Kittitas County Emergency Medical Services Division

PO Box 821, Cle Elum, WA 98922 • P (509) 674-2932 • cheryl.burrows@co.kittitas.wa.us

Please Post

ANNOUNCEMENT 2023

EMERGENCY MEDICAL TECHNICIAN & SUPRAGLOTTIC AIRWAY TRAINING COURSE

Start Date: ASHI Enhanced BLS Provider CPR Course: January 3rd and 5th

EMT Course Start Date: Tuesday, January 17st EMT Course End Date: Tuesday, May 16th

+ See tentative schedule attached

Times: 6:00 pm to 9:00 pm (Tuesdays & Thursdays)

9:00 am to 4:00 pm on Saturdays (7-see schedule)

Location: Kittitas Valley Fire & Rescue – Station #29

Senior Instructor: Rich Elliott, EMT, SEI

Fee Schedule: \$850 EMT-Kittitas County Resident/Affiliated (NREMT exam fee not included)

\$900 EMT-Out of County/Affiliated (NREMT exam fee not included)

Class & Clinical: • EMT~160 hours of Lecture, Knowledge and Practical Skill Labs/Evaluations

• +Clinical hours & patient contacts per course requirements (ED and Ambulance)

• +Post Course Exam: NREMT Exam – EMT = \$98

(DOH testing vouchers may be available. Info. provided at class.)

Applicant Prerequisites for Entering EMT Initial Training Course:

1. All applicants must be affiliated with a state recognized EMS/Emergency Response organization.

- 2. National Incident Management System (NIMS) ICS 700.b, 100.c, & 200.c courses. Online courses are available at no cost. Go to http://training.fema.gov/IS/NIMS.asp or you can find this link and Course application at http://www.kittitascountyems.org/training.htm. Proof of training required for acceptance into course. Applications may be submitted without certificates pending completion.
- 3. BLS Provider Course. LISTED COURSE IS REQUIRED! Offered prior to course as per schedule and is required for all students. Included in course fee.
- 4. Must be at least 18 years of age.
- 5. EMT course applicants must have a high school diploma or GED (for state certification, not for course application).
- 6. Must have the physical strength and good health to perform the normal functions of an EMT.
- 7. Must pass required background checks for hospital clinical/field requirements (included in course cost)
- 8. Negative UA/10-point panel drug screening (included in course cost and made available after start of class).
- 9. Must have proof of required vaccinations at start of class See back of Training Application
- 10. Must have proof of health & liability insurance/coverage through agency or provided by student (http://www.hpso.com/ example). Check with agency before purchasing.

Priority given to complete applications and local EMS affiliations.

Priority Application Deadline is <u>November 30, 2022</u> to determine course viability.

Applications will be accepted until 12/31/22 or until class is full.

Sooner = Better! Please call if questions.

Copy application as needed. <u>NO REFUNDS AFTER 1/3/23</u> or receipt of books. Submission of application does not guarantee a spot in the class.

Questions? Please contact the Kittitas County EMS Division office at 509-674-2932 or 509-929-3247.



Kittitas County EMS Division PO Box 821 Cle Elum, WA 98922 P: (509) 674-2932, (509) 929-3247 cheryl.burrows@co.kittitas.wa.us

APPLICATION FOR TRAINING

Materials available online: https://www.kittitascountyems.org/training.html

ALL APPLICANTS MUST BE AFFILIATED WITH EMS or EMERGENCY RESPONSE (ESSO) AGENCY!

| Personal Data (please print clearly) | COURSE: ☐ EMT ☐ EMR ☐ IV Therapy |
|---|---|
| Name (last, first, middle): | Date: |
| Birth date (must be 18 y/o) Cell/Message Phone | E-mail: |
| Mailing Address: City: | State: Zip Code: |
| Prerequisites | |
| Are there any physical limitations that would impede yo | ur ability to work as an EMT? □ yes □ no |
| yes no -HS Diploma or GED NIMS 700, 10 (No copy required) (Attach Copy) See back of application | 0, 200 Required Vaccinations Picture Identification (Attach Copy) (Attach Copy for Certification) for more detailed information. |
| EMS Agency Data | |
| EMS Agency Affiliation: | # of years/mo. with Agency: No Affiliation: □ |
| Fire Chief or Supervisor: | Daytime Phone: |
| Agency Mailing Address: | |
| Who will provide professional liability, health and accid | ent insurance while you are a student? |
| ☐ EMS Agency ☐ I will provide own insura | nce (attach copy) |
| Agency Affiliation Verification & Acknowledgement | of Student Reimbursement Agreement |
| an employee or member of our organization, this individing insurance, while involved in any training activities and/organing is made by the applicant, a written reimbursement completion, NREMT testing, WA State Certification, and | nining course by the individual named on this application. As had will have total professional liability, health, and accident or clinical experiences. I acknowledge that if payment for this ent process is in place with this agency upon successful course Wor fulfillment of requirements preestablished by this agency. |
| Fire Chief or Supervisor Signature | Date |
| Who will pay for the course fee at start of class (check a | Il that apply): |
| ☐ EMS Agency ☐ Student ☐ Partial I | Fee Comments: |
| best of my knowledge. I understand that if not provided health, and accident insurance during the initial training | tion contained in this application is true and correct to the by agency, I am responsible for my own professional liability, g course. I have read and understand the requirements that are dent and if I am certified to practice in Kittitas County, I rules, regulations, protocols, procedures, and policies of medical directives of the Medical Program Director. |
| Applicant Signature | Date |
| (Offic | ce use only) |
| Date app. received: Course fee: \$ | |

