

# **Guide for EMS Instructors and Certifying Officers in Alaska**

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## Purpose of This Manual

The purpose of this manual is twofold; it was written to assist the Certifying Officer in his or her role in the EMT certification testing process. It was also written to help the EMT Instructor understand their responsibilities: course approvals, ensuring students have met the prerequisite training and their role during the testing process. We extend our grateful acknowledgment for the exemplary leadership demonstrated by the National Registry of EMTs in the implementation of the EMT-B curriculum. Much of the content in this guidebook is based on an outstanding manual detailing the practical examination process developed for NREMT examiners.

This manual should be made part of a larger packet which contains forms, copies of statutes and regulations, and testing related policies and procedures.

Some of the responsibilities outlined in this manual may be delegated. However, the EMS Certifying Officer is ultimately responsible for the consistency of the examination. The guiding principle for the "CO" should be "what is the best way to administer the examination in a fair and consistent format?" This manual is available for downloading at the Section's web site:

<http://www.chems.alaska.gov>

Suggestions for improving the manual can be sent via mail, fax, or by e-mail to:

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As an alternative, users of the manual may forward comments through their regional EMS office.

This manual has been adopted by reference in 7 AAC 26.050; therefore, changes to this manual cannot be made without changing Alaska regulations. **Certifying Officers should be familiar with this manual prior to certifying written or practical examinations.**

<b>Date</b>	<b>Significant Changes</b>
11/96	Initial Release
11/96	Maintenance update. Fixed typos and made minor changes to content.
12/96	Added equipment list. Added sample scripts for examinations. Expanded many of the sections.
01/97	Updated equipment list Enhanced section on retesting attempts and retesting random skills station Added section on out of state applicants for examinations Added section on remediation
3/97	Added section on proctor selection Updated instructor qualifications on testing matrix Updated proctor instructions
10/97	Updated URL for state web site Added information on time limits Added section on defibrillator technician testing Clarified section on fees
01/98	Updated section related to valid CPR cards Renamed section on "Special Situations" to "Completing Applications." Updated section on selecting proctors. Updated equipment list.
4/98	Added section on "off duty" Certifying Officers
2/99	Updated time limits for written examinations Added section on using minors in practical examinations
06/99	Added EMP America's Basic Life Support for Professionals (BLSPRO) training to list of "valid CPR courses."
2/2001	Added section on military medical personnel, updated to reflect new practical examination breakdown, changed title, added section on prohibiting pagers, cell phones and personal digital assistants (such as Palm Pilots) from the test site.
6/2001	Updated list of CPR Courses.
1/2002	Updated all sections to make consistent with regulatory changes. Updated applications from military medical personnel.

## Responsibilities of the Instructor

The EMS Instructor has some of the most important responsibilities in the EMS system, including ensuring that students trained in his or her course are well prepared, not only for the examinations for certification, but for the rigors of prehospital emergency medical care.

From an administrative point of view, there are several instructor responsibilities which are essential to the timely and efficient processing of paperwork within the State EMS Unit. They include:

### Course Approvals

The *Application for Course Approval* (Form 06-1449)

Is required for each course taught:

- An EMT-II Initial and Refresher class needs two course approval forms (one for initial and one for refresher)
- An EMT-II/III Refresher class needs two course approval forms (one for each level)

MUST be accompanied by a course outline which breaks the course into sections of four hours or less.

MUST be submitted in an appropriate time frame (see explanation below)

The EMT/EMT-Instructor certification regulations set forth the requirements for course approval, including how far in advance the Department of Health and Services must be notified of the course. The number of days before the first day of the course by which course approvals must be submitted are:

Course Name	Deadline
ETT Courses	14 days
ETT to EMT (Bridge) training course	30 days
EMT-I, EMT-II, EMT-III, EMT-I Refresher, EMT-II Refresher and EMT-III Refresher courses	30 days
ETT Instructor Training Programs	60 days
Methods of Instruction course	90 days
Alaska EMS Instructor Orientation course	30 days
Basic Instructor Orientation course	30 days
Advanced Instructor Orientation course	30 days
Mobile Intensive Paramedic Training Programs	120 days

The Section of Community Health and EMS may not approve courses which were not requested in a timely manner.

Other courses, such as ETT refresher training programs, MICP refresher training programs, and Medevac Escort Training programs do not have course approval deadlines, although at least 14 days notice is appreciated and very useful for informing other agencies about the training opportunity.

## Ensuring Students Have Met Prerequisites

It is essential that the EMT Instructor ensure that potential students have met the prerequisites, particularly in EMT-II and EMT-III training programs. Major prerequisites<sup>1, 2</sup> include:

### ETT to EMT-I Course

- Valid CPR credential
- Valid ETT card signed by an ETT Instructor

### EMT-I Course

- CPR Credential (Look for additional information on page 41)
- (if students do not have CPR, the EMT course must be lengthened to 128 hours and CPR training provided)

### EMT-II Course

- Current Alaska EMT-I or National Registry EMT-B\*
- Evidence of at least 10 contacts prior to the start of the class
  - Patient Contact Form – EMT II Candidates OR
  - Medical Director Verification of EMT Experience form
- Approval of the Course Medical Director

### EMT-III Course

- Current Alaska EMT-II or National Registry EMT-Intermediate\*
- Evidence of at least 10 contacts (as an EMT II) prior to the start of the class
  - Patient Contact Form – EMT II Candidates OR
  - Medical Director Verification of EMT Experience form
- Evidence of at least 10 venipunctures as an EMT II (eight of which must be a catheter covered needle)
- Approval of the Course Medical Director

\*While students with National Registry EMT-B or EMT-Intermediate certification can enroll in Alaska EMT-II/III training programs, certification as an Alaska EMT-II/III will not be issued until the applicant completes the form for Comity and is granted an Alaskan EMT certification.

Students who have not met the prerequisites are NOT eligible to enroll in the class. It is the Instructor's responsibility to ensure that ALL prerequisites have been met by the students prior to entry into a class.

Instructors who fail to screen students for eligibility into EMT II and III course will be held accountable for their failure to comply with 7 AAC 26.050. This accountability could include suspension, revocation, or the denial of certification or recertification of the Instructor who does not comply with Alaska regulations<sup>3</sup>

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<sup>1</sup> 7 AAC 26.050

<sup>2</sup> 7 AAC 26.030

<sup>3</sup> 7 AAC 26.950



The Section of Community Health and EMS recommends that course announcements and other relevant correspondence include the following, or similar, information:

To be eligible to enroll in this EMT II course, you must have at least 10 patient contacts as an EMT-I. You must be currently certified as an EMT I by the Alaska Department of Health and Social Services, or as an EMT-B by the National Registry of EMTs. Evidence, such as cards, certificates, or state forms, of certification and patient contact experience must be brought, and will be checked, on the first day of the course. Students who are not eligible to enroll in the course will not be permitted to participate in the written and practical examinations for certification.

This announcement can be changed to reflect the requirements for EMT III training as follows:

To be eligible to enroll in this EMT-III course, you must have at least 10 patient contacts and 10 venipunctures as an EMT-II. You must be currently certified as an EMT-II by the Alaska Department of Health and Social Services. Evidence, such as cards, certificates, or state forms, of certification, venipunctures, and patient contact experience must be brought, and will be checked, on the first day of the course. Students who are not eligible to enroll in the course will not be permitted to participate in the written and practical examinations for certification.

The Section of Community Health and EMS maintains a web site which lists currently certified EMS personnel. This can be used to confirm the certification status of an individual. To be considered currently certified, the person's certification status must be CERTIFIED or RECERTIFIED and the expiration date must be in the future. The on-line database is available at:

<http://www.chems.alaska.gov/emsdata>

Students who were not eligible to be in the course will not have their examinations corrected and will not be eligible for certification based on completion of that course.

## **Experience as a Prerequisite to EMT-II and EMT-III Training**

The EMT/EMT-Instructor Certification regulations require at least 10 patient contacts before enrollment into an EMT-II course and 10 additional patient contacts and 10 venipunctures before enrollment in an EMT-III course. The Section of Community Health and EMS uses either the Patient Contact Form – EMT II/III Candidate or the Medical Director Verification of EMT Experience form for verification of this experience.

Experience for EMT II training may have been gained through

1. Current or previous certification in another state or by the National Registry of EMTs.
2. Military medical experience which has the same scope of practice as an EMT-I or EMT-II (this must be verified and accepted by the Section of Community Health and EMS before the first day of the course). EMT-II and EMT-III instructors should review the section on “military medical experience” on page 40.
3. Previous certification in Alaska as an EMT-I or EMT-II.

Experience for EMT III Training may have been gained

1. Current or previous certification as an Alaska EMT-II.
2. Current or previous certification and practice as an EMT-Intermediate in another state with a scope of practice which met or exceeds the EMT-II Scope of Practice in 7 AAC 26.040. This must be determined in advance of the class by CHEMS.

