

2005 ANNUAL REPORT

NREMT



IT IS IMPORTANT TO THE PUBLIC



**National Registry of  
Emergency Medical Technicians®**  
THE NATIONS EMS CERTIFICATION™

## MISSION STATEMENT

The mission of the National Registry of Emergency Medical Technicians is to serve as the national EMS certification organization by providing a valid, uniform process to assess the knowledge and skills required for competent practice required by EMS professionals throughout their careers and by maintaining a registry of certification status.

## CORE VALUES

In all our actions, including the adoption of our core values, NREMT is guided by a fair and balanced board, representative of the full spectrum of EMS professionals. The core values, accepted by the Board, guide NREMT in decision-making and provide the blueprint for the implementation of the strategic plan.

- We will continually advocate for quality patient care.
- We will exhibit leadership and professionalism at all times.
- We will function with integrity, honesty and objectivity.
- We will make decisions based on scientific evidence as available.
- We will provide excellent customer service and operate in a staff-friendly environment.
- We will operate in an accessible, open and consensus-building manner.
- We will be innovative and flexible in our efforts to support the EMS profession.
- We will be fiscally responsible.



**“As a U.S. Army Hospital Administrator and Executive Officer for the medical command and control component in Kosovo, I relied heavily on Nationally Registered EMTs and Paramedics. We had many outstanding care providers within our task force.**

**However, the medical personnel who held NREMT cards consistently performed at a higher level and met higher standards.**

**The National Registry of EMTs is a standard bearer in our profession and their attention to detail and adherence to standards helps provide some of our benchmarks.”**

**Ben D. Chlapek, NREMT-P, BA, MPA  
Deputy Chief  
Central Jackson County Fire Protection District**

**Lieutenant Colonel  
United States Army**

## LETTER FROM THE CHAIRPERSON



It was my great honor and privilege to assume the chair of the Board of Directors of the National Registry of Emergency Medical Technicians in November. Succeeding Chief Mary Beth Michos in this capacity presents a daunting challenge. She has presided over the

Board through two years of steady growth and some of the most monumental decisions in the history of the Registry. Her leadership has ensured that the Board's deliberations always focused on how its decisions would help the Registry achieve its critical mission.

Just what is the mission of the NREMT? Paraphrasing the Registry's formal mission statement, it is to assure states and communities that their EMTs and paramedics are able to safely and effectively care for sick or injured persons in the out-of-hospital environment. The Registry accomplishes this by providing valid process for certifying new graduates as they enter the profession, and by documenting measures of continued competence throughout their EMS careers. In these functions, the Registry is analogous to medical specialty boards that designate qualified physicians as 'board certified'. For this reason, and because its credentials are recognized by most states, the NREMT serves as the nation's EMS certification.

How does a Board of Directors serve a non-profit organization charged with certifying medical professionals? Basically, the Board is responsible for ensuring that the organization remains mission-focused. The Board, with broad representation of distinguished stakeholders in quality EMS, accomplishes this by establishing strategic plans every year, and then reviewing how well these plans are implemented by the administration and staff. The Board also sets policies that bear on the ability of the organization to achieve its mission, and oversees its budgets and finances.

In the case of the NREMT, the Board's responsibilities are made much easier by Executive Director Bill Brown, Associate Directors Rob Wagoner, Phil Dickison and Gregg Margolis, Systems Manager Sherry Mason, and the incredibly dedicated Registry staff. Together, they have established a culture of sharing their expertise freely, and they have all made great personal sacrifices to serve the Registry's constituents during busy periods, while implementing new initiatives, or when problems arose. They are to be congratulated for their ongoing remarkable performance as is clearly reflected in this report.

Sandy Bogucki, MD, PhD  
Associate Professor  
Yale Emergency Medicine

**SENIOR LEADERSHIP**

William E. Brown Jr., MS, RN, NREMT-P  
Executive Director

Philip D. Dickison, BBA, RN, NREMT-P  
Associate Director

Gregg S. Margolis, PhD, NREMT-P  
Associate Director

Sherry A. Mason  
Systems Manager

Robert L. Wagoner, BS, NREMT-P  
Associate Director

**BOARD OF DIRECTORS**

**CHAIRPERSON**

Sandy Bogucki, MD, PhD  
Emergency Physician, Yale University  
New Haven, CT

**VICE CHAIRPERSON**

Jimm Murray  
LifeNet Division/Air Methods Corporation  
La Vista, NE

**TREASURER**

Peter Glaeser, MD  
Professor of Pediatrics, University of Alabama  
Birmingham, AL

