Emergency Medical Technician - Paramedic Course

This 635 hour Paramedic Course follows the U.S. Department of Transportation National Standard Paramedic Training Program. Students that successfully complete this program are eligible to test for certification by the State of Ohio.

Didactic - 240 hours  Field Internship - 180 hours  Clinical and Laboratory - 215

Classes will be held on Monday’s and Friday’s from 18:00 until 2200 with occasional Wednesday classes at The UH Education Pavilion.

This course includes the following special courses for certification: Advanced Cardiac Life Support (ACLS); International Trauma Life Support (ITLS); Neonatal Resuscitation Program (NRP); and Pediatric Education for Prehospital Professionals (PEPP).

Application Deadline: August 26, 2009
Pre-Testing Dates: Wednesday, August 26, 2009 @ 7 PM
Testing will be held in the UH Education Pavilion (Woodiebrook).

Personal Interview - Date & time will be scheduled individually.
Classes Tentatively Begin: September 9, 2009
Course Final Exam: May 2010

Tuition: $3,500.00 (if paid at the time of Registration)
$3,800.00 (if paid after the start of the class session or if paying in installments)

Textbooks - Will be supplied by the program and include the Textbook, Workbook, Paramedic Success, Interpretation of EKG’s, EKG Workout, and ACLS Manual and Handbook. Books for the special courses are available to the student on loan.

Tuition includes - Student Uniform Shirt, Student Identification Badge, and a web based Anatomy and Physiology course for paramedics

Additional Fees: State Exam: National Registry - Paramedic $110.00+
+ (Required for those persons seeking certification as EMT-Paramedic)
The cost of meals, coffee breaks, additional remedial courses, and transportation is the responsibility of the individual student.

Tuition and fees: Tuition is due and must be paid at the time of registration. All other fees must be paid at the time they are incurred. The UH Geauga Medical Center EMS Education Advisory Board and the Hospital Board of Trustees reserve the right to alter fee structure at any time prior to the start of a class session.

The UH Geauga Medical Center EMS Education Program is accredited by the Ohio Department of Public Safety Division of EMS, Columbus, Ohio, Accreditation Number 206.

For further information or to receive an application packet, contact Dan Ellenberger 216-767-8449 or email: daniel.ellenberger@UHhospitals.org
EMS Education Program

Applying For: _____ EMT Intermediate Course  _____ EMT Paramedic Course

Date___________________________   Social Security Number _____________________________

Name___________________________________________Home Phone __________________________

L a s t     F i r s t   M I

Home Address___________________________________  e-mail __________________________

City_________________________________________ State____________ Zip_____________________

Birthdate____________________________ Driver’s License Number*__________________________

*Attach copy of Driver’s License

EDUCATION

(Circle highest Grade Completed*)    H.S.  9 10 11 12        College   1 2 3 4 +

*Must include copy of High School Diploma or GED with this application

Further Education: Name of school  Degree/diploma earned  Major area of study

__________________________________   ____________________________   ___________________

_________________________________   ____________________________   ____________________

Level of Ohio Certification*:  ___EMT-Basic  ___ EMT Intermediate

*Must attach a copy of Ohio Certification card with this application

Certification Number _____________   Expiration Date: _______________________

EXPERIENCE

Primary EMS_________________________________________ City ____________________________

Secondary EMS_______________________________________ City ____________________________

Length of EMT Experience: From __________ to ____________ Total _______ years ________ months

List EMS Experience *
Where        Vol/Paid   Dates   Estimated # of runs/yr

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

*Please have your EMS Chief / Administrator write a letter of recommendation including the following: How long you have been with his/her unit; why he/she feels you would be qualified to enter this program; how this education would benefit you and the department; and whether or not you exhibit mature judgement.

UH Geauga Medical Center EMS Education – Paramedic / Intermediate Program Application
List all training you have had pertaining to Emergency Medical Care / Rescue*

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

* Attach copy of current CPR card (front and back), copies of IS-100 and IS-700 NIMS training, and copies of any special certification cards related to EMS.