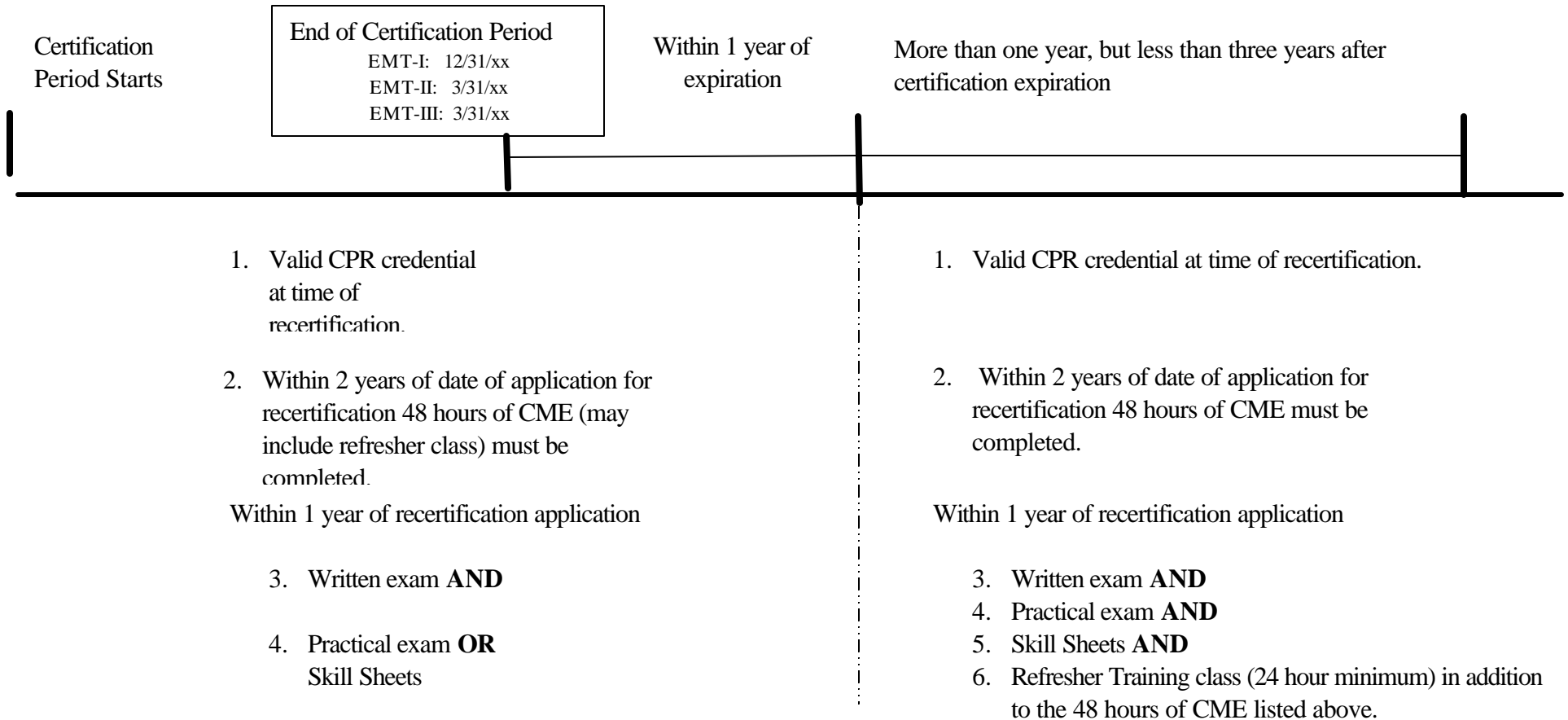
## **Recertification Requirements**

Students are often unclear about the requirements for recertification as an EMT and/or as an EMT Instructor in Alaska. These requirements are specified in 7 AAC 26.110. In order to aid understanding of these requirements, timelines showing recertification requirements have been included on the following pages.

If students or instructors still have uncertainty regarding these requirements, contact the Regional EMS Office or the Section of Community Health and EMS for clarification.

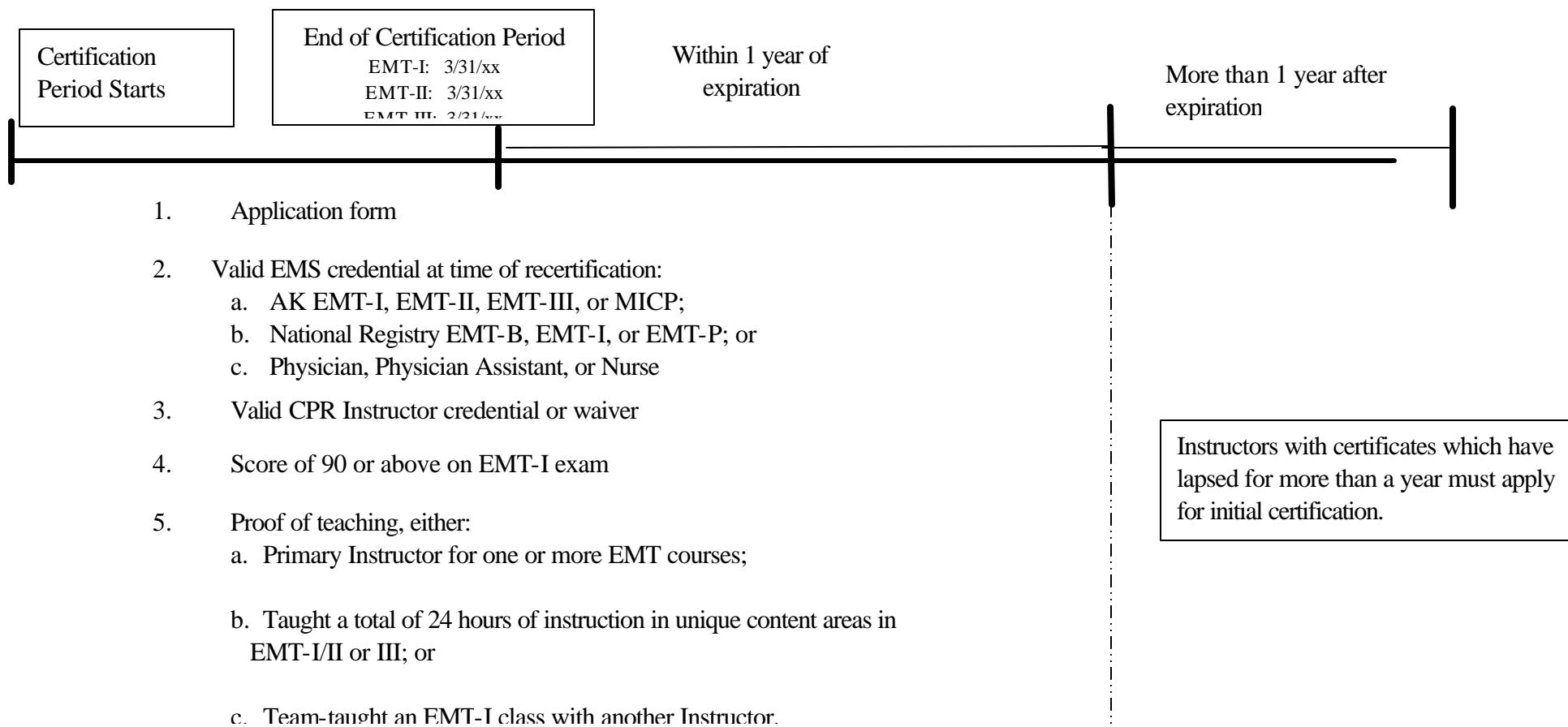
## Time Line for EMT Recertification

To use this time line, put a dot on the line showing the date of application for recertification, (use the certification expiration date as a reference mark). Move backwards on the timeline and make a mark for one year and two years before the date of the application to determine the dates for CME, exams, etc.



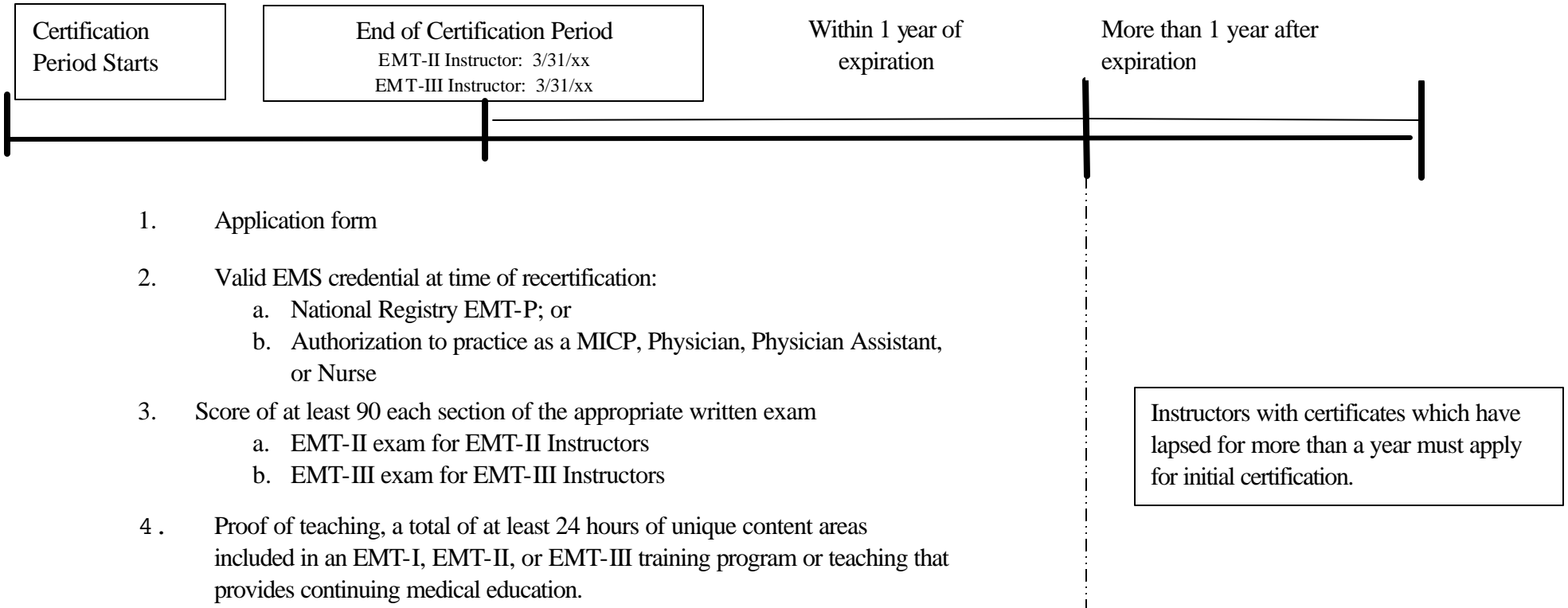
## Time Line for EMT-I Instructor Recertification

To use this time line, put a dot on the line showing the date of application for recertification, (use the certification expiration date as a reference mark). One can then move back one or two years from the dot to determine the dates for CME, exams, etc.



## Time Line for EMT-II/III Instructor Recertification

To use this time line, put a dot on the line showing the date of application for recertification, (use the certification expiration date as a reference mark). One can then move back one or two years from the dot to determine the dates for CME, exams, etc.



## **Responsibilities of the Instructor in the Testing Process**

The course instructor has certain responsibilities<sup>4</sup> to the testing process including:

- Agreeing to arrange for the initial written and practical examination under 7 AAC 26.060 for all students needing department certification; and
- Agreeing to assist the certifying officer in the administration of the written and practical examinations for certification under 7 AAC 26.060 (the department will, in its discretion, grant a waiver of the requirements of this paragraph).

Unless the instructor has made prior arrangements with the Regional EMS Office and Certifying Officer, he or she will be present at the test site for the entire examination. At all test sites, the instructor is responsible for:

- Obtaining simulated patients;
- Providing or arranging for appropriate equipment and supplies;
- Assisting with the setup of practical examination stations;
- Obtaining appropriately credentialed and trained proctors; and
- Securing an adequate site for the examination.