**IMMEDIATE PAST CHAIRMAN**

Mary Beth Michos, RN  
Chief, Department of Fire and Rescue  
Prince William, VA

**PAST CHAIRMAN**

Howard A. Werman, MD, FACEP  
Assoc. Professor, The Ohio State University  
Medical Director, MedFlight  
Columbus, OH

**MEMBERS**

Renee C. Barrett, PhD  
Educational Consultant, University of California  
School of Medicine, Division of Pediatrics  
San Diego, CA

Nancy Bourgeois, RN  
Louisiana State EMS Director  
Baton Rouge, LA

Debra Cason, RN, MS, EMT-P  
Program Director and Assoc. Professor of  
Emergency Medicine Education  
University of Texas Southwestern Medical Center  
Dallas, TX

John R. Clark, JD, NREMT-P, FP-C  
Assistant Program Director - LifeLine  
Indianapolis, IN

Mark King  
West Virginia State EMS Director  
Charleston, WV

Jon R. Krohmer, MD  
Grand Rapids, MI

Kurt M. Krumpferman, MS, NREMT-P  
Vice President, Federal Affairs for  
Rural/Metro Corp.  
Tempe, AZ

Gary Leafblad, MEid, NREMT-B  
Program Director, Opportunities in EHC,  
Osseo High School  
Coon Rapids, MN

Thomas R. Loyacono  
Chief EMS Operations Officer,  
City of Baton Rouge  
Baton Rouge, LA

Dan Manz  
Vermont State EMS Director  
Burlington, VT

David Persse, MD  
Physician Dir. of EMS  
City of Houston Fire Dept.  
Houston, TX

Ritu Sahni, MD, MPH  
Asst. Professor of Emergency Medicine  
Oregon Health & Science University  
Portland, OR

John Sinclair  
Fire Chief, Kittitas County  
Fire District 2  
Ellensburg, WA

Nancy Steiner  
Chief, EMS Personnel, California Emergency  
Medical Services Authority  
Sacramento, CA

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Prof. of Anesthesiology, Mayo Clinic COM  
Rochester, MN

Executive Director Emeritus  
Rocco V. Morando

Director Emeritus  
Ray A. Bias

Physician Directors Emeritus  
Marilyn Gifford, MD  
Norman E. McSwain, Jr., MD

*"I have personally benefited from being a Nationally Registered EMT and paramedic over the last two decades of my career. As an EMT I was able to move to three different states without re-taking exams, and was able to enroll in a paramedic program without any additional skill verification.*

*The National Registry's dedication to providing state-of-the-art examinations keeps the EMS profession in-step with other allied health careers, and raises the bar for educational accountability. The public is well served when hard working professionals are watchful of the knowledge and skill of new EMS clinicians.*

*I deeply appreciate the Registry staff's willingness to help me be a better educator. Their passion for EMS and desire to improve patient care is second to none."*

**David Page, MS, NREMT-P  
Paramedic Instructor  
Inver Hills Community College  
and Clinical Coordinator  
Allina Medical Transportation**



## STRATEGIC PLAN AND KEY INITIATIVES

**William E. Brown Jr., MS, RN, NREMT-P,** *Executive Director*

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For the good of ...

## THE PUBLIC.

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This has been a record year for the National Registry. I want to thank everyone who was responsible for contributing to our success, which involves an impressive list. On the back cover of this Report, you will find a list of accomplishments the NREMT made during 2005. I am humbled by the endeavors the NREMT staff helped achieve, and I admire their passion for EMS.

In addition, several NREMT Board members were recognized for their contributions to EMS. Former Board Chairman Dr. Marilyn Gifford and Ray Bias, were recognized as Directors Emeritus. Current Board of Directors Vice Chairman Jimm Murray received the Rocco V. Morando Award for Lifetime Achievement in EMS from the NAEMT.

The knowledge of our staff continues to escalate. Associate Director Phil Dickison completed numerous classes in preparation for his PhD, while Associate Director Gregg Margolis received his PhD in December 2005. Both research fellows completed classes in preparation for their PhDs.

