this period, some employers may not permit employees to perform EMS functions as some insurance companies refuse to pay when an “expired” EMS professional provides service. After the 90 days period, the certificate is not valid, and the person may not practice.

Following the expiration date, the certificate holder may reinstate the certificate by completing the usual recertification process. For EMR, EMT and AEMT, that involves completing the required EMS continuing education. For the EMS-I, that involves documenting 50 contact hours including 5 attending CEU, 35 hours of teaching (across 5 different topics) and 10 additional hours of contact time.

NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS)

In 2005, Governor Jodi Rell issued executive order #10 requiring that state agencies participate in the National Incident Management System (NIMS). In 2013, Governor Dannel Malloy issued executive order #34 superseding this order, but confirming that NIMS training should be part of initial EMS training.

All entry level EMS courses shall incorporate the NIMS 100 and 700 programs, as currently provided and updated by FEMA, into the course syllabus. This training counts as part of the minimum course hour and may be completed as homework, class work or presented by a qualified instructor as part of the classroom presentation. A student who has completed this training prior to enrolling in an EMS course may be given credit for prior learning after presenting a valid certificate.

Students should be advised to keep their course completion certificates for future training and employment verification. Currently certified or licensed EMS personnel may count NIMS training as approved EMS continuing education and should consider refreshing or seeking higher level training (200, 300, 400, 800) as required by their job duties.

Students completing NIMS training online through the FEMA system will need to create a "Student ID" number or "SID."

NIMS 100 Course: <https://training.fema.gov/is/courseoverview.aspx?code=IS-100.c&lang=en>

NIMS 700 Course: <https://training.fema.gov/is/courseoverview.aspx?code=IS-700.b&lang=en>

Links subject to change.

COURSE COMPLETION

Upon the completion of any approved initial course, the Course Coordinator shall complete the Certification Program Completion Form (T-4 Form) as provided by the Department on the OEMS website. All students who attended even one session are to be listed on this form. This form allows for an “incomplete” status for students who may have experienced delays in clinical experiences, remediation or re-testing. This form is the official notification from the course coordinator to the Department of Public Health, OEMS, that students completed the program. Any diploma or course certificate may be issued to the student, however it need not be submitted to OEMS. This form must be submitted within **14 days** of course completion.

The T-4 form is to be submitted online via the instructor’s account at www.elicense.ct.gov.

Certification Program Completion Form (T-4 Form)													
Cert Course Level		Lead Instructor Last Name		Lead Instructor First Name		Lead Instructor EMS - Number		Lead Instructor Primary Phone Number		Lead Instructor Secondary Phone Number		Lead Instructor Email Address	
Course Start Date	Course End Date	Instructor Mailing Address - Street / Box			Instructor Mailing Address - Town		Zip	Sponsor Agency	Medical Director Name		Course Approval Number		
Candidate	Last Name	First Name	Certification #	Expiration Date	Date of Birth	Mailing / Street Address	City / Town	State	Zip Code	Cert Level	Alternative Pathway?	Written Exam Score	Program Status
1										0	0	0	Incomplete at 11/6 Time
2										0	0	0	Incomplete at 11/6 Time
3										0	0	0	Incomplete at 11/6 Time
4										0	0	0	Incomplete at 11/6 Time
5										0	0	0	Incomplete at 11/6 Time
6										0	0	0	Incomplete at 11/6 Time
7										0	0	0	Incomplete at 11/6 Time
8										0	0	0	Incomplete at 11/6 Time
9										0	0	0	Incomplete at 11/6 Time
10										0	0	0	Incomplete at 11/6 Time
11										0	0	0	Incomplete at 11/6 Time
12										0	0	0	Incomplete at 11/6 Time
13										0	0	0	Incomplete at 11/6 Time
14										0	0	0	Incomplete at 11/6 Time
15										0	0	0	Incomplete at 11/6 Time
16										0	0	0	Incomplete at 11/6 Time
17										0	0	0	Incomplete at 11/6 Time
18										0	0	0	Incomplete at 11/6 Time
19										0	0	0	Incomplete at 11/6 Time
20										0	0	0	Incomplete at 11/6 Time
EMS Instructor Signature											Date		
											Form	T-4	Rev. 02/12/18

*My typed signature has the same effect as my written signature.