HAVE YOU BEEN CONVICTED OF, PLED GUILTY TO, OR HAD A JUDICIAL FINDING OF GUILT FOR ANY OF THE FOLLOWING: FRAUD OR MATERIAL DECEPTION IN APPLYING FOR, OR OBTAINING A CERTIFICATE TO PRACTICE; ANY OF THE FOLLOWING FELONIES: MURDER, AGGRAVATED MURDER, VOLUNTARY MANSLAUGHTER, FELONIOUS ASSAULT, KIDNAPPING, RAPE, SEXUAL BATTERY, GROSS SEXUAL IMPOSITION, AGGRAVATED ARSON, AGGRAVATED ROBBERY, AGGRAVATED BURGLARY; A MISDEMEANOR, OTHER THAN A TRAFFIC VIOLATION COMMITTED IN THE COURSE OF PRACTICE, A MISDEMEANOR INVOLVING MORAL TURPITUDE; A VIOLATION OF ANY FEDERAL, STATE, COUNTY OR MUNICIPAL NARCOTICS LAW; ANY ACT COMMITTED IN ANOTHER STATE, THAT, IF COMMITTED IN OHIO, WOULD CONSTITUTE A VIOLATION SET FORTH IN 4765-8-01 (A) (3) (B) OF THE OHIO ADMINISTRATIVE CODE: _____ Yes _____ No

HAVE YOU BEEN ADJUDICATED MENTALLY INCOMPETENT BY A COURT OF LAW? _____ YES _____ NO

ARE YOU CURRENTLY UNDER INDICTMENT FOR A FELONY OR MISDEMEANOR INVOLVING MORAL TURPITUDE? _____ YES _____ NO

DO YOU CURRENTLY ENGAGE IN THE ILLEGAL USE OF CONTROLLED SUBSTANCES, ALCOHOL, OR OTHER HABIT-FORMING DRUGS OR CHEMICAL SUBSTANCES? _____ YES _____ NO

**IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE ATTACH DOCUMENTATION TO EXPLAIN**

Please enclose a letter stating why you want to be an Intermediate / Paramedic.

Please enclose a letter of recommendation from a personal reference.

Also, enclose check or money order in the amount of $30.00 (payable to UH EMS-I). This application fee is non-refundable.

I hereby affirm and declare that the above information is true and correct and that any fraudulent entry may be considered a sufficient cause for rejection or subsequent dismissal. I further agree to abide by all the rules and regulations of the UH Geauga Medical Center EMS Education Program as promulgated by the EMS Education Advisory Board.

_____________________________   ____________
Signature of applicant    Date

Return to:  UH EMS Training & Disaster Preadness Institute
44 Blaine Ave
Bedford, Ohio  44146
Phone:  440-735-3513

ENTRANCE REQUIREMENTS

1. Each person applying for Emergency Medical Technician - Paramedic Training should volunteer for the Program and not be forced into training.
2. Must be a minimum of 18 years of age.
3. Must be a High School Graduate or have a GED Certificate (a copy of his/her H.S. Diploma or GED Certificate must be included with the application.
4. Must be a certified Basic EMT or EMT-Intermediate in the State of Ohio, active with an ambulance service or rescue unit (preferably with a minimum of one (1) year experience in EMS).
5. It is also recommended that the applicant have National Registry Certification.
6. Must possess a Current Driver’s License.
7. Must hold current BLS Healthcare Provider or BLS Instructor card.
8. Must have IS-100 Introduction to Incident Command and IS-700 Introduction to NIMS through FEMA.
9. It is highly recommended that the applicant has completed an Anatomy and Physiology Course and a Medical Terminology Course before beginning this program.
10. Must attain a minimum score of 76% on the Entrance Exam and 15 on the Problem Solving Ability Test.
11. Must have e-mail access
12. Must have Maturity of Judgement and good Moral Character as determined by a personal letter explaining the applicant’s reasons for wanting to become an Intermediate or Paramedic and a Personal Interview with the Selection Committee.
13. Must be of Suitable Health, determined by a physical examination. Must also submit documentation of immunizations (MMR, tetanus, HBV*) and TB testing (interpreted within the past 6 months). *In lieu of HBV vaccine, must present signed waiver declining vaccine.
14. Must have two (2) letters of recommendation: one (1) from your department Chief, EMS Employer, EVC Instructor, or Physician Advisor, and one from a personal reference.
15. Is not currently charged with, incarcerated for, and/or on parole or probation for a felony charge. A background check will be conducted on all applicants accepted to the course.
16. Must be approved by the Selection Committee of the EMS Education Advisory Board.
17. A Non-Refundable $30.00 Application Processing Fee must accompany each Application.
18. Students will be asked to submit a Declaration Regarding Material Assistance / Non Assistance to a Terrorist Organization (DMA) Form when applying for State Certification, pursuant to the Ohio Revised Code 2909. Additional information, including the Terrorist Exclusion List is on the Ohio Homeland Security Web site - http://www.homelandsecurity.ohio.gov/dma.asp.

Immunization history, physical exam, and proof of insurance are not required until after acceptance to the program.

STUDENT SELECTION

Students selected for the Paramedic Course will be those students that meet the minimum entrance requirements and place highest in the total number of combined points awarded for the written exam, the Wonderlic exam, and the personal interview.