Revised by-laws were passed that change the structure of the Board over the next ten years. In anticipation of future needs, a recruitment campaign has been explored and will be developed over the next several years, beginning with 2006.

The National Registry remains on course to provide all examinations via computer

based testing (CBT) beginning January 1, 2007. The decision for this transition has been carefully researched. This transition is not happening solely by the NREMT. Many decision makers at the state level, educators, physicians and state regulators have been responsible for preparing for this important move. There is still much more to do in 2006: develop a DVD that will help candidates and their educators make an easy transition to CBT, host five more test writing meetings, and make 25 state visits.

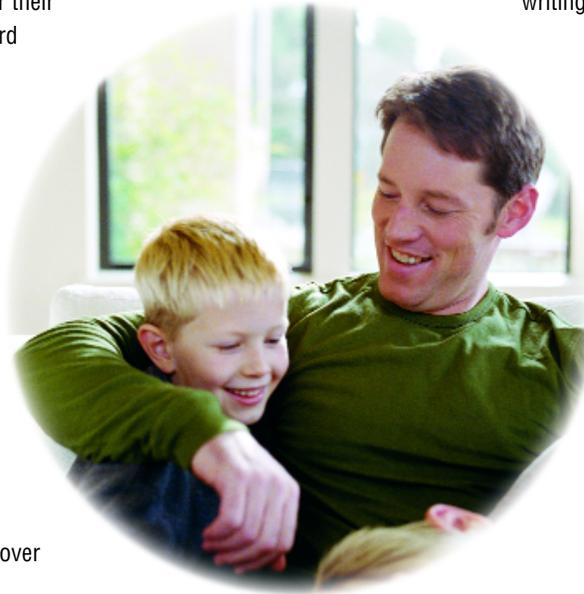
As we prepare for one of the most significant advances in NREMT history, I anticipate another year of excellence and look forward to working with people who are passionate about EMS.

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**“When looking to hire paramedics, I know the NREMT certification means an individual who cares about their profession. It has made a difference for me personally, and it makes a difference for the patients.”**

**Bruce J. Moeller, PhD, NREMT-P**  
**Fire Chief**  
**Sunrise Fire-Rescue**

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## EXAMINATION DEPARTMENT

**Robert L. Wagoner, BS, NREMT-P,** *Associate Director*

For the good of ...

## EXAM CANDIDATES.

As part of the NREMT's responsibility to help protect the public, the Examination Department provides valid and reliable cognitive and psychomotor evaluation of a candidate's competence. While plans are being made to transition to computer based testing in 2007, there are no plans to eliminate the psychomotor portion of the exam.

In order to bolster item banks and test pools for the cognitive portion of the exam, the National Registry hosted twelve item writing meetings in 2005. Thanks to the efforts of the educators, physicians, supervisory personnel and regulators who attended these meetings, several thousand items were successfully added.

Four standard setting committee meetings were also held this year for determining the level of knowledge needed to provide safe and effective care to the public, and thus, for candidates to pass the exam established by the National Registry.

In an on-going effort to maintain exam security, the National Registry produced and rotated twenty different forms of the Basic exam, eight First Responder exams, nine Paramedic exams, five Intermediate-85, and three Intermediate-99 exams.

Three training sessions for Registry representatives were hosted to ensure that policies and procedures are properly carried out during exams. This valuable training means that administration of exams is consistent across the country. Currently there are 331 Registry representatives in the United States who have been trained by NREMT staff to administer advanced level examinations.

## CERTIFICATION DEPARTMENT

**Philip D. Dickison, BBA, RN, NREMT-P,** *Associate Director*

For the good of ...

## REGISTRANTS.

One of the main concerns of exam candidates is how quickly their applications will be processed, especially since certification can determine when employment can commence. In 2005, applications for certification increased on all levels. The Certification Department staff was committed to maintaining the efficiency that has been the hallmark of the National Registry. Our goal was to process applications without compromising turnaround time or adding staff. We managed to meet this goal by increasing scoring per run, but in addition, we also decreased the turnaround time for processing applications.

This increase in efficiency can be attributed to the development of a team that successfully re-designed the processing and scoring of applications so that the increase could be absorbed as well as improved.

As we transition to computer based testing (CBT), it is the intent of the Certification Department to maintain high quality customer service and provide valuable information to candidates seeking registration through this new testing method to be launched in 2007.