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<sup>4</sup> 7 AAC 26.050

## **The Mission and Authority of the Certifying Officer**

The Certifying Officer is responsible for the consistency of the examination. He or she is selected by the Regional or Subregional EMS Office to serve as the agent of the state in administering examinations. The Certifying Officer is empowered to use sound judgment in ensuring that the examination is administered in accordance with applicable standards and regulations. In essence, the Certifying Officer has overall authority for activities taking place at a test site. Examples can be found on page 54.

The Regional EMS Office is responsible for the selection of Certifying Officers for examinations. They are empowered by the Section of Community Health and EMS to use, or not use, eligible certifying officers based on the needs of the test site, previous experience with a particular certifying officer and other factors.

### **Eligibility of Candidates for Testing**

In most cases, the eligibility of those at the test site will be clear. Applications evidencing instructor recommendations for the test will be available for most initial applicants. Applications for certification under the provisions for Comity will, typically, have been discussed and verified with the regional or state EMS office well before the test. In cases where the eligibility of a person to take the test is uncertain, the Certifying Officer should attempt to contact the regional or state EMS office for clarification and advice. If this is not possible, the person should be allowed to test with the understanding that the person may be determined to be ineligible for certification at that level. In such cases, the Certifying Officer should place an obvious note with the testing materials for that applicant stating that the “person’s eligibility is uncertain.” In rare case, the Certifying Officer may be presented with students who have been auditing the course or who are otherwise **known** to be ineligible for certification. When ineligibility has been clearly established, the Certifying Officer should deny the person the opportunity to take the examination for certification.

### **"Off Duty" Certifying Officers**

Occasionally, an individual who serves as a Certifying Officer may attend a test site to act in another capacity (e.g. proctor, simulated patient, etc.), to take the examination, or to be supportive of others involved in the testing process. In such cases, the individual is not authorized to function as a Certifying Officer at that site. Issues related to test security, disputes, etc., are the responsibility of the site's official Certifying Officer. Although the individual may raise issues for action by the Certifying Officer, he or she has no more authority at the site than does a visitor.



## The Role of the Certifying Officer

The responsibilities of the Certifying Officer at the **examination site** includes:

1. Meet with proctors, victims, and instructor and distribute testing materials.
2. Review the standardized proctor instructions and answer any questions instructors, proctors, bystanders and simulated patients have concerning the exam.
3. Advise the proctors on their roles and responsibilities (see the standard script on page 49).
4. Have proctor or instructor-coordinator make adjustment of scenes, victim moulage and equipment as necessary for compliance with testing requirements.
5. Ensure consistency between stations.
6. Ensure that simulated patients are moulaged and briefed properly.
7. Ensure that proctors are appropriately credentialed and are properly versed in the assessments and interventions contained in the stations for which they will serve as proctor.
8. Check the equipment at each scene for completeness.
9. Meet the applicants, explain the roles and responsibilities of the proctor, instructor-coordinator, and Certifying Officer (see the sample script on page 46).
10. Distribute applications for State of Alaska EMT certification and explain the procedure for filling them out if this has not been done by the instructor.
11. Ensure that the exam is administered consistently, fairly, and safely in accordance with published standards for examination preparation and administration.
12. Turn over the scheduling logistics to the Instructor-Coordinator, if appropriate, paying particular attention to ensuring the confidentiality of testing results.
13. Ensure that all applicants have successfully completed the necessary training program prior to testing, as evidenced by the instructor's signature on the application, or are authorized to take the examination because they are applying for certification via the provisions for comity.
14. Follow the first team through its practical stations or be present at each station as early in the process as possible in order to observe the practical for completeness.
15. Receive and score the practical examination grading sheets as soon as they are completed.
16. Record the examinee's pass/fail/retest status on the practical examination reporting form and notify the student of the status after he or she has completed an initial attempt at all stations.

17. Ensure that all retests are administered by a different proctor. The Certifying Officer must be consulted regarding the necessity to change the scenario for the retest station(s) and other specifics.
18. Ensure that individuals needing to retest at another examination site are provided with the appropriate forms (e.g., the practical examination reporting form).
19. Check all applications for completeness. Discuss with applicants any discrepancies.<sup>5</sup>
20. Collect examination fees. The fee is \$25 for the first attempt and \$10 for each subsequent attempt at the written examination for EMT-I, EMT-II, EMT-III, EMT-I Instructor, and EMT-III Instructor initial certification or recertification. There is no testing fee for certification as a Defibrillator Technician.
21. Checks for Alaska certification should be made payable to "State of Alaska." Checks or money orders are acceptable. Cash is not. If an applicant only has cash, it is best if another student receives the money and pays for both with a check. In such a case, it is essential that the documents sent to the Section of Community Health and EMS clearly indicate which check covers both applicants. "Purchase Orders" may be used to pay for the examinations but should be approved prior to the examination by calling the Section of Community Health and EMS.
22. Administer the written exam (see the standard script on page 44).
23. Administer the National Registry of Emergency Medical Technician's EMT-Basic written exam, if requested in advance by the instructor. Checks for certification by the National Registry should be made payable to the "National Registry of Emergency Medical Technicians." The fee schedule for National Registry EMS certification is as follows:

Level	Fee
First Responder	\$20
EMT-Basic	\$20
EMT-Intermediate / 85	\$45
EMT-Intermediate / 99	\$45
EMT-Paramedic	\$50

**Note that the NREMT-B practical examination includes an automated external defibrillator station.**

24. Collect all test booklets, scratch paper, grading sheets, and check them for marks and completeness.
25. Collect all grading materials, manuals, and other certifying officer materials.

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<sup>5</sup> Only individuals who can provide evidence of successful course completion, or who are applying for comity and can provide evidence of current out-of-state certification at the appropriate level, should be administered the examination for certification. All other discrepancies should be discussed with the applicant but should be dealt with by the Regional or State EMS Offices.

26. Thank everyone for their time.

**Return the testing materials in accordance with the Security Plan (see page 37) to the Regional or Subregional Office from which they were received.**

## **Administering the Written Examination**

The Certifying Officer is expected to:

1. Ensure that students are comfortably seated at tables in a manner which discourages looking at other's answer sheets and that extraneous materials are removed from the tabletops. The use of non-programmable calculators is permitted in EMT-I, EMT-II, and EMT-III examinations for certification.
2. Read the standard instructions to students on page 44.
3. Collect applications and fees for certification.
4. Make sure that students have #2 pencils with erasers, distribute the answer sheets and ask students to complete the top. Make sure the site code and instructor codes are correct.
5. Distribute the examinations and remind students to read the instructions thoroughly.
6. Tell students to begin the examination.
7. Remain in the room, or ensure another authorized individual remains in the room, to ensure the security of the examination (see the Security Plan on page 37). Use the time to review the applications for certification to ensure they are complete.
8. As students complete the examination, collect the materials. Make sure the student did not mark the examination booklet.
9. After all of the students have completed the examination, secure the exam booklets and collect all remaining testing materials.
10. If used, scratch paper must be collected from the students before they leave the room and be returned to the Regional or Subregional EMS Office for destruction.

## **Reading the EMT Certification Examinations**

By Rob Janik, NREMT-P, Southeast Region Training Coordinator

Requests by candidate to have examinations read to them are infrequent. The rarity of this request has led to some uncertainty about the process. Listed below are the details on reading the written examination.

Candidates who claim difficulty with the written English language may request to have the EMT-I certification examination read for them. This request must be made as early as possible to the Regional EMS office. The Regional Office, certifying officer and instructor will coordinate this arrangement. If insufficient notice is given, the reading of the examination may be scheduled for a date other than originally scheduled for the written examination.

An eligible person must be available to read the examination to the candidate. An impartial person, such as the certifying officer or a local schoolteacher must be used to read the examination to a candidate. EMT-instructors involved in the course, local EMTs or fellow students may not read the examination to the candidate. If the certifying officer is used, an appointment must be made outside of the scheduled examination. The questions must be read exactly as written and the reader may not add or detract from what is written. He or she may not prompt the candidate, clarify, paraphrase, translate or otherwise vary from the written examination. The reader may repeat any portion of the examination as requested by the candidate. The time limit for the examination does not change because it was read to the candidate. The candidate must personally complete the answer sheet. The name, credentials and contact information of the reader must be submitted with the testing materials. Instructors holding EMT-I recertification examinations must also follow this policy.

Note that this policy applies only to EMT-I examinations. The EMT-II and III examinations will not be read to candidates except by the approval of the State EMS office. The State EMS office will require documentation in accordance with the Americans with Disability Act (ADA). They will decide whether oral administration of the EMT-II or III examination is appropriate based on the ADA. The infrequent requests to have an EMT-I examination read to the candidate can be accommodated according to the above guidelines. As always, call the Regional EMS Office with questions.

# The Practical Examination Process in Alaska

## Overview

The State EMS Training Committee has adapted the practical examination grading sheets to the “Does/Does Not” format familiar to those using the Alaska Skill Sheets. In addition, the Alaska Skill Sheets have been updated to be consistent with the practical examination.

The EMT-I practical examination consists of the following stations:

- Station 1: Trauma Assessment/Management
- Station 2: Medical Assessment/Treatment
- Station 3: Bag- Valve-Mask Resuscitator-One Rescuer
- Station 4: Spinal Immobilization - Supine Patient **or** Seated Patient
- Station 5: Random Basic Skill Verification (One of the following:)
  - Long Bone Injury
  - Sling and Swath
  - Traction Splint
  - Bleeding Control/Shock Management
  - Airway Adjuncts and Suction
  - Supplemental Oxygen Administration
- Station 6: Cardiac Arrest Management/AED

**Station 6 will be provided at every test site.**

The “random” skills station, the type of spinal immobilization practical (seated or supine), and the scenarios to be used for testing, will be designated each month by the Section of Community Health and EMS. The Regional EMS Office is authorized by the Section to change the random skills station, the spinal station, and the initial scenarios if they have reason to believe the security of the examination has been compromised. The Section of Community Health and EMS should be notified as soon as possible regarding the rationale for any changes made and should be provided a list of the changes.

The policies below have been reviewed and accepted by the National Registry of Emergency Medical Technicians for NREMT-B certification.

## Retesting

The retesting policies for the practical examinations have been modified to conform to those used by the National Registry of Emergency Medical Technicians. The policies offer several advantages. An examination “attempt,” as found in 7 AAC 26.090 and 7 AAC 26.130, is equivalent to the complete failure of the practical examination, (e.g., failure of a single station three times, or failure of four or more stations at a practical examination site).

An individual failing three or fewer stations is eligible to retest the failed stations on the same day at the same test site. Failing the same day retest will require that the individual retest only those stations failed at a different test site with a different examiner. The person has one attempt to pass the station(s) at the subsequent examination site. Failure of the retest constitutes complete failure of the practical examination and requires remedial training. This will require a retake of the entire practical examination at a later time.

