2020 – 2021 Paramedic Course

This 1,046 hour Paramedic Course follows the National EMS Education Standards Paramedic Instructional Guidelines as approved by the U.S. Department of Transportation National Highway Safety Administration and the Ohio Administrative Code.

Total hours requirements subject to change due to the COVID-19 Pandemic

Didactic - 422 hours; Laboratory – 84 hours; Field Experience /Internship – 344 hours; In-Hospital Clinical – 196 hrs. Classes will be held on Monday, Wednesday, and Friday from 6:00 p.m. until 10:00 pm and Saturdays (tba in course syllabus) from 9:00 am to 1:00 pm at The UH Portage Educational Center.

This course includes the following special courses for certification: Advanced Cardiac Life Support (ACLS); International Trauma Life Support (ITLS); Pediatric Advanced Life Support (PALS); Advanced Stroke Life Support (ASLS), and Advanced Medical Life Support (AMLS).

Registration Deadline: May 01, 2018 (35.00 Fee covers testing)

Pre-Testing / Personal Interview Dates: Applicants will be contacted via email with available dates and times after application has been reviewed.

Applicants must attend pre-testing and Interview in order to be accepted into the program. Your application must be on file in order to receive testing and interview.

All testing and interviews will be held at The UH Portage Educational Center by appointment only.

Classes Begin: August 24, 2020

Tentative Course Final Exam: June 04, 2021

Tuition: $5,500.00

Application Deadline: June 01, 2020

Textbooks will be supplied by the program and include the Textbook, Workbook, Interpretation of EKG’s, Books for special classes may be issued from our lending library on loan to the student.

Tuition includes - Student Uniform Shirt, Student Identification Badge, background check fee, Paramedic scheduling and skill tracking program, a web based Advanced Anatomy and Physiology course, as well as other web-based course supplements and computer based practice testing.

Additional Fees: National Registry – Paramedic Exam $110.00 (Required for certification); an Application Fee of $35.00 must accompany the application. 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 reserves 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. This program currently holds a letter of review from CoAEMPS

For further information or to receive an application packet, contact Elizabeth Maloney at (216) 849-5013 or e-mail: Elizabeth.maloney@UHhospitals.org
Date___________________ Social Security Number_________________________

Name___________________ Home Phone_________________________

Last First MI email_________________________

Home Address__________________________

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 |
| | | |
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<th>Level of Ohio Certification*:</th>
<th>EMT</th>
<th>Advanced EMT</th>
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<td>*Must attach a copy of Ohio Certification card with this application</td>
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Certification Number _____________ Expiration Date: _______________________

| EXPERIENCE | | | |
|---|---|---|
| Primary EMS___________________ City___________________ | | |
| Secondary EMS___________________ City___________________ | | |

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<th>Length of EMT Experience: From</th>
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List EMS Experience * Where Vol./Paid Dates Est. runs /yr.

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*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 judgment.
**UH Geauga Medical Center EMS Education - Paramedic 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, had a judicial finding of guilt for or had a judicial finding of eligibility for treatment and/or intervention in lieu of conviction 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: _____ YES _____ NO

Have you been adjudicated mentally incompetent by a court of law? _____ YES _____ NO

Are you currently under indictment for any felony or have any misdemeanor charges pending as outlined in the paragraph above? _____ YES _____ NO

Do you 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? _____ YES _____ NO

Have you ever committed fraud or material deception in applying for, or obtaining a certificate issued under Chapter 4765 of the Revised Code? _____ YES _____ NO

Have you been convicted, in this state or another state, of providing emergency medical services or representing yourself as an EMS provider without a license or certificate, or similar crime directly related to the profession of EMS? _____ YES _____ NO

A background check will be conducted on all applicants accepted to the course.

**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 $35.00 (payable to UH Geauga Medical Center). The application fee must be submitted with the application and 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 Geauga Medical Center
Attn: EMS Office
13207 Ravenna Road
Chardon, Ohio 44024
**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 EMT or Advanced EMT in the State of Ohio*, active with an ambulance service or rescue unit (preferably, but not required, 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 successfully complete the basic course on Anatomy and Physiology at the beginning of the paramedic class, offered on the first day of class.
9. Must have *IS-100 Introduction to Incident Command* and *IS-700 Introduction to NIMS* through FEMA.
10. Must attain a minimum score of 80% on the *Entrance Exam* and pass an Aptitude Test.
11. Must have e-mail access and be willing to check e-mail on a daily basis.
12. Must have Maturity of Judgment and good Moral Character as determined by a personal letter explaining the applicant’s reasons for wanting to become an Advanced EMT 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.* Immunization history, physical exam, and proof of insurance are not required until after acceptance to the program.
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. *Has not been convicted of, pled guilty to, had a judicial finding of eligibility for treatment and/or intervention in lieu of conviction for, 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 laws; (e) Any act committed in another state or jurisdiction that, if committed in Ohio, would constitute a violation set forth in this paragraph.

*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 $35.00 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.
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 Aptitude exam, and the personal interview.

ADMISSION DENIAL
* Any Applicant would be denied Entrance into the Program or will be subsequently dismissed for the following reasons:
1. Failure to meet Entrance Requirements.
2. Not having Sound Moral and Ethical Character.
3. Failing the Physical Examination.
4. Failing the Background Check.
5. Giving false or misleading information to the Selection Committee.
6. Failure to score at least 80% or above on the Pre-Entrance Examination or a failing score on the Aptitude Examination.

CREDIT FOR PREVIOUS TRAINING / EXPERIENCE
Didactic, Clinical and / or Field Internship 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, Dean, Clinical Coordinator and Medical Director. Requests for credit for previous training and/or experience will be considered on an individual basis. Credit will be awarded only following successful written and practical skill testing over the material for which credit is requested.
Ohio Administrative Code 4765-8-01 - Qualifications for a certificate to practice.
(A) An applicant for a certificate to practice as an emergency medical responder, emergency medical technician, advanced emergency medical technician, or paramedic 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 federal emergency management agency training courses:
(a) National incident management system course IS-700.a:
(i) For online courses, the web site can be accessed at http://training.fema.gov/emiweb/IS/crslist.asp;
(ii) For materials and information for instructor led, classroom-based courses, the web site can be accessed at http://www.fema.gov/emergency/nims/index.shtm;
(b) Incident command system course IS-100.b:
(i) For online courses, the web site can be accessed at http://training.fema.gov/emiweb/IS/crslist.asp;
(ii) For materials and information for instructor led, classroom-based courses, the web site can be accessed at http://www.fema.gov/emergency/nims/index.shtm.
Completion of the above courses is mandated by the department of homeland security pursuant to homeland security presidential directives five (HSPD-5, February 28, 2003) and eight (HSPD-8, December 17, 2003) 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)(6) 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 an EMS provider;
(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)(5) 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)(5) of this rule, but fails to meet one or more of the requirements listed in paragraphs (A)(6) to (A)(12) of this rule.
02/06/2012