Does Your National EMS Certification Expire in March 2013?
Do You Know How to Recertify?

Check your National EMS certification card - if it expires on March 31, 2013, you will need to recertify! EMS providers whose certification is due to expire will also receive recertification forms in the mail in November.

The most convenient way to recertify is online via the NREMT website. If you don't have an NREMT account, you can create one and then follow these steps to recertify:

1. Log in to your account on the NREMT website
2. Click on 'My Certification' and affiliate with your agency (employer)
3. Document your continuing education using 'Manage Education'
4. Pay the recertification application fee
5. Submit your records to your Training Officer/Medical Director for verification prior to March 31 of the year your certification expires

Complete instructions are available here.

You may also recertify using the forms mailed to you in November.

AEMT Is Here - But What Exactly Is It?

With the implementation of the 2009 National EMS Education Standards, a new level of provider - Advanced EMT(AEMT) - was created that had not existed in prior versions of the National Standard Curricula. Some may remember the Intermediate/85, aptly named for the 1985 EMT-Intermediate National Standard Curriculum from which it was to be taught. Thirteen years later, the National Standard Curricula for advanced care were again revised, and the EMT-Intermediate/99 was born. So why this brief history lesson? "Those that fail to learn from history are doomed to repeat it." Whether you believe Edmund Burke, George Santayana or Sir Winston Churchill first stated it, what matters is that we don't repeat prior mistakes.

We continually watch, review and investigate performances on all National EMS Certification examinations. However, the most problematic levels have traditionally existed in those that lie between the EMT and Paramedic - we'll collectively call them the "Intermediate" levels for the sake of this discussion. Historically, a large portion of the weak performances in the "Intermediate" levels related to courses of instruction seem to focus almost exclusively on teaching the additional interventions (peripheral IV access, medication administration, advanced airway devices, ECG analysis, ACLS algorithms) while other required didactic information appeared at times to have been largely ignored. For example, the EMT-Intermediate/85 curriculum was focused primarily on preparing an EMT-Basic for the additional skills of peripheral intravenous therapy and insertion of some advanced airway device. Many EMT-Intermediate/85 courses may have been established by looking for the most qualified and experienced allied health professional to teach these additional skills, yet the instructor may have never had access to or reviewed the entire 1985 EMT-Intermediate National Standard Curriculum while conducting the course. Imagine the surprise of many students who completed similar courses when they were asked questions concerning osmosis, acid-base balance, fluids and electrolytes, pathophysiology of shock and medical terminology on the National EMS Certification examination. Yet a close review of the 1985 EMT-Intermediate curriculum clearly shows that this material was required to have been
covered in the educational program. The 1999 National Standard EMT-Intermediate curriculum was significantly more complex, adding several hundred hours of instruction over difficult pathophysiological principles and advanced patient care interventions in an effort to get advanced life support care into more rural communities. In the few states that implemented this level of care, analysis of weaker performances yielded similar findings.

Since June 1, 2011, the NREMT has been certifying AEMTs through administration of cognitive and psychomotor examinations that reflect the Scope of Practice and related educational content identified in the 2009 National EMS Education Standards and the AEMT Instructional Guidelines. Though states' implementation of the AEMT level has been slow thus far, we have kept a watchful eye on performance of the cognitive and psychomotor examinations. Having completed the early polling, we are starting to see hints of the past experiences with the other "Intermediate" levels of care. We're wondering if once again more focus has been placed on teaching the additional skills (supraglottic airways, blood glucose monitoring, intraosseous access, beta agonist and nitrous oxide administration) while sacrificing the time necessary to address the increased pathophysiology that was incorporated into the AEMT Education Standards.

When reviewing the National EMS Education Standards Transition Template (June 2011*) for I/85 to AEMT transition, a total of 16.3 hours was identified as content that was either significantly changed or expanded material that contained enough clinical relevance that review and/or instruction should be included in transitional materials. One only needs to review the content identified to realize that almost all of the "new" material adds increased emphasis on a pathophysiological understanding for most of the patient care topics as compared to the EMT content that was to be delivered in the foundational course. It becomes even more challenging when the educator must teach the AEMT course to an EMT-Basic who was trained over the 1994 EMT-Basic National Standard Curriculum as it provided an even weaker foundation in pathophysiology and medical terminology. The National EMS Education Standards Transition Template for EMT-Basic to EMT transition identifies a total of 13.5 hours of content necessary to fill in the missing content at this level. In addition, the terms and processes used to teach the foundations of patient assessment underwent significant revision and incorporated "Primary Survey/Assessment" and "Secondary Assessment" categories which impacts almost the entire course. For the experienced "Intermediate" instructor who is just beginning to teach the AEMT course, one could conservatively estimate that 20% of the course (30/150 hours) is completely new and addresses some of the most difficult material for students to comprehend.

So how can instructors help prepare AEMT candidates for the NRAEMT (Nationally Registered AEMT) cognitive examination?