Failing four or more stations constitutes complete failure of the practical examination and the applicant must retake the entire practical at a later time. The person must have remedial training regarding the EMT skills at the level being tested before reattempting all stations of the practical examination. The remedial training must be provided by a certified EMT Instructor. There is no minimum time required for the remedial training. The remediation should be documented on the Practical Examination Reporting Form given to each examinee needing remediation prior to retesting. See page 22 for more details on remediation.

An applicant for **initial certification** who fails the practical examination in two attempts must complete a refresher course, as required by 7 AAC 26.090 and 7 AAC 26.130, before retaking the entire practical. If, after taking the refresher course, the applicant fails two more attempts at the examination, he or she is ineligible for certification and must retake the entire training program.

An applicant for **recertification** who fails the practical examination in two attempts is not eligible for recertification (7 AAC 26.130) and must apply as for initial certification.

In accordance with 7 AAC 26.030, the individual must complete the practical examination for initial certification within the twelve months following successful completion of the training program.

Since the “random” station changes each month, it is likely that an examinee will be retested on a different random skill than was missed during the initial attempt.

## Examples

Candidate A fails two stations on the initial attempt but passes both retests. The candidate has passed the practical examination for certification.

Candidate B fails two stations and reattempts them a week later at a different test site. The candidate passes both retests. The candidate has passed the practical examination.

Candidate C fails three stations and reattempts them a week later at a different test site. The candidate passes two of the three retests. The candidate has failed the practical examination and must take a refresher or transition course before reattempting all stations. This is considered an “attempt” at the examination for the purposes of the EMT/EMT-Instructor certification regulations.

Candidate D fails four stations at the initial test site. The candidate has failed the practical examination and must take remedial training before reattempting all stations. This is considered an “attempt” at the examination for the purposes of the EMT/EMT-Instructor certification regulations.

Candidate E fails one station out of the six but wants to obtain additional training before retesting the missed station and declines to take the same day retest. The person is eligible to retest the one failed station at a different test site and is eligible to take a same day retest if the initial attempt is failed. If the person fails the initial attempt, and the same day retest, remediation must be completed before all the practicals are attempted again.

Candidate F completely failed an attempt at the practical examination, has taken remedial training, and fails a single station three more times. The person is considered to have failed his second attempt at the practical examination and, if applying for initial certification must document a refresher course before retesting. The person would no longer be eligible for recertification.<sup>6</sup>

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<sup>6</sup> See 7 AAC 26.130



## **EMT-II and EMT-III Practical Examinations**

This section provides an overview of the Alaska EMT-II and EMT-III examinations. These policies do not, however, impact or change the National Registry of Emergency Medical Technicians' EMT-Intermediate or EMT-Paramedic examinations.

The EMT-II practical examination consists of the following stations:

- Station 1: Advanced Airway Management
- Station 2: Trauma Assessment/Management
- Station 3: IV Access/IV Medication Administration
- Station 4: Spinal Immobilization - Supine Patient or Spinal Immobilization - Seated Patient
- Station 5: Random Basic Skill Verification (One of the following:)
  - Long Bone Injury
  - Joint Injury
  - Traction Splint
  - Bleeding Control/Shock Management
  - Airway Adjuncts and Suction
  - Supplemental Oxygen Administration
- Station 6: AED

The EMT-III practical examination is identical to the EMT-II practical examination except that the AED station is replaced by a more comprehensive Cardiac Arrest Management station.

The entire practical examination must be completed following EMT-II or EMT-III initial training, regardless of the recency of EMT-I or EMT-II testing.

## Breakdown of Practical Examination Stations, By Level

EMT-1	EMT-2	EMT-3
BVM	Advanced Airway	Advanced Airway
Trauma Assessment	Trauma Assessment	Trauma Assessment
Medical Assessment	IV/ IV medication administration	IV/ IV medication administration
Spinal	Spinal	Spinal
Random Basic Skill <ul style="list-style-type: none"> <li>• Airway adjuncts and suctioning</li> <li>• Bleeding control and shock treatment</li> <li>• Long bone Fracture</li> <li>• Oxygen administration</li> <li>• Sling and swath</li> <li>• Traction splinting</li> </ul>	Random Basic Skill <ul style="list-style-type: none"> <li>• Airway adjuncts and suctioning</li> <li>• Bleeding control and shock treatment</li> <li>• Long bone Fracture</li> <li>• Oxygen administration</li> <li>• Sling and swath</li> <li>• Traction splinting</li> </ul>	Random Basic Skill <ul style="list-style-type: none"> <li>• Airway adjuncts and suctioning</li> <li>• Bleeding control and shock treatment</li> <li>• Long bone Fracture</li> <li>• Oxygen administration</li> <li>• Sling and swath</li> <li>• Traction splinting</li> </ul>
AED	AED	Cardiac Arrest

### Remediation

The Practical Examination Reporting Form has a section for the Certifying Officer to complete regarding remediation. This section should be completed only if the applicant is required to have remediation. Advice to applicants who do not require remediation may be provided by the instructor or Certifying Officer through other means. There is no minimum or maximum number of hours for remediation. The remediation must be provided by a department-approved instructor who is responsible for ensuring the student is capable of competently performing the skills required in the Skill Sheets packet for the level of certification at which the applicant is testing. The burden is on the applicant to obtain the required remediation. There is no requirement that a particular instructor provide the remediation. The applicant has 12 months following successful course completion to obtain the remediation and successfully complete the practical examinations.

### Summary

Practical examinations for EMT certification in Alaska are based on well-developed and accepted standards for performance. The system developed by the National Registry of Emergency Medical Technicians has been adapted for use in Alaska and will continued to be refined as additional information becomes available.

## **Student Activities at Practical Examination Sites**

The practical examinations for certification are intended to be used to determine whether an individual can demonstrate, at an acceptable level, the psychomotor skills required for certification. It is expected that students have mastered the required skills before coming to the test site. Therefore, it is not permissible for students to practice at the test site between stations once the examination has started.

Students are expected to be prepared to take the examinations for certification. **Students may not delay or opt out of a practical examination rotation for any reason.**

Students may review the Alaska Skill Sheets between practicals but will not be allowed to practice skills at the test site.

Students may not discuss the contents of the practical examination once it has begun.

# Record Keeping at the EMS Practical Examination Site

## Overview

It is imperative that Certifying Officers maintain meticulous records at an EMS practical examination site. The results of the examinations are sent to Regional EMS Offices and forwarded to the State EMS Office, as well as to the National Registry of EMTs, where they will be used to determine whether the applicant is qualified for certification as an Emergency Medical Technician. Improperly completed (or incomplete) records can result in delays in certification, improper certification, and other complications. The Section of Community Health and EMS will not issue a certificate until all of the qualifications for certification have been adequately documented.

In addition to the applications for certification, there are three main forms which are used to record activities at the practical examination site.

- Practical Examination Roster
- Practical Examination Reporting Form
- National Registry Application

Certifying Officers must be familiar with the information contained in this document prior to the administration of the practical examination.

## Instructions

### **Practical Examination Roster (Used for Entire Class)**

This form is used to record the results of every individual tested at the site. It is helpful, although not essential, to list the individuals in alphabetical order. The outcome for each person should be clear from the completed form. It is helpful to have the names sorted by last name within each level. It is also helpful to have the names of the applicants for initial certification separate from those who are applying for recertification. The top copy of the practical examination roster is kept with the test materials for forwarding to the Section of Community Health and EMS. The pink copy is kept by the instructor as a record of practical examination activities.

### **Practical Examination Reporting Form (Used for Candidates Needing Retesting)**

This form is used **only** for applicants for state certification or certification with the National Registry of Emergency Medical Technicians who do not pass the practical examination at the test site. The Certifying Officer should ask the applicant to complete the upper portion of the form and ensure that it is accurate. The Certifying Officer should then indicate whether refresher training is required in accordance with Alaska testing policies. If the applicant declines to be retested at the site and wishes to do so later, the Certifying Officer should record this information on the form so the person is given the appropriate number of attempts at the retest site. See the section on remediation (page 17) for more information on how to complete this part of the form.

## **National Registry Application**

The practical examination section of the application for certification with the National Registry of Emergency Medical Technicians should be completed and signed **only** after the individual has successfully completed the practical examination at the appropriate level. If an applicant for certification with the National Registry does not pass the practical examination, those portions of the National Registry application related to the practical examination should be left blank and the application submitted to the Registry. The practical examination section of the National Registry application should be completed only when the applicant has passed the examination for certification.

### **Summary:**

The timely and accurate completion and rapid submission of paperwork from the examination site is essential to ensure that certification is granted only to individuals who are qualified, that certification takes place in a timely manner, and that an appropriate record is maintained so that those persons who must retest are treated equitably.

# Preparing and Administering the Practical Examination

## Selecting Personnel to Serve as Patients and Bystanders

One of the instructor's most important responsibilities is the selection of individuals to serve as patients and bystanders. The instructor should ensure that a sufficient number of individuals will be present for the entire practical examination. Every attempt should be made to use persons who can stay for the entire practical examination. This helps ensure consistency and fairness.

Individuals serving as patients need not be EMS providers. It is most important that they understand their role in the examination process and possess sufficient maturity to be appropriate and consistent.

Minors should be used with caution with proper parental consent. The instructor must ensure that simulated patients will be able to be "age appropriate" for the scenarios presented. Even an accomplished 16 year-old thespian will have difficulty in the role of a 50 year old male with chest pain.

**The Certifying Office has the ultimate discretion as to the appropriateness and inclusion of any proposed patient, proctor or bystander.**

In all cases the simulated patients and bystanders should know their roles and be capable of fulfilling them with fairness and consistency.

## Briefing the Students

Briefing the students is, perhaps, the most challenging and important role for the Certifying Officer. This part of the testing process is often the most memorable for students. Students have prepared for the test since the first day of the class and anxiety is expected. You should make it clear that your role is to ensure the test is a fair assessment of their skills. A firm but fair approach is appropriate. Students should be told what to expect in terms of scheduling, score notification, and retesting. Everything possible should be done to avoid embarrassing students. Certifying Officers should wait until a student has completed the first attempt at each station before informing him/her of the results. A system for accomplishing these goals is found on page 30. Students should be reminded that discussing the practical examination once it is underway is not permitted.