## RE-REGISTRATION DEPARTMENT

**Jeffrey K. Scott**, *Re-registration Coordinator*

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### For the good of ... **EMS PROVIDERS.**



The focus of the Re-registration Department is to help registrants understand the requirements necessary for maintaining certification. By meeting all re-registration requirements, EMTs demonstrate continued competency, thereby maintaining a standard and demonstrating professionalism. Our desire is that registrants rightfully take pride in maintaining certification, which can make a difference in the lives of the public.

Our department has concentrated on providing excellent service to registrants. Surveys have been developed and posted on our website to help us determine how to improve the re-registration experience for providers. We expect to receive valuable input and data over a long-term period that will help facilitate changes that will benefit our registrants.

The NREMT is committed to moving toward on-line registration, which will help improve the re-registration experience. A \$5 fee increase for those re-registering at the Basic level—the first increase in 36 years—is being planned for 2006. This is designed to help build the infrastructure necessary for on-line re-registration, allow us to better manage the re-registration process, and maintain documentation for registrants. In spite of this nominal increase, we are proud that our re-registration fees still remain the least expensive among re-certification bodies.

## COMMUNITY RELATIONS DEPARTMENT

**Gregg S. Margolis, PhD, NREMT-P**, *Associate Director*

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### For the good of ... **THE EMS COMMUNITY.**

Keeping the EMS community informed of pertinent issues affecting their performance was our top priority. A newly-expanded department includes Community Relations Coordinator Heidi Erb and Marketing Consultant Ann Marie Mecera. The Department focused on developing materials and visiting states to better inform key constituents of pertinent issues.

Communicating the transition to computer based testing (CBT) that will occur January 1, 2007 was given significant energy in order to make the conversion as smooth as possible. The department organized state visits, monthly state office communiqués, conference exhibitions, brochures, and website updates for the purpose of helping stakeholders prepare for this important event. We are confident that the transition will help bring more credibility to the EMS profession and make the certification process a more positive experience. Because communication is a key to the success of any organization, we are committed to doing all we can to provide stakeholders with the resources they need to serve and protect the public.

**“The AAA is particularly pleased that NREMT is transitioning to [computer based testing since it] will further ensure security and consistency in the national testing process. NREMT is clearly taking a leadership role in providing data-driven research in the improvement of the health and well being of the EMS workforce.”**

**Bob Garner**  
**President**  
**American Ambulance Association**

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## RESEARCH DEPARTMENT

**Gregg Margolis, PhD, NREMT-P**, Associate Director

For the good of ...

## THE FUTURE OF EMS.

The Research Department is committed to improving EMS and the NREMT processes through research. The focus of the research program will be the areas of competency assurance and patient safety, the future of EMS, and EMS workforce analysis.

This past year, the Research Department was expanded to include a second EMS Research Fellow, Antonio Fernandez, who is from New York, New York. He joins Research Fellow Jonathon Studnek, from Albuquerque, New Mexico. Both Jon and Tony are pursuing doctoral degrees at The Ohio State University. The expansion of the fellowship program allows us to take on projects of greater magnitude, and that can have a greater impact on the EMS community.

We have been able to continue our work with LEADS (Longitudinal Emergency Medical Technician Attributes & Demographics Survey) that accurately reflects the individuals providing emergency medical services throughout the United States. The sleep problems reported by EMS personnel were a specific focus of LEADS this past year. In addition, several abstracts were written and presented at national EMS meetings, and two manuscripts were published.



## 2005 NREMT RESEARCH PRODUCTIVITY

### Published Manuscripts

Russ-Eft DF, Dickison PD, Levine R (2005). Instructor Quality Affecting Emergency Medical Technician (EMT) Preparedness: A LEADS Project. *International Journal of Training and Development* 9:4.

Pirrallo RG, Levine R, Dickison PD. Behavioral Health Risk Factors of U.S. Emergency Medical Technicians: The LEADS Project (2005). *Prehospital and Disaster Medicine* Jul-Aug 2005; vol. 20, no. 4.

Brown WE, Margolis GS, Levine R (2005). Peer Evaluation of the Professional Behaviors of EMTs. *Prehospital and Disaster Medicine* Mar-Apr 2005; vol. 20, no. 2.

