

NREMT Continuing Education Requirements for <u>Paramedics</u> (State of Alabama)

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Name			EMT#

OEMS#	# Title of Course		Credits	Instructor/Location
NCCR:	National Continued Competency Requirements		(30 total)	10hrs may be DE
	Artificial Ventilation		2.0	
	 Capnography 		1.0	
	Advanced Airway Mgmt/Perfusing Pt		1.0	
	 Post-Resuscitation Care 		2.0	
	 Ventricular Assist Devices 		0.5	
	Stroke		1.5	
	Cardiac Arrest		2.0	
	Congestive Heart Failure		0.5	
	 Pediatric Cardiac Arrest (skills required) 		2.5	
	Acute Coronary Syndrome		1.0	
	 Central Nervous System Injury 		2.0	
	Tourniquets		0.5	
	Field Triage		1.0	
	Fluid Resuscitation		0.5	
	Special Healthcare Needs		2.0	
	OB Emergencies		1.0	
	Communicable Diseases		1.0	
	Medication Delivery		1.0	
	Pain Management		1.0	
	 Psychiatric Emergencies 		1.0	
	 At-Risk Populations 		1.0	
	Pediatric Transport		0.5	
	Culture of Safety		0.5	
	 Affective Characteristics 		1.0	
	Crew Resource Management & Application		1.0	
	Role of Research		1.0	
LCCR:	Local Continued Competency Requirements (Examples: Trauma, BBP, Protocols, EVOC)		(15 total)	10hrs may be DE
	 Acute Care and State Protocols 		6	
	Cardiopulmonary Resuscitation (CPR)		4	
	(Run reviews, Med Dir Topics, Service Related, EVOC, Own interest)		5	
ICCR:	Individual Continued Competency Requirements (Take courses for your own interest or needs)		(15 total)	15hrs may be DE
TOTAL			60	

Distributive Education (DE) is non-interactive education such as articles, video, and online training (online courses without a live instructor) and is limited to the total number of credits as listed. All education must be verified with a certificate or transcript.



NCCR Detailed Breakout - Paramedic

Each category must meet specific objectives

						5. Comotio Cordis
I.	Airway	, Respirati	ion, & Ventilation: 4 Hours			6. Long QT
	•	,	,			7. AHA Channelopathy
	_				G.	ACS: 1 hour
	Α.	Ventila	tion: 2 hours			1. 12 lead review
		1.	Assessment / when to ventilate			2. STEMI imposters
		2.	Respiratory failure recognition, etc.			3. Oxygen administration
		3.	Positioning (Adult & Pediatric)			4. Transportation destination
		4.	Suctioning	III.	Trauma	a: 4 hours
		5.	Minute Ventilation	111.	A.	CNS Injury: 2 hours
		٠.	Williate Ventuation		A.	
						 Concussion ETCO₂ Monitoring
			a) Effect on cardiac return		ъ	
					В.	Tourniquets: 0.5 hours
	В.	Capnoo	graphy: 1 hour		C.	Field Triage: 1 hour
			• • •			1. CDC Trauma Triage
		1.	In-line, side stream, perfusing & non		_	2. MCI (MUCC/SALT)
					D.	Field Resuscitation & System Over loading: 0.5
	<i>C</i> .	Advanc	red Airway Management: 1 hour		hours	
			· · · · · · · · · · · · · · · · · · ·	IV.	Medical	1: 7 hours
		1.	Intubation (Adult & Pediatric)		A.	Special Healthcare Needs: 2 hours
		2.	Supraglottic airway devices. (Adult Only)			1. Tracheostomy Care
						2. Dialysis shunts
II.	Cardio	vascular:	10 Hours			3. How to deal with patient and equipment
						a) Feeding tubes, VP shunts, etc.
		. .	" " 0 0/			b) Cognitive issues
	<i>A</i> .	Post-re	suscitation Care: 2 hours		В.	OB Emergency: 1 hour
		1.	Recognition of ROSC			1. Suctioning of the neonate
		2.	Hemodynamics			2. Neonatal resuscitation
		3.	Oxygenation			3. Abnormal presentation
		4.	Induced Hypothermia			4. Nuchal cord
	В.	Ventri	cular Assist Devices: 0.5 hours		C.	Communicable Diseases: 1 hour
	C.		: 1.5 hours		c.	
	.	1.	Assessment			 Hygiene Vaccines (CDC recommendations)
		2.	Oxygen Administration			
		3.	Time of Onset			3. MRSA / Influenza
		3. 4.	Transport destination			a) Public health, pandemics,
		5.	Fibrinolytic Checklist			reporting
	D.		nc Arrest: 2 hours			b) Precautions
	υ.					4. SIRS vs sepsis vs septic shock
		1.	Optimal Chest Compressions			a) Fluid resuscitation
			a) Depth, Rate, Recoil, & pause		D.	Medication Delivery: 1 hour
		_	b) Mechanical CPR Devices			1. IM vs SC
		2.	Airway issues with cardiac arrest			2. Atomized / Nasal
			a) Halting CPR to intubate		Е.	Pain Management: 1 hour
			b) Hyperventilation			1. NAEMSP pain management
			c) Supraglottic vs ET vs BVM			2. AAP pediatric pain management
			d) Chain of survival		F.	Psychiatric Emergencies: 1 hour
			e) Termination decisions			1. Patient restraint
			(1) NAEMSP/AHA			2. Excited delirium
			Position			3. Depression / suicide
			f) ETCO ₂ changes during arrest			4. Toxicological emergencies
			and ROSC	V.	Onerati	ons: 5 hours
	Ε.	Conge	stive Heart Failure: 0.5 hours	* •	A.	At-Risk populations: 2 hours
		1.	Recognition		А.	1. Human trafficking
		2.	Treatment			2. Pediatric
	F.		ric Cardiac Arrest: 2.5 hours			3. Geriatric
	••	1.	Optimal chest compressions			
		2.	Techniques			4. Economically disadvantaged
		3.	Ventilation / Compression ratios			5. Domestic violence
		3.	•		В.	Pediatric Transport (NHTSA): 0.5 hours
		4	a) One and two rescuer		C.	Culture of Safety: 0.5 hours
		4.	HOCM			1. Adverse event reporting



- 2. Medication safety
 Affective Characteristics: 1 hour D.
 - Professionalism
 - 2. **Cultural competency**
 - 3. Changing demographics Crew Resource Management: 1 hour
- E. F.
- Role of Research: 1 hour