## Interacting With the Class Instructor

The course instructor is responsible for obtaining proctors, equipment, etc. for the practical. Instructors must be at the test site. By the test date, an instructor will have invested countless hours toward the success of her or his students. Certifying Officers, who are instructors themselves, can empathize with the instructor's desire to see his or her students do well. However, the Certifying Officer is the department's designee at the test site and is responsible for the overall fairness of the examination process. Therefore, although the instructor has an important role at any test site, the Certifying Officer must remain in control of all aspects of the examination process. Instructors are not to be given the student's practical examination grading forms.

Instructors may not read or review the written examination for certification at the test site. In addition, instructors are prohibited from reviewing the practical examination grading sheets after a station has started.

### **Reviewing Equipment**

Make sure that all equipment needed for the practicals are at the stations and that replacements for expendable supplies are easily accessible without interruption of the testing process. Check the quantities of expendable supplies so that you will have an idea of how much to use per practical and when replacement will become necessary. A basic equipment list can be found on page 31.

### **Duplicating Practical**

In many practical examinations, duplicate practicals are set up to shorten the amount of time needed for testing. In the interest of consistency, it is important to make the practicals as close to identical as possible. The practical examination process requires that all students have the same initial testing scenario.

## Selecting Proctors

The proctors for practical examination stations have an enormous responsibility. As a result, the selection of proctors is critical. The “information sheet” for each practical examination station lists the qualifications required for the proctor of that station. In general, the proctor must be certified or licensed to perform all of the skills contained in the station and should be known to exhibit good judgment and fairness.

The Certifying Officer should confirm the certification level of each proctor. This may be done by viewing the person’s wallet card, calling the automated voice response system, checking the on-line certification database at <http://www.chems.alaska.gov> or through personal knowledge of the individual.

The Certifying Officer should ask each potential proctor whether he or she will be taking a practical examination for EMT certification that month. **Individuals may not proctor stations which they will be taking during the same month.**

## Briefing Proctors

You have several goals when briefing proctors. The first is to ensure that they understand the grading sheet, time limits, and expectations of the practical station which they will be grading. Second, and as important, is that they understand that their primary role is that of a "trained observer." **Personal biases, hidden agendas, and subjectivity must be left outside the test station.** Certifying Officers should use the standardized briefing script found on page 49.



## **Briefing Patients**

Briefing simulated patients is one of the most important responsibilities of the proctor. As the Certifying Officer, the correctness of the examination is ultimately your responsibility. Simulated patients must be prepared to respond in a medically and emotionally correct manner. Patients must be consistent between stations and between examinees. It may help to spend time going over as many "what if?" situations as possible, demonstrating techniques that the technicians may perform, and the correct responses. It is essential to make sure the patient is given sufficient information to respond to questions that may arise during the practical, such as those encountered while obtaining a history. If you will need to prompt the patient to regain consciousness, etc., ensure that the cues are understood and will not interrupt the practical. The patients should be aware of the items on the practical examination grading sheet so they may assist with the grading in circumstances where the technician's actions were not clear.

## **Rehearsing Practicals**

The best way to ensure that proctors understand the grading sheet and that the practical is set up correctly is to practice it at least once. If time does not permit this, it is essential that you visit each station prior to the beginning of the examination to answer questions, resolve equipment difficulties, and so on.

## **Moulage**

As the Certifying Officer, it is your responsibility to ensure that the moulage is medically correct and that proctors and simulated patients know when to change or update the moulage.

## **Confidentiality of Examination Results**

Every effort should be made to keep the candidates' examination results confidential. In the interest to avoiding any possibility of embarrassing examination candidates, no indication of station pass/fail status should be put on a public display (e.g. chalkboard, whiteboard, easel, etc.).

## **Suggestions for Improving Station Flow**

To allow candidates to move through the stations efficiently at a large test site while maintaining candidate confidentiality, Certifying Officers should consider using the State “Practical Examination Roster (06-1594)” and some 3x5 cards in the following manner:

1. Label a 3x5 card for each station (e.g., Station #1, 2, 3, etc.).
2. Select a candidate to go to a station, give him the card for that station and mark a slash to the right of the “R” for that station on the Practical Examination Roster.
3. When the candidate returns the card, place a back slash on the Practical Examination Roster in the space for that station to complete an “X.”
4. Repeat steps 2 and 3 until all candidates have completed testing.

If multiples of a particular station are set up, label them A, B, C, etc. and mark the card sent (e.g., A, B, C, etc.) on the Practical Examination Roster as listed above. Place a slash through it when the candidate returns the card.

This will allow you to track what candidate is in which station and what station has a candidate in it. Additionally, if a proctor needs a break, all he or she must do is hold the card until the break is over and then return it to you so you can start sending students to their station again.

## **Returning Examination Booklets and Materials**

All examination materials are to be returned to the office issuing the Certifying Officer’s packet. All test items should be shipped in accordance with instructions outlined in the Section of Community Health and EMS Test Security Plan (see page 37). Shipping should always be done through a means which allows materials to be traced. A sample cover letter for returning applications and testing materials is found on page 51.

## Basic Equipment and Staffing Requirements

The table below illustrates the typical staffing and equipment requirements of an examination for certification. Instructors should pay particular note to the following:

- The Section of Community Health and EMS will send a monthly list to Regional EMS Offices with information on which random skill will be tested, which spinal (supine or sitting) will be included, and which scenarios will be used for trauma and medical stations.
- Only one of the spinal stations will be administered at the test site.
- All proctors should be certified to at least the EMT-I level (State of Alaska or NREMT), unless otherwise noted.
- The instructor should obtain appropriate moulage.
- Gloves should be available for all students.
- A watch and pen or pencil should be available for the proctors.

<b>EMT-I Examination</b>		
<b>Station</b>	<b>Staffing/Personnel</b>	<b>Equipment</b>
Trauma Assessment and Management	1 proctor, at level of certification, or above, of candidate being tested. 1 moulaged patient (preferred) or manikin	Appropriate clothing. No additional equipment needed, patient will be voice treated.
Medical Assessment and Management	1 proctor, at level of certification, or above, of candidate being tested. 1 patient capable of remembering complex medical history and responding appropriately to rescuers	No additional equipment needed, patient will be voice treated.
Bag-Valve-Mask-One Rescuer	1 proctor (EMT-I, or above)	Bag-valve-mask resuscitator, oxygen reservoir, oxygen connecting tubing, oxygen source with variable flow regulator, intubation manikin, a selection of oropharyngeal airways.
Spinal Immobilization – Seated	1 proctor (EMT-I, or above) 1 patient 2 EMT assistants (Proctor may act as an assistant, if necessary).	Assortment of cervical collars, K.E.D or short board and straps and material to secure head.
Spinal Immobilization – Supine	1 proctor (EMT-I, or above) 1 patient 2 EMT assistants (Proctor may act as an assistant, if necessary).	Assortment of cervical collars, longboard, ample straps, commercially available cervical immobilization device or 2” tape, blankets, towels or bulky dressings, and roller bandages.
Random station-Airway Adjuncts and Suctioning	1 proctor, (EMT-I, or above)	Bag-valve-mask, intubation manikin, at least three sizes of oropharyngeal airways and nasopharyngeal airways, and a suctioning device.

Random station-Bleeding Control/Shock Management	1 proctor, (EMT-I, or above) and patient	Trauma kit with dressings, bandages, assembled oxygen delivery system with non-rebreather mask, Blood pressure cuff, stethoscope, blanket, gloves, Moulage kit to simulate arterial bleeding, pallor, and diaphoresis.
Random station-Long Bone Splinting Practical	1 proctor, (EMT-I, or above) assistant: lay rescuer or above and patient	Assortment of splints, assortment must include, splints long enough to cover patient's knee and ankle, splint padding, strapping materials, gloves.
Random station-Sling and Swath Application	1 proctor, (EMT-I, or above) patient	Triangular bandages and roller gauze, safety pins, tape, and watch for proctor
Random station-Supplemental Oxygen Administration	1 proctor, (EMT-I, or above) patient (manikin may be used)	Oxygen cylinder with more than 500 psi remaining, oxygen regulator for free flow use, cylinder wrench, non-rebreather mask.
Random station-Traction Splinting	1 proctor, (EMT-I, or above) assistant, (EMT I or above, proctor may fill in for assistant), patient	Traction splinting device with ankle hitch and straps, old pants, tape.
Cardiac Arrest Management/AED	1 proctor: AED trained person	AED trainer or AED and dysrhythmia generator, defibrillation pads, CPR/defibrillator manikin capable of interfacing with defibrillator.
<b>EMT-II Examination</b>		
The EMT-II practical examination consists of the Trauma Assessment/Management station, the Spinal Immobilization Station, and the Random Skill Verification Station plus the following two stations:		
Advanced Airway	1 proctor, (EMT-II, or above)	Intubation manikin, multilumen airway or adult endotracheal tubes (7.5-8.5) , Laryngoscope handle, curved and straight laryngoscope blades, silicone spray, malleable stylet, and 10ml syringe. Bag-valve device, oxygen cylinder, oxygen connecting tubing stethoscope and assortment of oral and nasal airways.
IV Access/IV Medication	1 proctor, (EMT-II, or above)	Infusion trainer, 18 or 20 gauge IV catheters (2 per student), IV solution sets, Tourniquets, Alcohol wipes, 2x2's, IV fluids (LR, NS), tape or device to secure IV, sharps container, Preload dextrose 50% in water, Preload Naloxone or ampules (w/10cc syringe and needle)

### EMT-III Examination

The EMT-III practical examination consists of the EMT-II plus the EMT-III Cardiac Arrest Station

EMT-III Cardiac Arrest Station

1 proctor, (EMT-III or above. If the proctor is not an EMT-III, he/she must be ACLS certified)

Defibrillation manikin, monitor/defibrillator, conductive medium, arrhythmia simulator

# Content of a Typical Certifying Officer's Packet

In most cases, the Certifying Officer's Packet will include the following items and information. It is the responsibility of the course instructor to request additional or special equipment in a timely manner.