QUALIFICATIONS FOR ENTERING EMERGENCY MEDICAL TECHNICIAN or EMERGENCY MEDICAL RESPONDER TRAINING

Individuals applying for admission to a Washington State EMS training course in Kittitas County must meet ALL the following requirements, or they will not be eligible to enroll in the course:

- 1. You must be 18 years of age at the beginning of the course.
- 2. You must have a high school diploma or GED (**EMT only** for certification, not to apply for training. Not required for **EMR** certification.). Copy not required for application.
- 3. You must have the physical strength to perform the normal functions of an EMS Provider.
- 4. Yu must have completed the National Incident Management System (NIMS) IS 700b, 100c, and 200c courses.
- 5. You must attend the BLS CPR Course offered with the EMT/EMR Course.
- 6. You must be an active member of one of the following emergency response services in the State of Washington to attend this course and become WA State certified following course completion:
 - a. Licensed provider of ambulance, aid service, or ESSO
 - b. Law enforcement agency or affiliated Search & Rescue group (ESO)
 - c. Federal or state emergency organization that may recognize NREMT.

ADDITIONAL LOCAL REQUIREMENTS FOR ALL LEVELS OF TRAINING Required Immunizations & TB Test: REQUIRED AT START OF COURSE (some flexibility)!

- COVID Vaccination (unless proof of religious or medical exemption for KVH)
- Influenza Vaccination (between October 1 and March 31 yearly)
- Td or Tdap booster (within 10 years)
- MMR Vaccination: 2 shot series at least one month apart or positive antibody titer
- Varicella Vaccination: 2 shot series at least one month apart or positive antibody titer
- Hep B Vaccination series or positive antibody titer (if just started series, contact EMS Office)
- 2 negative PPD/TB skin tests **OR** negative blood titer within twelve months at start of clinicals.

Required Screening/Testing (included in course cost and coordinated by KCEMS Office/Agency):

- Background check with written approval.
- Negative UA/10-point panel drug screening.
- N95 Mask fit test within twelve months at start of clinicals. If not provided by agency contact EMS Office (documentation required)

Include the following attachments with this application or per arrangement:

- Proof of IS 700b, 100c, 200c
- Proof of required vaccinations and/or titers, and TB tests (See above. Application may be submitted pending receipt of documentation.).
- Copy of driver's license or other legal photo identification.
- Signed Release and Hold Harmless Agreement (pg. 3 of application)
- Copy of professional liability, health and accident insurance <u>if providing own insurance</u>. Contact Kittitas County EMS Division for information on obtaining training liability insurance. (<u>Application may be submitted pending approval into initial training course before obtaining this insurance</u>.)

Note:

- ALL APPLICANTS MUST BE AFFILIATED WITH EMS/EMERGENCY RESPONSE (ESSO) AGENCY.
- Completion of application does not guarantee admission to any course. You will be notified of course admission via email. Email and cell phone is preferred method of communication.
- It is the student's responsibility to notify, Kittitas County EMS Division, of any documented or suspected learning disabilities or challenges prior to the course.

KITTITAS COUNTY EMS DIVISION RELEASE AND HOLD HARMLESS AGREEMENT

There are risks and dangers inherent when participating in emergency care training classes. These risks include, but are not limited to, injuries during skills practices; back injuries from moving a simulated victim; acquiring communicable diseases; or performing skills on fellow students.

Kittitas County EMS Division / Kittitas County EMS & Trauma Care Council ("KCEMS") cannot guarantee the safety of participants, but authorized and affiliated instructors are trained to take reasonable precautions to minimize risks and safeguard participants' health and safety during training, including:

- Providing each class participant with sanitary personal protective equipment, including, but not limited to, breathing barriers (face shields/masks), eye protection and gloves; and
- Providing sanitary training manikins to practice skills such as chest compressions and rescue breathing.