In addition to the T-4 form, the course coordinator shall provide to any student upon request, a certificate or statement of attendance that is to include, but not limited to, the following:

- Course title
- Number of educational hours
- Attendee’s name
- Location of course
- Date(s) of course
- Name and signature of course coordinator (or facsimile thereof)

- Connecticut DPH OEMS approval number

COURSE CANCELLATION

If a Department approved EMS course is to be cancelled, the course coordinator must notify the Office by email and include the approval number, dates and location of the course.

INITIAL CERTIFICATION OF EMR, EMT

Course Completion

Candidates seeking initial certification as an EMR or EMT must demonstrate successful completion of a Department approved EMR or EMT training program which includes a course cognitive (written) examination and a course psychomotor (practical) exam. ***The course exams are separate from the state/national certification exam.***

Once the course is complete, the course coordinator submits a “Course Completion Report” (Form T-4) indicating that the listed course participants completed the required course. This form allows for an “incomplete” status for students who may have experienced delays in clinical experiences, remediation or re-testing. This form is the official notification from the course coordinator to the Department of Public Health, OEMS, that students completed the program. Any diploma or course certificate may be issued to the student, however it has only ceremonial value.

State/National Cognitive Testing

The Department has selected the NREMT to conduct the approved cognitive (written) examination on behalf of the state. Candidates will make an account with NREMT, submit an application and request an “Authorization To Test” (ATT) letter. The course coordinator must mark the candidate as “Successfully Completed Course” on the NREMT website to allow this process to occur. Once the ATT is issued, the candidate must make an account with Pearson Vue, a computer testing company utilized by NREMT to provide the testing.

The Department does not control the content of the NREMT examination. NREMT utilizes a Computer Adaptive Testing (CAT) model that assesses entry level competency based on an algorithm of 60 to 120 multiple choice questions. The test is administered in a proctored, monitored secured facility or thru a proctored, monitored at-home platform.

State Psychomotor Testing

The Department oversees the administration of the EMR and EMT practical examination process. EMS instructors may act as “Exam Coordinators” and host an exam subject to the approval of the Department and using approved skills evaluators. NREMT accepts the Connecticut practical examination process for certification at the national level.

When an exam coordinator requests approval for psychomotor exam, the Department assigns a “Chief Examiner” to act as the representative of the Department and act as the final arbiter of skills testing. The exam coordinator is responsible for paying the Department approved \$250 per exam fee payable to the Chief Examiner.

The exam coordinator must submit, in writing (or email) a request to conduct an exam no less than 30 days prior to the requested date. The coordinator must also submit a list of scheduled candidates (on the approved form) to the Chief Examiner and Department no less than 5 days prior to the exam.

During the examination, exam coordinators manage equipment, supplies and personnel as needed. They may not communicate with, coach, remediate or advocate for the candidates in any way. They may not challenge the decision of an examiner or chief examiner.

Candidates will be tested in five (5) stations:

1. Patient Assessment and Management – Medical
2. Patient Assessment and Management – Trauma
3. Cardiac Arrest – AED
4. Bag Valve Mask – Apneic Adult
5. A Random Skill, selected from:
 - a. Bleeding Control and Shock Management (EMR or EMT)
 - b. Long Bone Immobilization (EMT only)
 - c. Joint Immobilization (EMT only)

Currently approved skill sheets, available on the OEMS website are utilized for all stations. Passing the examination is outlined below:

- Candidates who pass all five (5) stations will be allowed to continue the certification process.
- Candidates who pass four (4) stations will be allowed to continue the certification process once the course coordinator submits a review and retrain form signifying that the candidate has reviewed the failed station. **The Review and Retrain process must be completed by two instructors after the failed attempt and prior to submission of the form.** This form must be signed by two current EMS instructors and submitted to the office. The best way to submit is to scan to dph.emslicensing@ct.gov

- Candidates who pass three (3) stations may retake the failed stations on another day with the goal of passing six or five stations as listed above.
- Candidates who pass fewer than three (3) stations (that means fail 3, 4 or 5 stations) must retake the entire psychomotor exam.