### Abstracts Presented

Studnek J, Margolis GS (2005). Educational Background Correlates to Success on the National Registry of EMTs Written Certification Examination. Poster presentation at the Prehospital Care Research Forum at the annual symposium of the National Association of EMS Educators.

Margolis GS, Studnek J, Brazelton TB (2005). The Relationship of a State's Paramedic Program Accreditation Policy to First-Time Pass Rate on the National Paramedic Certification Written Exam. Poster presentation at the Prehospital Care Research Forum at the annual symposium of the National Association of EMS Educators.

Studnek J, Margolis GS, Levine R (2005). The Relationship Between Organizational Policy and EMT Seat Belt Use. Poster Presentation at the annual meeting of the Society of Academic Emergency Medicine.

Studnek J, Margolis GS, Levine R (2005) EMT and Paramedic Rating of the Perceived Effectiveness of EMS Workforce Retention Strategies. Oral presentation by the Prehospital Care Research Forum and presented at EMS Today, the annual meeting of the Journal of Emergency Medical Services.

MacDonald D, Cone D, Bogucki S (2005). Occupational Injury and Health Maintenance in EMS. Poster presentation at the annual meeting of the National Association of EMS Physicians (awarded Best Poster Presentation) and oral presentation at the New England Society of Academic Emergency Medicine (awarded Best Oral Presentation).

Margolis GS, Dickison PD (2005). The Relationship between Paramedic Instructor Qualifications and Student Performance on the National Certification Written Exam. Poster presentation at the annual meeting of the National Association of EMS Physicians.



The NREMT transitioned from a fiscal year to a calendar year in 2005. The statistics shown below from previous years have been adjusted to reflect reporting on a calendar year.

**EXAMS PER YEAR** (Time frame January 1– December 31)

	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
First Responder	5725	6555	6900	7774	6761
EMT Basic	62052	71225	81505	88222	92090
EMT-I 85	5220	5498	5383	6004	5231
EMT-I 99	422	599	1013	1521	1869
Paramedic	12965	12847	14054	15339	15815
<b>Total</b>	<b>88385</b>	<b>98726</b>	<b>110858</b>	<b>120864</b>	<b>123771</b>

**FIRST TIME PASS RATE** (Time frame January 1 - December 31)

	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
First Responder	78%	76%	72%	73%	71%
EMT Basic	67%	70%	68%	64%	65%
EMT-I 85	64%	63%	63%	55%	61%
EMT-I 99	69%	66%	67%	65%	63%
Paramedic	63%	64%	63%	63%	64%

**RE-REGISTRATION**

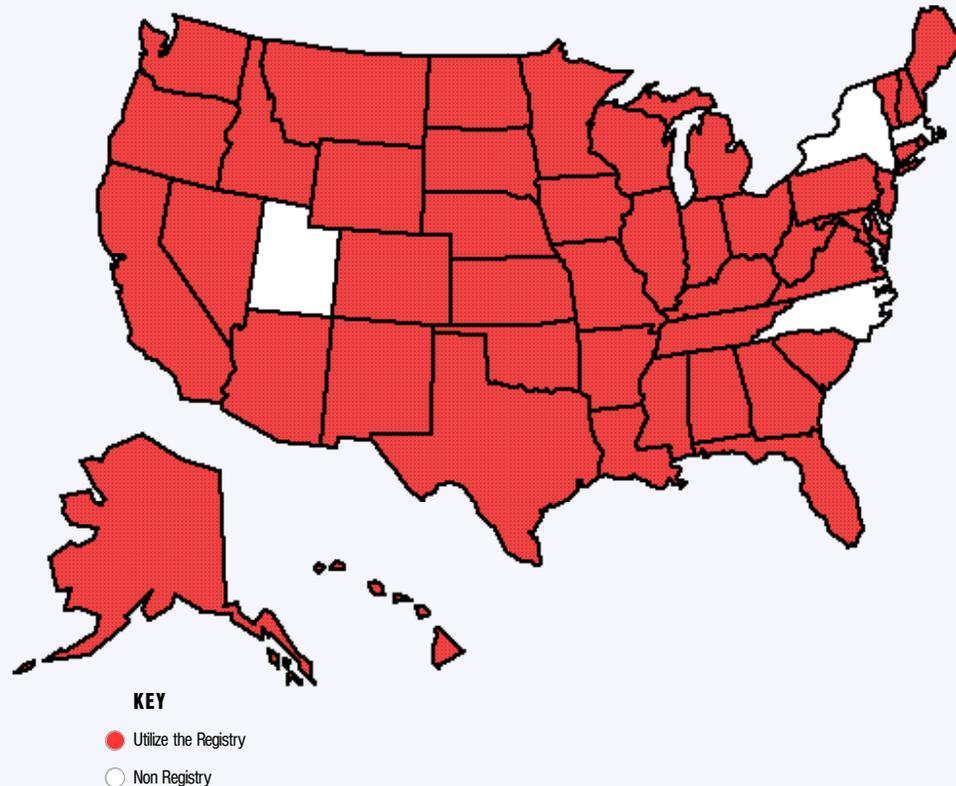
	<b>2001*</b>		<b>2002*</b>		<b>2003*</b>		<b>2004*</b>		<b>2005**</b>	
	<b>ACCEPTED</b>	<b>%</b>								
First Responder	365	15%	815	23%	1074	25%	815		1497	27%
EMT-Basic	18225	37%	20751	40%	22396	40%	24541	42%	29211	40%
EMT-I85	2555	57%	3070	60%	2725	58%	3046	56%	3107	54%
EMT-I99					58	55%	113	47%	251	52%
Paramedic	14753	75%	15862	75%	16675	77%	17473	75%	18217	75%
<b>Total</b>	<b>35898</b>	<b>47%</b>	<b>40498</b>	<b>49%</b>	<b>42928</b>	<b>50%</b>	<b>45988</b>	<b>53%</b>	<b>50786</b>	<b>49%</b>