First, don't assume that the AEMT students enter your program with adequate mastery of the EMT or CPR material. Perhaps pretesting prospective students over the 2009 National EMS Education Standards, including Guidelines 2010 of the AHA for CPR and Emergency Cardiovascular Care, may help identify students who need extra preparation to bridge gaps in knowledge. Secondly, be absolutely certain that you have prepared your course materials to address all required information outlined in the following:

1. 2009 National EMS Education Standards and Instructional Guidelines for AEMT**
2. 2009 National EMS Education Standards and Instructional Guidelines for EMT**
3. 2010 American Heart Association Guidelines for CPR and Cardiovascular Care BLS for Healthcare Providers (or equivalent courses offered by others that adheres to these standards)
4. Center for Disease Control National Trauma Triage Protocol***

These documents should be obtained, reviewed and incorporated into the AEMT education program. Thirdly, be certain to adequately cover the related pathophysiological principles outlined. Students should be able to understand and discuss why certain assessment findings exist and how their interventions will impact the patient at a system and even the cellular levels. This content is challenging for many students, often times requiring additional motivation and support from the instructor to keep the students engaged with the material. It may also be challenging for the instructor and may require some instructors to seek assistance for better understanding and lecture preparation before teaching the content to AEMT students.

http://www.nasemso.org/EMSEducationImplementationPlanning/documents/GuideEMSEducationAgendaResources060
Are You Planning to Become a Paramedic in the Future?

Graduating From an Accredited Education Program will be Required for National EMS Certification in 2013

Planning ahead will help you avoid making costly mistakes when choosing your Paramedic educational program. If you are thinking about becoming a Paramedic anytime in your career, you need to know about an important change in the NREMT policy for National EMS Certification that may affect you and your education!

Beginning January 1, 2013, EMS providers who want to enroll in Paramedic education and obtain NREMT National EMS Certification at the Paramedic level will need to successfully complete their Paramedic education at an accredited program or one that is seeking accreditation sponsored by the Commission on Accreditation of Allied Health Education Programs (CAAHEP).

This decision was made by the NREMT Board of Directors in 2007. Requiring a single national accreditation agency for Paramedic educational programs follows the recommendations of the National EMS Education Agenda for the Future: A Systems Approach (2000). Implementation of accreditation has been recommended in the Institute of Medicine Report EMS at the Crossroads (2006).

Most recently, the Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP) implemented a Letter of Review (LoR) for programs that have begun the accreditation process in 2012. The LoR serves as the official designation that a Paramedic program is in the process of "Becoming Accredited." A student who graduates from a program that holds or held a LoR anytime during that student's enrollment will be considered eligible for the NREMT Paramedic Examinations.

The NREMT Accreditation policy can be reviewed here.

Haven't Registered Your Agency? Do it Now!

Online recertification is now offered to EMS providers but it requires that the EMS agency (employer) is registered. Registering your agency is a one-time event and only takes a few minutes to complete. Once your agency is registered, multiple training officers and medical directors can be affiliated with your agency.

Here's how to register:

- Go to the NREMT website
- If you don't DON'T have an NREMT account, click on 'Create New Account' (located at the top of the left hand column). If you DO have an NREMT account, log in and select 'EDIT'. Then select 'Add Training Officer Role to this Account'
- Complete the user profile and select the user role 'Training Officer'
- Click on 'Submit' at the bottom of the screen
- Log in using the username and password you created
- Follow the instructions to select or create your Agency Account

Once your agency account has been established, you may download detailed instructions on the features and processes within the online recertification system.
Here’s How to Register Your Agency:

- Go to www.nremt.org
- If you don’t DON’T have an NREMT account, click on ‘Create New Account’ (located at the top of the left hand column). If you DO have an NREMT account, log in and select ‘EDIT’. Then select ‘Add Training Officer Role to this Account’
- Complete the user profile and select the user role ‘Training Officer’
- Click on ‘Submit’ at the bottom of the screen
- Log in using the username and password you created
- Follow the instructions to select or create your Agency Account

Once your agency account has been established, you may download detailed instructions on the features and processes within the online recertification system. Don't delay getting your agency registered. Do it today!

NREMT EMS Research Grows, Using Technology

As the NREMT Research Department continues to grow, the need to keep up with modern technology has increased. This past year, the Research Department has moved from paper-pencil surveys to an all-inclusive web-based data collection system. This allows research participants to provide their expert opinions in important studies in such a way that is convenient to their professional and personal lives.

With the conclusion of the first ten years of the Longitudinal EMT Attributes and Demographics Study (LEADS), the NREMT has launched the next ten years of the study, refining and expanding on the methodologies learned. LEADS now includes both a census and longitudinal component. The longitudinal component will follow 1,000 EMTs and 1,000 paramedics from their start into the profession, and track where their career takes them. This year, the census survey, e-mailed to all Nationally Certified EMS professionals with an e-mail address, focuses on the utilization of helicopter EMS in the prehospital setting.