Fees for psychomotor examinations are not regulated by the Department. Payment of fees are the responsibility of the individual candidate and are paid to the exam site. Examinations may be held for one specific class, for more than one class, or to an independent exam site with open registration.

A practical examination must be completed within 24 months following the completion of a department approved EMR or EMT course. A practical examination attempt may count towards only one course. For example, a candidate who completes an exam attempt for a course in year A but retakes the course in year B must retake the exam for the course taken in year B.

ALTERNATIVE PATHWAY TO EMR CERTIFICATION

Those candidates who successfully completes and EMT training program but are not successful in the NREMT process for initial EMT certification may seek certification as an Emergency Medical Responder (EMR).

For those seeking the alternative pathway after attending an EMT initial certification program, the Candidate must:

1. Successfully complete OEMS approved EMT training program pursuant to State of CT Statute Sec. 20-206mm and Regulations of State Agencies 19-179-17.
2. Appear on the EMT Course Completion form (T4), indicating successful completion of the OEMS approved EMT training program, submitted by EMS Instructor responsible for the program
3. Make at least one (1) unsuccessful attempt at the NREMT Cognitive Examination.
4. Within two (2) years of initial EMT course completion
 - a. Attend and successfully complete the “Alternative Pathway to EMR Certification” program, and
 - b. Successfully take and pass the EMR cognitive and practical exam, and
 - c. Appear on an updated EMS Instructor of record completes the Alternative Pathway to EMR Certification Completion form (T4) submitted to OEMS, and
 - d. File EMR Application for Certification (Online at www.elicense.ct.gov) .

ALTERNATIVE PATHWAY TO EMR CERTIFICATION CURRICULUM

Goal: Provide alternative pathways to EMR certification, thus remaining committed to the State of Connecticut EMS workforce and patient care needs within the State’s towns and communities.

Objectives:


- 1) Cognitive domain
 - a) Discuss the difference between the EMR and EMT Scope of Practice
 - b) Assess the role of the EMR in providing emergency patient care
 - c) Examine the consequences of providing care outside one’s Scope of Practice
- 2) Psychomotor Domain
 - a) In scenario-based exercises:
 - i) Distinguish between the intervention options available to the EMR versus the EMT
 - ii) Demonstrate EMR patient care intervention options
 - iii) Develop the ability to fulfill the role of the EMR in a team approach to patient care
- 3) Affective Domain
 - a) Appreciate the role of the EMR in the EMS response system
 - b) Value the intervention capabilities of the EMR in providing patient care
 - c) Appreciate the hazards of providing care outside one’s scope of practice
- 4) Curriculum specifics

- a) The elements of the EMS Agenda for the Future
 - i) Core content
 - (1) description of the span of out of hospital medicine
 - ii) Scope of Practice Model
 - (1) Legal limits and role assignments within the EMR scope of practice
 - iii) National EMS Education Standards
 - (1) Progressive approach to EMS Education
 - (2) EMR competencies
 - iv) Movement towards National certifying exams and national program accreditation
- b) Define:
 - i) Scope of Practice
 - ii) Education
 - iii) Certification vs. licensure
 - iv) State credentialing process
- c) Consequences of acting outside one's scope of practice
 - i) Regulations 19a-179-9 Specifically Prohibited Acts
 - (1) Misrepresentation of certification
 - (2) Providing care without certification (authorization) to do so
 - (3) Providing care outside EMS Systems
 - ii) Criminal law violations
 - iii) Civil law violation
- d) EMR versus EMT Scope of practice
 - i) Review of EMR practice limits and guidelines
 - ii) Specific areas of contrast
 - (1) Immobilization
 - (2) Pharmacology
 - (3) Team responsibilities/role
- e) Alternative EMR Certification
 - i) Procedure for State of Connecticut Certification


CANDIDATES UNDER AGE 18

In accordance with the Regulations of State Agencies, section 19a-179-17(c), applicants who have not attained the age of eighteen shall submit with their application to become an EMR or EMT a consent form as prescribed by OEMS, which has been signed by a legal guardian. This document is available as a fillable PDF.