## Examination Information & Miscellaneous Items

- Site Code
- Examination Version
- Instructor Code
- Class Number
- List of examination booklet numbers and versions
- Guide for EMS Instructors and Certifying Officers in Alaska*
- National Registry of EMTs Testing Booklet
- National Registry brochure
- Alaska EMS Regulations
- # 2 Pencils

## Forms

- Practical Examination Roster
- Practical Examination Reporting Form
- Applications for Certification
  - Initial Certification
  - Comity
- Applications for Recertification
- Continuing Medical Education Forms for Proctors and Patients

## Practical Examination Materials

- Instructions and Information Sheets for Each Station
- Practical Examination Grading Sheets for Each Station
- Certifying Officer's Template for Each Station

## As-Needed

- National Registry Applications and Testing Materials
- Application for Comity

# Approval and Authorization of a Certifying Officer

1. **Qualifications for Approval as a Certifying Officer.** In order to be approved by the department as a Certifying Officer, an individual must be a current instructor at the level to be authorized as a Certifying Officer and:
  - a. successfully complete a state-approved Certifying Officer's workshop or complete a department-approved Certifying Officer's orientation;
  - b. assist a department-approved certifying officer in the administration of an examination at the level of certifying officer he or she is to be designated;
  - c. satisfactorily perform the duties of a certifying officer, as outlined below, under the direct supervision of a department-approved certifying officer, in at least two department approved emergency medical technician examinations;
  - d. have his or her designation endorsed by the appropriate Regional or Subregional EMS Office authorized to distribute examinations; and
  - e. submit an appropriately endorsed application for designation as a certifying officer to the department.
2. **Recordkeeping.** The department will maintain a list of Certifying Officers. The department will provide a list of all individuals with instructor credentials due to expire to the regional EMS offices.
3. **Term of Authorization of Certifying Officers.** Authorization as a Certifying Officer will cease on the date the individual's certification as an instructor expires except as outlined in numbers 4 and 5 below.
4. **Reauthorization.** A Certifying Officer may be reauthorized by the Regional EMS Office responsible for the geographic area in which the individual serves as a Certifying Officer.
5. **Revocation, suspension, or refusal to grant authorization as a Certifying Officer.** The department may revoke, suspend, or refuse to grant authorization as a Certifying Officer if:
  - a. the individual's certification as an instructor is revoked, suspended, not issued, or has expired.
  - b. the practical examination process changes substantially and requires retraining of the Certifying Officer prior to being permitted to certify examinations. This suspension, and subsequent retraining, may be handled in an informal manner by the Regional or Subregional EMS Office.
  - c. the Regional or Subregional EMS Office does not endorse the approval of the individual as a Certifying Officer.
  - d. the Certifying Officer fails to maintain the security of the written and practical examinations in accordance with applicable regulations, policies, and procedures.
  - e. the Certifying Officer has a history of interpersonal conflicts with proctors, examinees, or instructors at examination sites.
  - f. gross negligence in the performance of his or her duties as a Certifying Officer. Examples of gross negligence would include failure to maintain a safe testing

environment, falsifying testing records, theft, or permitting examinees to cheat on examinations.

**6. Designation of Certifying Officers for Test Sites.**

- a. the Regional or Subregional EMS Office authorized to distribute examinations will be responsible for designating a Certifying Officer for each examination within its jurisdiction.
- b. the appropriate Regional or Subregional EMS Office authorized to distribute examinations will be responsible for ensuring that:
  - i. individuals used to certify examinations within their jurisdiction are authorized by the department;
  - ii. the primary instructor of the course does not act as his, or her, class's Certifying Officer unless specifically authorized by the Section of Community Health and EMS; and
  - iii. Certifying Officers are matched, to the extent possible, with examination sites based on such matters as cross cultural communication skills, rapport with the community or class, and other criteria relevant to the particular class or Certifying Officer.

**7. General Provisions.**

- a. a Certifying Officer relocating from one EMS Region to another must successfully complete a department approved Certifying Officer's Orientation provided by the new region prior to certifying examinations.



## Security Plan

**Written and practical examinations are used to verify that the applicant for certification possesses the skills necessary to adequately care for, or teach others to care for, the acutely ill and injured patient. Examinations are costly to develop and maintain. The Section of Community Health and EMS will take action against individuals or agencies misusing the examinations for certification. The security of the examination is the shared responsibility of every individual involved in the testing process.**

### General Points

- All packages containing examinations must be clearly labeled with legible shipping and return addresses.<sup>7</sup>
- Examinations must be shipped only by methods which allow tracing of missing items (e.g., certified mail, Federal Express, etc.).
- Examinations should be sent by certified mail when using the normal postal system.
- All examinations not in the direct view of a certifying officer or other individual authorized by the department to administer examinations must be stored in a secure location, such as a locked filing cabinet, locked car trunk, etc.
- The serial number(s) of the examinations(s) sent must be recorded so that, at any time, all examinations are accounted for.
- The Regional EMS Offices and the Section of Community Health and EMS reserve the right to decline to send testing materials to an individual or agency based on previous or anticipated testing irregularities and to require remedial training regarding the security plan before reestablishing an individual's ability to function as a Certifying Office.
- A sample letter which can be modified for use in returning examinations to the Regional EMS Office can be found on page 51.
- The Section of Community Health and EMS reserves the right to deny access to the written examinations for certification to instructors who have lost examinations or compromised examination security.

### Distribution of Examinations

- The levels of the examination sent to a Regional EMS Office will be based on the levels of instructors available in that region. For example, a region without active EMT-II or EMT-III instructors would not be sent EMT-II and EMT-III examinations, but could request them on a case by case basis from another region or from the Section of Community Health and EMS.
- The Section of Community Health and EMS will be the distribution center for all examinations for Defibrillator Technician certification.

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<sup>7</sup> "Examinations" is meant to include all written and practical testing materials, including completed answer sheets, practical examination result forms, completed applications, National Registry materials, etc.

- Examinations may be sent by Regional EMS Offices **ONLY** to Certifying Officers, EMS Instructors, other regional offices, or others deemed appropriate by the Regional EMS Office with the concurrence of the department.
- If the examination is sent to an individual other than a Certifying Officer for administration of a retest, the examination should be enclosed in a sealed envelope with the signature of the person sending the examination across the flap. The sealed envelope should be given by the recipient to the examinee. After the examination is completed, the examinee should place the completed examination and answer sheet into a manila envelope, seal it, and sign across the flap. The sealed envelope should be returned to the appropriate regional EMS office for processing. The purpose of this protocol is to ensure that the examination is not tampered with. The examination should be accompanied by a cover letter explaining the security provisions and a copy of this plan. The Section of Community Health and EMS has developed a form specifically for this purpose.
- In the rare event that a written examination must be administered to an individual in a community without an EMT Instructor, a qualified individual, such as a school principle, or mid-level practitioner, may be authorized to administer the examination. In this situation, the agency sending the examination must include a cover letter describing the security precautions which must be followed by the recipient. The Section of Community Health and EMS has a specific form and procedure for this type of situation.

### **During the Testing Process**

- The Certifying Officer or authorized individual must be in attendance throughout the administration of the written examination.
- The course instructor and Certifying Officer may not read or review the written examination at the test site.
- The Certifying Officer must discuss examination security with the practical examiners (proctors) prior to administration of the practical examination.
- If, for any reason, an applicant is required to record answers on a sheet other than the approved Scantron answer form, the answers will be transcribed onto the answer form by the Certifying Officer, or designee, checked for accuracy, and returned to the Regional EMS Office accompanied by the original form on which the answers were recorded. This form will be retained with the Scantron answer sheet in accordance with the Section of Community Health and Emergency Medical Services' Records and Retention Schedule.

### **Missing Examinations**

- If, after a reasonable search, an examination is determined to be missing, the agency responsible for the examination must contact the Section of Community Health and EMS and provide the following information in writing within seven days:
  - a description of the missing material(s), including serial numbers;
  - the last known location;
  - a description of the attempts made to locate the examination; and

- a recommendation for additional action.
- The individual responsible for the missing examination must send a separate letter to the Section of Community Health and EMS detailing the circumstances under which the examination was lost.

### **Breaches of Security**

- Breaches of security include copying of the examination materials, unauthorized access to the examination materials, using reference materials during the examination, and using another student's answers on the examination.
- The Section of Community Health and EMS and the Regional EMS Office must be contacted by phone, by the individual responsible for the examination, as soon as practical after the breach.
- If a breach of test security occurs, the individual responsible for the examination should provide a written statement containing:
  - a description of the security breach;
  - a list of individuals involved in the breach; and
  - other information the individual considers appropriate.

The letter should be accompanied by written statements, if available, from persons with knowledge of the event.

- The Section of Community Health and EMS expects that the individual responsible for the examination will perform an initial assessment of the breach of security to obtain information which might not be available at a later time. The Section of Community Health and EMS and Regional EMS Office share the primary responsibility for investigation and do not expect the individual responsible for the examination to perform a detailed examination of the events.

## Applications from Military Medical Personnel

Applications from Military Medical Personnel will be handled in a similar manner to that used by civilians. See *Emergency Medical Services Medical Director Manual* for sample letter regarding military experience.

### For EMT II Training:

For entry in to the class:

- Current Alaska EMT-I or National Registry EMT-B
- Evidence of at least 10 contacts prior to the start of the class
  - Patient Contact Form – EMT-II Candidates OR
  - Medical Director Verification of EMT Experience form
- Approval of the Course Medical Director

To receive Alaska EMT-II certification, the NREMT-B will need to fill out the application for Comity and receive EMT I certification. This can be done after the EMT-II class has been completed.

### For EMT III Training:

- Current Alaska EMT-II
- Evidence of at least 10 contacts (as an EMT II) prior to the start of the class
  - Patient Contact Form – EMT II Candidates OR
  - Medical Director Verification of EMT Experience form
- Evidence of at least 10 venipunctures as an EMT II (eight of which must be a catheter covered needle)
- Approval of the Course Medical Director

It is the responsibility of the EMT-II or EMT-III course instructor to ensure all students are eligible to enroll in the course. This is best accomplished by requiring each student to show his or her valid EMT-I or EMT-II certificate from the Alaska Department of Health and Social Services. A **valid card from the National Registry of Emergency Medical Technicians is now allowed for entry into the class**, but students must be informed that EMT-II certification will not be granted until they have obtained Alaska EMT-I through Comity.

Instructors who allow ineligible students into EMT-II or EMT-III training programs may risk administrative action in accordance with 7 AAC 26.955

# Notes on Completing Applications

## Evidence of a valid CPR Credential

Evidence of a valid CPR credential includes CPR cards, copies of CPR class rosters, or letters from the CPR instructor attesting to the applicant's successful completion of a CPR training program. If provided with this evidence by an applicant, a Certifying Officer or Instructor may verify that the applicant has a valid CPR credential by signing in the appropriate block on the application for certification. In all circumstances the documentation provided by the applicant must provide evidence of "valid" CPR credential as defined below. If the Certifying Officer is presented with an older application for recertification, the applicant has three options:

1. Send in the older application for recertification and attach a copy of the valid CPR card;
2. Complete a new application for recertification; or
3. Append the signed page from the new application related to CPR verification to the older application.

The Section of Community Health and EMS prefers that the applicant select option 2.