\*Time frame July 1–June 30

\*\* Time frame January 1- December 31

## STATE UTILIZATION

The map below illustrates the states that utilize National Registry certification to issue EMS licenses.



Maine, Florida and Illinois use the National Registry for Basic certification only.

Alaska, California, Washington DC, Indiana, Maryland, New Mexico, Pennsylvania, Virginia and Washington use the National Registry for Paramedic certification only.

The National Registry of EMT's has had a positive effect on South Carolina EMS. No longer is my staff charged with the awesome responsibility of examination development and validation. In today's world of EMS with staff shortages and budget cuts there is simply not enough time for most states to develop, validate and pilot test examinations before implementation. One of the most important functions that the Registry provides through its governing board is the development of standardized examinations and uniform test standards for certification of Emergency Medical Technicians. I have had the personal experience of serving on a number of examination development committees. Therefore, I say without reservation that the test development process is one that is quite thorough and meticulous and no doubt has a proven track record. The Registry is also involved in any number of national initiatives that positively affects EMS such as the LEADS Project, Practice Analysis Study, Curriculum Development and most recently Computer Based Testing. Additionally, the Registry continues to provide an array of services to the EMS community. However, one of the single most important functions the Registry offers to the public is the relative assurance that the nation's EMTs are providing safe and competent care to the sick and injured by adequately assessing their skill and knowledge level via the examination process. The Registry is a recognized leader in the EMS industry and it is my hope that they continue their quest for the continued advancement of our profession.

Alonzo W. Smith  
Director  
Division of Emergency Medical Services  
SC Department of Health and Environmental Control



## National Registry of Emergency Medical Technicians®

THE NATIONS EMS CERTIFICATION™

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[www.nremt.org](http://www.nremt.org)

## 2005 NREMT ACCOMPLISHMENTS

- Processed the highest number of applications and examinations in NREMT history
- Maintained an average turn-around of 7.8 days
- Processed an average of 600 test results per day
- Employed the largest staff in NREMT history to accomplish our goals
- Re-registered a record number of EMTs
- Revised a record number of pencil-and-paper examinations without a single error
- Hosted a record number (12) of test item writing meetings
- Developed a record number of content valid items for all levels of item banks
- Hosted a record number of Nedelsky standard setting meetings with EMS providers, state officials and EMS physicians defining entry-level competency.
- Conducted the LEADS project for the 7th year
- Visited 25 states to clarify computer based testing (CBT)
- Published manuscripts and presented abstracts at scientific meetings
- Signed a contract with the largest and most experienced CBT vendor in the country
- Hired a new Re-registration Coordinator
- Initiated a community relations department, retained a community relations coordinator and employed the services of a marketing consultant