NREMT provides certification to candidates of all age. This is different from previous years where NREMT did not offer certification to minors.



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. **This course will include a striking presentation on Human Trafficking and Sexual Exploitation of Children. Parents may contact the instructor to preview this material.**

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; government immunities; Good Samaritan Laws; EMS and Paramedic statutes; 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	Date Signed
Student Name	Student Date of Birth	
Course Location	Course Approval #	
Course Instructor	Course Start and Dates	

Parents: You may contact the Department of Public Health, Office of Emergency Medical Services by calling 860-509-7975 or emailing dph.emslicensing@ct.gov with questions or concerns. Provide a copy of this form to the EMS course instructor. **Candidate:** Upload this document when applying at www.elicense.ct.gov

INITIAL EMR OR EMT CERTIFICATION APPLICATION PROCESS

To apply for State of Connecticut certification as an EMR, an applicant must be at least fourteen (14) years old and meet one of the following requirements:

- Successfully complete a department-approved Emergency Medical Responder (EMR) training program in Connecticut with a minimum of 60 hours (**including written and practical examinations**).

To apply for State of Connecticut certification as an EMT, an applicant must be at least sixteen (16) years old and meet one of the following requirements:

- Successfully complete a department-approved Emergency Medical Technician (EMT) training program in Connecticut with a minimum of 150 hours (**including written and practical examinations**).

Documentation Requirements

1. A completed online registration on the Connecticut eLicense website for EMT certification.
2. Successful completion of an OEMS-approved NREMT psychomotor (practical) examination.
3. Successful completion of the National Registry of Emergency Medical Technician (NREMT) examination. For more information, please visit the NREMT website.
4. EMT Training Program Completion Form (T-4), which is submitted directly to the Office by the instructor.
5. If under 18 years of age, a T-7 Parental Consent Form.
6. If applicable, Verification of EMS License/Certification Form from all states in which the applicant is or has ever been certified, current or expired, forwarded to this office from the appropriate authority in any U.S. State or territory in which the applicant is or has ever been certified as a EMS provider. Most jurisdictions charge a fee for verification. Be sure to contact the jurisdiction for fee information.
7. All supporting documentation (except for the online application) should be sent from the primary source (state, territory or instructor).

Results of the practical or written examinations are valid for two years from the end of the course if you are applying for the first time.

Online Accounts

Each candidate will need several online accounts to proceed through each step of the examination and certification process. This process can become confusing to the candidate, so the program should provide guidance and support.

- NREMT Account
- NREMT EMT Application
- Pearson Vue Account (for cognitive exam)
- Connecticut eLicense Account
- Connecticut eLicense Application

EMS CANDIDATES WITHOUT A SOCIAL SECURITY NUMBER

A social security number is used for both NREMT and Elicense applications, however, candidates who have not been issued a social security number may still apply for and obtain NREMT certification and DPH certification or licensure as an EMR, EMT, AEMT or paramedic. NREMT and DPH do not require information on immigration status in order to obtain certification.

Candidates without a current or valid social security number should follow these steps:

1. Email NREMT at support@nremt.org and explain that you are a student without a social security number and would like a **'pseudo social security number'**
2. Use that number to create an NREMT.org account
3. Create an application for certification at NREMT.org
4. Email the OEMS Licensing office at dph.emslicensing@ct.gov to advise them of the pseudo-SSN being used.
5. Create an account at www.elicense.ct.gov
6. Create an application for certifications at elicense.ct.gov using the pseudo social security number provided by NREMT.

EMR, EMT & AEMT CONTINUING EDUCATION REQUIREMENTS

EMRs, EMTs and AEMTs receive certification that is valid for 2 years. Prior to the end of the 2 year cycle, an EMR, EMT or AEMT must complete the NREMT National Continued Competency Program of continuing education. (See next section)

CME or CEU may be collected from standardized EMS courses (ABLS, ACLS, AMLS, EPC, ITLS, PHTLS, PEPP, etc), from EMS related college courses, EMS grand rounds or case reviews, teaching related EMS courses or EMS conferences.