## Valid CPR Cards

A CPR card or letter must clearly indicate that the course included adult, child, and infant CPR and airway obstruction management skills, including two-rescuer CPR and barrier devices.

### Valid Credentials:

The following CPR training programs have been approved by the EMS Unit of the Section of Community Health and EMS based on the training program's compliance with 7 AAC 26.985. A credential obtained through the successful completion of one of these programs can be applied towards initial certification or recertification as an EMT-I, EMT-II or EMT-III.

- American Heart Association (Health Care Provider Course)
- American Red Cross (CPR for the Professional Rescuer Course)
- Medic-First Aid (Advanced Course)
- EMP America (Basic Life Support for Professionals (BLSPRO))
- American Safety and Health Institute - CPR-PRO For the Professional Rescuer

For more information concerning the requirements for an organization to have a CPR credential approved, see EMT/EMT-Instructor Certification Regulations (7 AAC 26.985).

## Credentials which are Not Valid

The following CPR credentials are frequently sent to the EMS unit with applications for certification and recertification. These programs do not comply with the requirements for a “valid CPR credential,” usually because they do not cover all of the skills required. These courses may not be applied towards the CPR requirements for initial certification or recertification as an EMT-I, EMT-II or EMT-III.

- Community CPR
- Heartsaver

## **Applicants from Out-of-State**

Instructors and Certifying Officers should be familiar with the section on Comity in the EMT/EMT-Instructor Regulations. This section, 7 AAC 26.150, defines the requirements for applicants wishing to become certified in Alaska based on credentials from the National Registry of EMTs, or from other states and territories. In almost all circumstances, the applicant has obtained permission to test from the State or Regional EMS Office and the Certifying Officer is aware of the applicant’s testing needs. The Comity section of the EMT/EMT Instructor certification regulations require that the person have **valid** certification from the National Registry, or from another state or territory. “Valid” is interpreted to mean “current.” An applicant without evidence of valid certification from another state or territory should not be allowed to test without specific approval from the State or Regional EMS Office.

Individuals with lapsed credentials from other states or territories, or from the National Registry of EMTs, must renew the credentials prior to pursuing certification in Alaska via comity. The typical avenues for recertification include recertifying in the state issuing the person’s credentials and recertifying based on the “lapsed registration” policy of the National Registry of EMTs.

## **Underage Applicants**

An individual who is less than 18 years of age may not be certified as an Emergency Medical Technician I, II, or III in Alaska. In circumstances where an individual less than 18 years old has successfully completed an EMT-I training program and is otherwise eligible for testing, the applicant may take the state written and practical examinations for EMT-I certification. The applicant’s examination will be scored but the person will not be certified until they are 18 years old. The applicant should contact the State EMS Office, in writing, immediately prior to his or her 18th birthday. A certificate, valid for the remainder of the certification period, then will be issued. It is important for the underage applicant to understand that the certification expiration date will be based on the date of successful course completion, not on the date the certificate was issued.<sup>8</sup>

See 7 AAC 26.030 (i) for more information

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<sup>8</sup> Current policies allow an individual, who is at least 14 years old, to be issued a certificate as an Emergency Trauma Technician;

## **Applicants with Criminal Histories**

Individuals who check “Yes” in response to any of the questions on the application regarding criminal or driving histories must submit a signed affidavit with the application for certification. The affidavit must include:

- specific dates;
- official name of the crime
- sentencing or treatment requirements;
- status of the sentencing or treatment required; and
- any other information which is germane to the application for EMT certification.

The affidavit must be signed in the presence of a notary public, postmaster, clerk of court, judge, magistrate, state trooper or authorized state employee, or EMS certifying officer.

Applicants who respond "YES" to the question regarding convictions for violating a federal or state law must obtain and submit the results of a criminal record check from the Alaska Department of Public Safety. The record check must have been completed no more than 90 days preceding the date of application. If the criminal conviction was for a traffic related offense (minor traffic violations are excluded), a driving history from the Department of Public Safety also must be submitted. The driving record must have been completed no more than 90 days preceding the date of application.

Applications received without the appropriate documentation will not be processed until it is received. In most circumstances, the Certifying Officer should return the incomplete application with the other testing materials and applications. The applicant should be advised to send the additional documentation required directly to the State EMS Office, unless other arrangements have been made by the Regional EMS Office.

7 AAC 26.950 clearly lists the grounds which will result in suspension, revocation, or denial of certification and/or recertification as an EMT-I, EMT-II, EMT-III, ETT Instructor, EMT-I Instructor, EMT-II Instructor, or EMT-III Instructor. If your student has specific questions about the regulation they can download this regulation from the CHEMS website at [www.chems.alaska.gov](http://www.chems.alaska.gov).

In addition, the regulation also requires EMTs and EMS Instructors to notify the department, in writing, within 30 days after being charged with an offense that is a class A misdemeanor or a felony.

# Scripts for Reading to Proctors and Students

## Written Examination Instructions

**The Certifying Officer should read the following instructions to all individuals taking the EMT-I, EMT-II, or EMT-III examinations for certification. Information on time limits for the particular examination is found in the test booklet.**

1. We are ready to start the written examination. Please remove all material from your desk. You are not to open the test booklet until I give you instructions to do so. There is [“no” or “a \_\_\_\_ minute”] time limit for this exam. Typically, individuals taking the examination for the first time complete it in about two hours.

### Time limits

<b>Exam</b>	<b>Limit</b>
EMT-I	3.5 hours
EMT-II	3.5 hours
EMT-III	3.5 hours
Manual Defibrillator Technician	no time limit
Emergency Medical Dispatcher	no time limit

2. During the examination, you will be permitted to leave the room one at a time if it is urgent that you use the bathroom. If you need to use the bathroom, please raise your hand and I will dismiss you after you place your written answer sheet and scratch paper inside your test booklet, close the booklet, and return it to me. This privilege will be suspended if it is abused.
3. I am not permitted to answer any questions about individual test items.
4. You must understand that any irregularities connected with this examination, such as giving or obtaining unauthorized information or assistance to another applicant, as evidenced by direct observation of the proctor(s) or subsequent analysis of examination results, may be sufficient cause to terminate your participation, to invalidate the results of your examination, or to take other appropriate action. In such cases, the State of Alaska reserves the right to delay processing of examination results until a thorough and complete investigation is conducted. You must not copy any material from the examination or make any recordings of this examination at any time or in any way. Efforts to reconstruct the examination using your memory or that of others are prohibited. You must not duplicate any questions in writing and should report evidence of this activity to the Section of Community Health and EMS.
5. No calipers, programmable calculators, or other mechanical devices may be used during the examination. However, basic calculators are permitted for use on the Alaska written examination for certification. No calculators may be used for the National Registry of EMTs’ written examination for certification.
6. At this time, all pagers, cellular telephones, personal digital assistants, and similar electronic communication devices must be turned off. If you attempt to use any of these devices during the examination without prior authorization from the certifying officer, you will be dismissed from the remainder of both the written and practical examinations.



7. After finishing the examination, you may leave the room. Be sure you have signed the answer sheet and returned all examination materials which were given to you, including the examination booklet, scratch paper, answer sheet, and any borrowed pencils, to me.
8. Please check your answer sheet to make sure the information on the top of the form has been entered accurately and completely, particularly the examination and site codes. You will notice questions on how you feel about the examination in the lower right corner of the answer sheet. Although these questions are optional and have no effect on your score, your responses are very useful to individuals revising the examination.
9. Do you have any final questions to ask me before we begin the examination?
10. You may now open the examination booklet and begin. Please read the instructions in the test booklet carefully before answering any questions.

## **General Instructions to Students Regarding Practical Examination**

Welcome to the practical examination. I'm the Certifying Officer. My name is \_\_\_\_\_ . By successfully completing this examination process and receiving subsequent certification you will have proved to yourself, the State of Alaska, and the medical community that you have achieved a level of competency assuring that you can provide quality pre-hospital emergency medical care.

The skill station examiners used today were selected because of their expertise in each particular skill. Skill station examiners are observers and recorders of your expected appropriate actions. They record your performance in relationship to the criteria listed on the evaluation instrument developed by the State EMS Training Committee.

The skill station examiner will call you into the station when it is prepared for testing. No candidate, at any time, is permitted to remain in the testing area while waiting for his/her next station. You must wait outside the testing area until the station is open and you are called. You are not permitted to take any books, pamphlets, brochures or other study material into the station. You are not permitted to make any copies or recordings of any station. The skill station examiner will greet you as you enter the skill station. The examiner will ask your name. Please assist him/her in spelling your name so that your results may be reported accurately. Each skill station examiner will then read aloud "Instructions to the Student" exactly as printed on the instruction provided by the examination coordinator. The information is read to each candidate in the same manner to ensure consistency and fairness.

Please pay close attention to the instructions, as they correspond to dispatch information you might receive on a similar emergency call and give you valuable information on what will be expected of you during the skill station. The skill station examiner will offer to repeat the instructions and will ask you if the instructions were understood. Do not ask for additional information not contained within the instructions, as the skill station examiner is not permitted to give this information.

Candidates sometimes complain that skill station examiners are abrupt, cold or appear unfriendly. No one is here to add to the stress and anxiety you may already feel. It is important to understand that the examiners have been told they must avoid casual conversation with candidates. This is necessary to assure fair and equal treatment of all candidates throughout the examination. We have instructed the skill station examiners not to indicate to you in any way a judgment regarding your performance in the skill station. Do not interpret any of the examiners remarks as an indication of your overall performance. Please recognize the skill station examiner's attitude as professional and objective, and simply perform the skills to the best of your ability.

Each skill station is supplied with several types of equipment for your selection. You will be given time at the beginning of the skill station to survey and select the equipment necessary for the appropriate management of the patient. Do not feel obligated to use all the equipment. If you brought any of your own equipment, I must inspect and approve it before you enter the skill station.

As you progress through the practical examination, each skill station examiner will be observing and recording your performance. Do not let his/her documentation practices influence your performance in the station. There is no correlation between the volume of his/her documentation and the quality of your

performance. You are encouraged to explain the things you are doing during your performance in the station.

If the station has a time limit, the examiner will inform you of this during the reading of the instructions. When you reach the time limit, the skill station examiner will inform you to stop your performance. However, if you complete the station before the allotted time, inform the examiner that you are finished. You may be asked to remove equipment from the patient before leaving the skill station.

You are not permitted to discuss any specific details of any station with each other at any time. Please be courteous to the candidates who are testing by keeping all excess noise to a minimum. Be prompt in reporting to each station so that we may complete this examination within a reasonable time period.