In addition, instructors and participants should avoid awkward or extreme body positions to avoid back or other injuries from improper lifting and moving. Instructors and participants should not practice moving simulated victims if they have a history of back problems because such practice may aggravate previous back injuries.

Knowing this, I assume the risks inherent in this class and:

- I hereby voluntarily release and hold KCEMS governing board, staff, and each of their instructors, and volunteers, harmless from any and all liability or costs from injury associated with or arising from my participation in this class, including from negligence.
- I understand and agree that this Release applies to personal injury, including death, and property damage which I may suffer.
- I understand and agree that this Release will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children, and any guardian appointed by the court for said children.
- I have read this Release and I understand it.

| Participant Signature: | Dated |
|-------------------------------|-------|
| D. A. D. A. C. C. A. N. L. C. | |
| Print Participant Name: | |
| | |

Kittitas County EMS Division Emergency Medical Technician Class Schedule – 2023 at Kittitas Valley Fire Rescue (tentative)

| Date & | | EMT Assigned | NOTES |
|-------------------|--|--------------------------|----------------|
| Time | LESSON | Reading | Instructor(s) |
| 1/3 | BLS Provider CPR Course - Day 1 | | |
| Tuesday | (Course Prerequisite) | ASHI BLS | Blended? - TBD |
| 6-9:30 PM | Background and drug screening information. | Loaner Manual | |
| 1/5 | BLS Provider CPR Course & Exam - Day 2 | A CITI DI C | Disk Dak |
| Thursday | (Course Prerequisite) | ASHI BLS | Rich, Deb, |
| 6-9:30 PM | D. L. C. D | Loaner Manual | Cheryl & Deb |
| First Day | Rules & Requirements -KVH Clinical Application | Handouts | Cheryl & Deb |
| | EM Care Systems, Research, and Public Health | Chapter 1 | Lanora (Rich) |
| | Workforce Safety and Wellness of the EMT | Chapter 2 | Lanora (Ren) |
| 1/17 | +KVH Orientation PPT & quiz | Review KVH PPT | Self-Study |
| Tuesday | 4 | | , |
| 6-9 PM | Register students on Navigate, review & practice | | |
| | accessing online resources in detail. | | Cheryl & Deb |
| | Optional – Bring device to practice logging in, accessing | | |
| 1/19 | resources or if need help registering. Medical, Legal, and Ethical Issues | Chapter 3 | |
| Thursday | POLST / DNR (form WA) – Death & Dying | Handout | Lanora (Rich) |
| 6-9 PM | HIPAA | Handout/form | Debbie |
| 0-21141 | Multi-Cultural Awareness (WSSO) | No student | Debbie |
| | Water Calcular Tival Offess (W 550) | materials | |
| 1/24 | Medical Terminology | Chapter 5 | |
| Tuesday | Life Span Development | Chapter 7 | TBD |
| 6-9 PM | | 1 | |
| 1/26 | The Human Body | Chapter 6 | |
| Thursday | Lifting & Moving Patients | Chapter 8 | TBD |
| 6-9 PM | | | |
| 1/31 | KITTCOM Presentation | | |
| Tuesday | Communications & Documentation | Chapter 4 | Rich |
| 6:00-9:30 PM | Documentation (practice) | | Debbie |
| KITTCOM | 700 Elmview Road Ellensburg | | |
| 2/2 | Patient Assessment | Chapter 10 | |
| Thursday | Sick / Not Sick Introduction | Handout | Lanora (Rich) |
| 6-9 PM | Practice Vitals (tracking form) | Hands on | Landia (Mich) |
| 0-71111 | 1140000 Vitais (Hacking 101111) | Tianas on | |
| 2/7 | Airway Management & Supraglottic Airway | Chapter 11 | |
| Tuesday | Demo and practice equipment (as time allows) | | Lanora (Rich) |
| 6-9 PM | , | | |
| 2/9 | Infectious Disease Prevention for EMS Providers | | |
| Thursday | https://www.doh.wa.gov/Portals/1/Documents/Pubs | DOH Curriculum | Lanora (Rich) |
| 6:00-9:30 PM | /530094.pdf | Online & | |
| | MEGG Videos/practice donning/doffing & test | Handouts | |
| | High Risk Situations & PPE | | |
| 2/14 | Dain sinds of Dhames of Daines | Chanter 12 | |
| 2/14 | Principles of Pharmacology & Epi Kit Medical Overview | Chapter 12 Chapter 15 | Lanora (Rich) |
| Tuesday 6-9 PM | Vitals time/practice | Chapter 15 | Lanora (Rich) |
| O-A LIM | vitais tillie/practice | _ | |
| 2/16 | Respiratory Emergencies | Chapter 16 | |
| Thursday | Group Scenarios | Handout | Lanora (Rich) |
| 6-9 PM | Review Clinical/Field Guidelines & Forms | | Debbie |
| N95 Fit Test | Take Home Test DUE 2/25 | | |
| | | | |
| At 5:00? | | | |