The responsibility to collect, count and record the required continuing education lies entirely with the certified or licensed person, not with the instructor or employer.

APPROVAL OF EMS CONTINUING EDUCATION

Continuing education should follow the generally accepted procedures of the medical community and post-secondary education. One model is the Commission for the Approval of Prehospital Continuing Education (CAPCE) which provides approval of national and local EMS continuing education courses. This Department will provide similar approval following similar guidelines.

An EMS instructor shall apply on the EMS Education Approval page at dphsubmissions.ct.gov for approval to conduct continuing medical education (CME) Certified EMS Instructors may apply for continuing education units in any appropriate number. Once approved, such programs may be provided as needed to satisfy the needs of the EMS community. *For example, a four-hour CME on neonatal care may be offered every month as needed and divided into two-hour modules.*

A qualified person who does not hold certification as an EMS instructor may apply on the same platform for specific topic(s) in which they would be considered a “subject matter expert”. *For example, a Respiratory Therapist may offer a 2-hour CME on “Oxygenation and Ventilation for EMS Professionals,” however they would not be approved to conduct CME on other EMS topics*

Standardized courses, such as those from the American Heart Association (AHA), National Association of EMTs (NAEMT), the American College of Emergency Physicians (ACEP) and others **may** be used to fulfill topics in the National, Local, and Individual Components. *For example, an EMT who attends an Emergency Vehicle Operator Course (EVOC) may apply those hours towards the Operations category. Or, if that EMT has already fulfilled those topics, the EMT may apply those hours to the LCCR or ICCR categories.*

Completion of the NREMT continuing education alone does not complete the recertification process. During the final 6 months of a provider’s certification period, the provider must complete an application for renewal on the eLicense system. At that time, the provider will certify that they have completed the required education and uploaded evidence of training to NREMT.

STANDARDS FOR CONTINUING EDUCATION

The following standards for EMS continuing medical education are applicable:

- Content shall be relevant for the intended audience, medically accurate and properly referenced
- An EMS medical director shall support such education by signing a T-3 form or providing a letter of medical direction and shall follow the Medical Director expectations below.
- CME shall be presented by an EMS instructor or approved subject matter expert
- CME providers shall maintain rosters or logs of those participating in such programs
- CE hours will be correctly applied. For example, a provider will not award two hours of CME for a 20-minute activity.
- Participants shall be given an opportunity to provide critical feedback to the CME provider
- When presented in a live-virtual environment (Zoom, video conference), the host shall develop a method to ensure attendance and active involvement of participants.

The following standards for Distributive (asynchronous) education, which may include recorded lectures, online activities, journal review or other education methods wherein the educator and learner are not in direct communication.

- Content areas cannot be skipped, and post-tests cannot be completed until the content has been viewed.
- Student activities and interactions shall be recorded, tracked, analyzed and reported to the Department upon request

Involvement and Expectations for Medical Director: Involvement of a qualified physician medical director is integral to the success of any EMS education program.

The medical director must:

- Review and approve all activities offered by the accredited organization including objectives, instructional personnel and evaluation tools.
- Provide clarification on all appropriate medical issues.
- Approve all medical content.
- Remain available for consultation on medical questions.
- Assist with participant outcome recommendations.

- Review all program evaluation summaries and make recommendations to improve the activity.

Refer to the CAPCE website Accreditation Guidebook for additional guidance:

<https://www.cecbems.org/docs/Accred%20Guidebook.pdf>

NREMT National Continued Competency Program (NCCP)

The Department has adopted the National Registry of Emergency Medical Technicians (NREMT) National Continued Competency Program (NCCP) of continued medical education as the recertification requirement for certified providers (EMR, EMT, AEMT). The Department supports the NREMT NCCP for licensed paramedics, however as licensed professionals in this state, paramedics are not required to demonstrate compliance with this program.

The current NCCP requirements are available at NREMT.org and are hereby included by reference. For purposes of certification by this Department, the skills competency may be documented by any certified EMS instructor.