ADMISSION DENIAL

* Any Applicant would be denied Entrance into the Program for the following reasons:
1. Failure to meet Entrance Requirements.
2. Giving false or misleading information to the Selection Committee.
3. Not having Sound Moral and Ethical Character.
4. Failing the Physical Examination.
5. Failure to score at least 76% or above on the Pre-Entrance Examination or 15 on the Problem Solving Abilities Examination.

CREDIT FOR PREVIOUS TRAINING / EXPERIENCE

Credit for previous training and/or experience may be awarded. A request for credit must be submitted in writing and will be reviewed by the Program Director. Requests for credit for previous training and/or experience will be considered on an individual basis by the Program Director and awarded as applicable.

EMS Education Program    Accreditation #206
The UH Geauga Medical Center Paramedic Course will be starting again this fall!

Interested candidates should know the following if they wish to apply:

- Completed application deadline is August 26, 2009
- Written pre-testing is scheduled on the following dates: Choose one:
  - Wednesday, August 26, 2009 at 19:00 hrs
  - Saturday, September 05, 2009 at 9:00 am
  - Students must score at least 76% on the Entrance Examination (this exam is based on Basic EMT knowledge)
- Personal Interviews will be scheduled individually
- Paramedic Class tentatively begins September 9th

Immunization history, physical exam, and proof of insurance are not required until after acceptance to the program.

For further information or to receive an application packet, contact:
Dan Ellenberger e-mail: daniel.ellenberger@UHhospitals.org
216-767-8449
must meet the following requirements:

(1) Submit a completed application on a form approved by the board;

(2) Successfully complete an EMS training program through an accredited institution, pursuant to section 4765.17 of the Revised Code and Chapter 4765-7 of the Administrative Code, and receive a certificate verifying completion of such program at the level for which the certificate to practice is sought. Such program must have been completed no more than two years prior to making application;

(3) Submit documentation of successful completion of the following training courses:

(a) National incident management system course IS-700 and incident command system course IS-100, both of which can be accessed at the federal emergency management agency web site (http://training.fema.gov/emiweb/IS/crslist.asp for online courses or http://www.fema.gov/emergency/nims/nims_compliance.shtm (March 1, 2004) for materials and information on instructor lead classroom-based courses). These courses are also listed on the division of EMS web site (http://www.ems.ohio.gov). Completion of the above topics is mandated by the department of homeland security pursuant to homeland security presidential directives and approved by the board as being necessary for initial training.

(4) Pass an initial certification examination in accordance with rule 4765-8-05 of the Administrative Code;

(5) Be at least eighteen years of age;

(6) Has not been convicted of, pled guilty to, had a judicial finding of guilt for, or had a judicial finding of eligibility for treatment and/or intervention in lieu of conviction for, any of the following:

(a) Any felony; (b) A misdemeanor committed in the course of practice; (c) A misdemeanor involving moral turpitude;

(d) A violation of any federal, state, county, or municipal narcotics or controlled substance law;

(e) Any act committed in another state or jurisdiction that, if committed in Ohio, would constitute a violation set forth in this paragraph.

(7) Has not been adjudicated mentally incompetent by a court of law;

(8) At the time of application, is not under indictment for any felony or has any misdemeanor charges pending as outlined in paragraph (A) (5) of this rule;

(9) Does not engage in the illegal use or illegal acquisition of controlled substances, alcohol, or other habit-forming drugs or chemical substances while on duty as a first responder or EMT;

(10) Has not committed fraud or material deception in applying for, or obtaining a certificate issued under Chapter 4765. of the Revised Code;

(11) Has not been convicted, in this state or another state, of providing emergency medical services or representing himself/herself as an EMS provider without a license or certificate, or similar crime directly related to the profession of EMS;

(12) If the applicant is, or has been, certified or licensed as an EMS provider in this state or another state, the applicant’s certificate or license is not currently on probationary status nor has it been suspended or revoked by the board or the EMS certifying or licensing entity in another state.

(B) In deciding whether to grant a certificate to practice, the board has the following options:
(1) The board shall issue a certificate to practice to an applicant who meets all of the requirements listed in paragraph (A) of this rule;

(2) The board shall refuse to grant a certificate to practice to an applicant who fails to meet one or more of the requirements listed in paragraphs (A)(1) to (A)(4) of this rule;

(3) The board may grant, refuse to grant, or limit a certificate to practice to an applicant who meets the requirements listed in paragraphs (A)(1) to (A)(4) of this rule, but fails to meet one or more of the requirements listed in paragraphs (A)(5) to (A)(11) of this rule.

Effective: 09/28/2006