"E.V.E.N.T" Database Logs 'Near Misses' to Help Reduce Future and Devastating Injuries

In an effort to increase data that exist about the various aspects of EMS, NAEMT, in collaboration with the Center for Leadership, Innovation and Research in EMS, has developed an anonymous system for EMS providers to report near-miss and line of duty death (LODD) incidents. The system allows EMS providers to report LODD incidents by answering a series of questions in an online format.

Data is collected, aggregated, and then analyzed and used in developing EMS policies and procedures. It will also be used in training, educating, and preventing similar events from occurring in the future. Individual responses are not shared or transmitted to other parties.

The Near Miss and LODD Online Reporting Tools, along with the existing process of reporting patient safety events form the EMS Voluntary Event Notification Tool (E.V.E.N.T.).

"This project will allow us to start collecting information which will help reduce injuries and possibly save lives...,” says Don Lundy, NAEMT President-Elect. "We have no idea how many 'near-misses' are not recorded and, later on, become a 'hit' - creating a devastating injury."

Learn more and access E.V.E.N.T. here.
NREMT Executive Director is Presented With Multiple Awards

In January, 2012, NREMT Executive Director William E. Brown, Jr. received the NAEMSP Ronald D. Stewart Award at its Annual Conference. The award is given to a person who has made a lasting, major contribution to the EMS community on a nationwide level. The award is often considered a lifetime achievement award. During the closing ceremonies of the EMS Today Conference & Exposition in March, Bill was presented with the JEMS magazine Lifetime Achievement Award.

In May at Fire-Rescue Med, Bill received the IAFC - EMS Section Medal of Meritorious Service for his contributions to IAFC, EMS and the public.

During his acceptance of these awards, Bill thanked the NREMT Board and staff, and others who supported him during his career. Bill told the audiences that leadership requires values and wisdom. Bill said his first 20 years in EMS were dedicated to learning and gaining experience—necessary components of wisdom. The values that comprise wisdom for him, he explained, were family, faith and honesty.

How to Use Your New Professional Provider Level Designation

During the next four years everyone in EMS will be going through a "transition" from levels of certification designated in the 1990's to new titles with new interventions and responsibilities. These new titles result in new post-nominal letters—the abbreviations placed after your name to identify the achievement of educational degrees, certifications, office/positions, and/or honors.

Current Nationally Certified (active and inactive) individuals are authorized and entitled to display the following post-nominal letters beginning at the following dates:

EMR and EMT Providers
If you took your initial exam at one of these levels or transitioned to one of the new levels through recertification (and received your new NREMT certification card), you can use the new NREMR or NREMT professional designations immediately.

PARAMEDIC Providers
The new NRP designation will become effective in January 2013. When you take your initial exam after January 2013, your new certification card will reflect this new provider level and you can start using this new designation. If you currently hold NREMT-P certification, you may use the new designation once you have completed your state approved transition and receive your new NREMT certification card, indicating Paramedic as the provider level.
**AEMT Providers**
If you took the new AEMT course after June 1, 2011 you can use the new NRAEMT designation.

You may not continue to display the above post-nominal letters if your national certification is expired, revoked, or lapses for any reason. The NREMT does not recognize any other post-nominal letters or variations on the above.

In general, educational degrees precede professional credentials. Typically, only the highest degree obtained is used when you must achieve one credential in order to obtain another (for example, since you must be an EMT in order to be eligible to be a Paramedic, only the designation NRP is necessary.) Usually, all professional credentials are listed in the order they were earned. For example, all of the following are correct: John Smith, AS, NREMR Jane Doe, BSN, RN, NRP, CCRN John Doe, MEd, NRAMEET Jane Smith, NREMT You have worked hard to earn and maintain your national EMS certification and the NREMT encourages you to proudly distinguish yourself by using the appropriate post-nominal letters in your professional communications and documentation. Achieving and maintaining national EMS certification is a considerable professional and personal accomplishment that deserves to be recognized. We encourage all current nationally certified EMS professionals to proudly display the above credentials in recognition of your considerable accomplishment and dedicated service.

**Visit the NREMT at These Fall Conferences**

**American Ambulance Association (AAA)**
Annual Convention & Tradeshow
November 27-29
Caesar's Palace, Las Vegas, NV

**Virginia EMS Conference**
33rd Annual EMS Symposium
November 07 - 11, 2012
Norfolk Waterside Marriott
Norfolk, Virginia

**World EMS Expo**
Oct 29 - Nov 2, 2012
Ernest N. Morial Convention Center
New Orleans, LA

**Are We (Facebook) Friends?**
The NREMT is on Facebook and we hope you are one of our friends. When you are Facebook friends with us, you'll get up-to-the-minute information when you need it most. You can ask us questions, get tips from fellow EMS providers, and meet up with us at EMS conferences. Be sure to find us on Facebook today and be our friend!