The results of the practical examination are reported as a pass/fail of the skill station. Failure of three or fewer skill stations entitles you to a same day retest of those skills failed. Failure of four or more skill stations constitutes a failure of the entire practical examination, requiring a retest of the entire practical examination. Failure of a same-day retest entitles you to a retest of those skills failed. This retest must be accomplished at a different site with a different examiner. Failure of the retest at the different site constitutes a complete failure of the practical examination, and you will be required to retest the entire practical examination. A candidate is allowed to test a single skill a maximum of three times before he or she must retest the entire practical examination. Any retest of the entire practical examination requires the candidate to document remedial training over all skills before re-attempting the examination.

You will not receive a detailed critique of your performance on any skill. Please remember that today's examination is a formal verification process and was not designed to assist with teaching or learning. The purpose of this examination is to verify achievement of the minimum DOT competencies after the education and training have been completed. Identifying errors would be contrary to the principle of this type of examination, and could result in the candidate "learning" the examination while still not being competent in the necessary skill. It is recommended that you contact your instructor or teaching institution for remedial training if you are unsuccessful in a skill station.

I am here today to assure that fair, objective, and impartial evaluations occur in accordance with the guidelines contained in this guide. If you have any concerns, notify me immediately to discuss your concerns. I will be visiting all skill stations throughout the examination to verify adherence to these guidelines. Please remember that if you do not voice your concerns or complaints today before you leave this site, or before I inform you of your results, your complaints will not be accepted.

The skill station examiner does not play a role in the scenario or establishment of pass/fail criteria, but is merely an observer and recorder of your actions in the skill station.

## **Points to Remember**

1. Follow instructions from the staff.
2. During the examination, move only to areas directed by the staff.
3. Give your name as you arrive at each station.
4. Listen carefully as the testing scenario is explained at each station.
5. Ask questions if the instructions are not clear.
6. During the examination, do not talk about the examination with anyone other than the skill station examiner, simulated patient and, when applicable, to the EMT assistant.
7. Be aware of the time limit, but do not sacrifice quality performance for speed.
8. Equipment will be provided. Select and use only that which is necessary to care for your patient adequately.

Does anyone have any questions concerning the practical examination at this time?

## Instructions to Practical Examination Proctors

My name is \_\_\_\_\_. I will be the Certifying Officer administering this examination. On behalf of the State of Alaska, and \_\_\_\_\_ (Regional EMS Agency), thanks for your help today.

Before we go any further, let me confirm that each of you is appropriately certified to proctor the station for which you have been selected.

Are any of you enrolled in an EMT-I, EMT-II or EMT-III course, or are scheduled to take the practical examinations for certification later this month?

All data concerning a candidate's performance is based upon your **objective** recordings and observations. You were chosen as examiner today because of your expertise in the assigned station and ability to fairly and accurately observe and document various performances. All performances must be reported with the greatest degree of objectivity possible. The skill evaluation instruments you are using today have been designed to assist you in objectively evaluating the candidates.

Let me emphasize that this examination is a formal verification procedure not designed for teaching, coaching or remedial training. Therefore you are not permitted to give any indication whatsoever of satisfactory or unsatisfactory performance to any candidate at any time. You must not discuss any specific performance with anyone other than myself. If you are unsure of scoring a particular performance, notify me as soon as possible. Do not sign or complete any evaluation form if you have any questions at all, until we have discussed the performance.

You should act in a professional manner at all times, paying particular attention to the manner in which you address candidates. You must be consistent, fair and respectful in carrying out your duties as a formal examiner. The safest approach is to limit your dialogue to examination-related material only. Be careful of the manner in which you address candidates, as many will interpret your remarks as some indication of their performance. You should develop a dialogue with candidates throughout their performance and should ask questions for clarification purposes. These questions should not be leading but should be asked when additional clarification is required. For example, if a candidate states "I'd now apply high flow oxygen," your appropriate response might be; "Please explain how you would do that." Do not ask for additional information beyond the scope of the skill, such as having the candidate explain the FiO<sub>2</sub> delivered by the device, contraindications to the use of the device or other knowledge-type information. You may also have to stimulate a candidate to perform some action. If a candidate states "I'd do a quick assessment of the legs," you must respond by asking the candidate to actually perform the assessment as he/she would in a field situation.

We suggest that you introduce yourself to each candidate as you call him or her into the station. No candidate, at any time, is permitted to remain in the testing area while waiting for his/her next station. Take a few moments to clearly print the candidate's first and last name on the evaluation form as well as your name, the date and scenario number. We suggest you use an ink pen and follow good medical-legal documentation practices when completing these forms. You should read aloud the "Instructions to the Candidate" exactly as printed at the end of your essays. You may not add or detract from these instructions but may repeat any portion as requested. The instructions must be read to each candidate in the same manner to assure consistency and fairness. Give the candidate time to inspect the equipment if necessary and explain any specific design features of the equipment if you are asked. If the candidate

brings his/her own equipment, be sure I have inspected it and that you are familiar with its use prior to evaluating the candidate.

All evaluation instruments should be filled out in a manner which prohibits the candidate from directly observing your grading of a task or the comments you may note. Do not become distracted by searching for the specific statements on the evaluation instrument when you should be observing the candidate's performance. Ideally you should be familiar with these instruments, but if not, simply turn the instrument over and concisely record the entire performance on the back side. After the candidate finishes the performance, complete the front side of the evaluation instrument in accordance with the documented performance. Please remember, the most accurate method of fairly evaluating any candidate is one in which your attention is devoted entirely to the performance of the candidate.

You must observe and enforce all time limits for the stations. When the time limit has been reached, stop the candidate's performance promptly and direct the candidate to move on to his/her next station, making sure that no candidate takes any notes or recordings of the station. If the candidate is in the middle of a step when the time limit is reached, permit him/her to complete only that step. The candidate should not be allowed to start another step. Don't be a "stopwatch watcher" and try not to add one or several additional minutes to the station. You should then check the "Does Not" column for any steps which were not completed within the allotted time.

You are responsible for the security of all evaluation material throughout the day and must return all material to me before you leave this examination site. If you need to take a break, please inform me and secure all evaluation instruments which were issued to you.

After you receive your materials for today's examination, you may proceed to your station and check the props, equipment and moulage to assure that the skill station is prepared for the first candidate. You should orient any victims and assistants over their roles in today's examination. The victims should act as a similar patient would in a field situation and the assistants should perform as trained EMS professionals. Please emphasize the importance of their consistent and professional performance throughout today's examination. You **must** read through the essay and instructions, brief your assistants and simulated patients and review the evaluation instrument before evaluating any candidate. Please wait until I have inspected your station and answered any of your specific questions before evaluating your first candidate.

Are there any questions?

## Sample Letter to Regional EMS Office

Consult with your Regional EMS Office about the necessity of using a cover letter with examinations)

[DATE]

[Your Name]  
[Your Address]

[Name of Regional EMS Office]  
[Address of Regional EMS Office]

Dear [Name of Contact at EMS Office]:

Enclosed are \_\_\_\_ completed applications for EMT-\_\_\_\_ certification. The examination followed \_\_\_\_\_ class number \_\_\_\_\_ which tested in \_\_\_\_\_ on \_\_\_\_\_, \_\_\_\_\_, 200\_. The instructor number is \_\_\_\_\_.

Also enclosed are checks totaling \$\_\_\_\_\_ for the tests.

You can contact me at \_\_\_\_\_ if you have any questions.

Sincerely,

\_\_\_\_\_  
Certifying Officer

## **National Registry Policies**

The following policies related to EMT-Basic registration and reregistration were excerpted from materials provided by the National Registry of EMTs and have been made specific for use in Alaska. For information about advanced level policies, contact the State or Regional EMS Office.

### **Basic Entry Requirements**

All individuals applying for NREMT-B registration must be at least 18 years of age and must have successfully completed a National Standard EMT-B training program within the preceding two years.

Individuals who were trained more than two years ago and failed to become state certified must retake the entire EMT-I training program.

If the candidate's initial training was more than two years ago and state certification has been maintained, the person must complete a current state approved EMT-I refresher training program.

If the candidate's initial training program is more than two years ago and state certification has not been maintained, the candidate must complete another EMT-I training program.

Additional requirements include:

- Successful completion of the practical examination within the preceding twelve months;
- Completion of the application for registration;
- Truthful completion of the felony statement and submission of any necessary documentation;
- Submission of current CPR credentials from either the American Heart Association or the American Red Cross;
- Submission of the \$20 registration fee; and
- Successful completion of the National Registry of EMTs written examination.



## Lapsed Registration

To be reinstated once EMT-Basic National registration has lapsed, the candidate must:

If lapsed **within a two year period**, successfully complete a state-approved National Standard EMT-Basic (Alaska EMT-I) refresher training course; submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry.

If lapsed **beyond a two year period**, and still currently state certified at the EMT-Basic level, successfully complete a state-approved National Standard EMT-Basic refresher course; submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry of EMTs.

If lapsed **beyond a two year period**, and state certification at the EMT-Basic level has also lapsed, successfully complete another state-approved National Standard EMT-Basic training program; submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry of EMTs.

## Case Studies

1. **Problem:** Half way through the examination a student who has failed a practical examination complains to you that equipment that was supposed to be available was either not present or not in working condition.

**Possible Solution:** If it can be confirmed that there is merit to the complaint, you may authorize an additional attempt at the examination. Since you checked each station before the examination to ensure adequate equipment, you should also find out where it went!

2. **Problem:** A proctor tells you that the last person tested performed excellent patient care but exceeded the time limit by one minute because of circumstances beyond her control.

**Possible Solution:** The person should be passed if it can be verified that the time limit was exceeded for reasons other than poor or inappropriately slow patient care.

3. **Problem:** You arrive at the testing location only to find that three of the five proctors scheduled to attend will not be present. No replacements have been obtained.

**Possible Solution:** The examination should be rescheduled if possible. If it is not possible, you may opt to test two stations, test two more, etc. This will add considerable time to the practical. It may also be possible to get the two longest or most complex stations under way and attempt to secure other proctors.

In either event, the Regional EMS Office should be advised of the problem so that remedial action with the instructor may be taken.

4. **Problem:** After completing the application for certification, a student pulls you aside and tells you that he had been convicted three years ago of a felony, and asks your advice about testing.

**Possible Solution:** Test the person along with the rest of the class and advise him or her to submit the documentation described on page 43. The application should be sent with those from the rest of the class.

5. **Problem:** The examinee's standing orders conflict slightly (fluid type, needle placement, etc.) with the requirements found on the practical examination grading sheet.

**Possible Solution:** Advise the proctors to test the student based on the standing orders.