Active versus Inactive status with NREMT

The NREMT requires that a registered provider be “actively working and providing patient care” in order to maintain active certification. This requires that they be affiliated with an agency “Training Officer” documents BLS skills or an EMS medical director documents ALS skills.

NREMT certified providers should consult with the NREMT for information on “Inactive Status” at this page: <https://www.nremt.org/rwd/public/document/policy-inactive>

This Department does not distinguish between an active and inactive certified EMR, EMT or AEMT, and a person completing continuing education MAY seek a documentation of skills competency by any certified EMS instructor for renewal of Connecticut certification. This Department assumes no liability for a provider who fails to meet the requirements for renewal of NREMT certification.

Connecticut Certified ONLY	NREMT and Connecticut Certified
<ul style="list-style-type: none"> • Complete NCCP Requirements • Skills Verified by any EMS Instructor • Complete renewal application on eLicense 	<ul style="list-style-type: none"> • Complete NCCP Requirements • Skills Verified by Agency Training Officer or Medical Director • Complete NREMT renewal process near expiration time • Complete renewal application on eLicense

SKILLS VERIFICATION – FOR RECERTIFICATION

During the certification cycle, each provider must demonstrate minimum skill competency at their level of certification. This may be completed by call review, scenario practice, laboratory or skills exams. An EMS instructor may verify EMR and EMT skills and a physician medical director may verify skills for AEMTs and paramedics. *Paramedics need continuing education skills verification ONLY for NREMT, not for Connecticut licensure.*

Skill Competency	EMR	EMT	AEMT	Paramedic*
Medical Assessment & Management	Yes	Yes	Yes	Yes
Trauma Assessment & Management	Yes	Yes	Yes	Yes
Airway Management & Ventilation	Yes	Yes	Yes	Yes
Cardiac Arrest w/AED (All ages)	Yes	Yes	Yes	Yes
Hemorrhage Control & Shock Management	Yes	Yes	Yes	Yes
Spinal Motion Restriction		Yes	Yes	Yes
Splinting, Simple and Traction		Yes	Yes	Yes
IV Therapy			Yes	Yes
IO Therapy			Yes	Yes
IV/IO Medication Administration			Yes	Yes
Advanced Airway Devices			Yes	Yes
Advanced Cardiac Care (megacode, etc)			Yes	Yes

* Paramedic skill competency remains a function of the local medical director and may be documented if the paramedic seeks NREMT certification. Connecticut licensure does not require such verification.

Any form may be used to track skills competency including skills sheets, medical control skills forms or a letter attesting to the skill competency from an EMSI or medical director.

RECOGNIZED METHODS OF EMS EDUCATION

The Office recognizes the following methods of EMS instruction

F-1 Live, One-Time Event Classroom Based Training.

This includes typical lecture based training, conferences or seminars offered once.

F-2 Live, Ongoing or Repeating Classroom Based Training

This includes monthly drills, repeated seminars or training sessions.

F-3 Distributive Learning

“On Demand”– Journals, articles, audio recordings, video recordings, online content

F-4 Standardized Certification Courses

Courses offered by nationally recognized agencies which prescribe the method and content of instruction, offer instructor and provider certification and materials.

F-5 Video Instructor Led Training (VILT) – Live “webinar” two-way synchronous education allowing the teacher and learner to be in different locations. VILT is accepted by NREMT as “Live” training for purposes of recertification.

APPENDIX A – UPLOADING DOCUMENTS

The Department requires certain EMS education documents to be submitted via specific methods in order to provide accountability and tracking. These documents are to be uploaded online at www.elicense.ct.gov . The instructor should:

1. Login to their personal account
2. Select “Online Services”, “Address and General Maintenance”
3. Select “Start” next to the License starting with 73 (all EMSI credentials start with 73)
4. Select “Upload a class roster”
5. Click “Next”
6. Click “Choose File”
7. Select the appropriate document from the user’s computer.
8. Click “Upload Document”
9. Click “Next”
10. Click “Done”

Documents to be uploaded via elicense:

- T-4 Course Completion Forms (in original .xls format)
- Updated T-4 Forms
- Other documents as directed by the Office