| Date & Time | LESSON | EMT Assigned Reading | NOTES Instructor(s) |
|---|--|--|-----------------------|
| 2/21 Tuesday 6-9 PM Station 21 | Shock Trauma Overview Group Scenarios | Chapter 13 Chapter 25 | TBD |
| 2/23 Thursday 6-9 PM | Head & Spine Injuries WA Trauma Triage Procedure Practice Immobilization – demo equipment | Chapter 29 Handout | TBD |
| 2/25 Saturday 9-4 PM | Patient Assessment (SICK/NOT SICK Video) Skill Labs - CPRx2, Vitals, Pt. Assess, Airway 1-PCR Take Home Test DUE - Review | Video skills Test Review 1-PCR | Rich Debbie + |
| 2/28 Tuesday 6-9 PM | Cardiovascular Emergencies (ASA/Nitro) WA CA Guidelines Group Scenario | Chapter 17 Handout | Lanora (Rich) |
| 3/2 Thursday 6-9 PM | Orthopedic Injuries Demo Splints, Immobilization Review Group Scenarios & Take-Home Test Due 3/11 | Chapter 32 | TBD |
| 3/7 Tuesday 6-9 PM | Skill Labs & Practical Evaluations (if ready) Assessment & Immobilization & Splinting | Catch-up On Reading!! | Rich Debbie+ |
| 3/9 Thursday 6-9 PM | Skill Labs & Practical Evaluations (if ready) Assessment & Immobilization & Splinting | Catch-up On Reading!! | SEI Debbie+ |
| 3/11 Saturday 9-4 PM | Transport Operations Skill Labs – Assessment, Airway, Immobilize and Ambulance (Lifting & Moving), 1-PCR Take Home Test DUE – Review MID TERM OR 4/1 | Chapter 38 Skill sheets 1-PCR Test Review | Rich Debbie+ |
| 0 | SPRING BREAK NO CLASS 3/13-3/17 | Catch-up On Reading! | |
| 3/21 Tuesday 6-9 PM | Neurologic Emergencies WA Stroke Guidelines / Scenarios Gastrointestinal & Urologic Emergencies | Chapter 18 Handout Chapter 19 | TBD |
| 3/23 Thursday 6-9 PM | Endocrine & Hematologic Emergencies Glucometer demo / Scenarios Allergy & Anaphylaxis | Chapter 20 Protocol Chapter 21 | TBD |
| 3/25-26 | CWU EMS CONFERENCE!! | Great Opportunity | © |
| 3/28 Tuesday 6-9 PM | Toxicology Emergencies (Poison & Sub. Abuse) Excited Delirium (video) WA Poison Control Center Behavioral Health Emergencies | Chapter 22 video Handout Chapter 23 | TBD |
| 3/30 Thursday 6-9 PM | Bleeding Soft Tissue Injuries Taser Weapon / Dart Removal (video) Take Home Test DUE 4/8 | Chapter 26 Chapter 27 Handout | TBD |
| 4/1 Saturday 9-4 PM | MID TERM TEST (Chapters thru 3/30?) Skill Labs – Assessment, Immobilization, Splinting, and EMT Pharmacology (Epi Kits) | Test Skill Sheets 1-PCR | Rich? Debbie |
| 4/4 Tuesday 6-9 PM | Face, and Neck Injuries Chest Injuries Group Scenarios | Chapter 28 Chapter 30 | Lanora (Rich) Rich |
| 4/6 Thursday 6-9 PM | Environmental Emergencies Poison Control Info (Spider, Snakes, plants Group Scenarios | Chapter 33 | TBD |

| Date & Time | LESSON | EMT Assigned Reading | NOTES Instructor(s) |
|--|--|--------------------------------------|--------------------------------------|
| 4/11 Tuesday 6-9 PM | Obstetrics & Neonate (videos) (Childbirth) Group Scenarios | Chapter 34 | Lanora (Rich) |
| 4/13 Thursday 6-9 PM | Gynecological Emergencies Abdominal and Genitourinary Injuries Group Scenarios Take Home Test Due 4/22 | Chapter 24 Chapter 31 | TBD |
| 4/15 Saturday 9-4 PM | Skill Labs – Assessment, Immobilize, splinting, Pharmacology, and BGC, 1-PCR Take Home Test DUE – Review | Skill sheets 1-PCR Test Review | Rich Debbie+ |
| 4/18 Tuesday 6-9 PM Station 21 | Geriatrics Emergencies DOH Disability Awareness (Guest – Sawyer?) Patients with Special Challenges | Chapter 36 Handout Chapter 37 | TBD |
| 4/20 Thursday 6-9 PM | Pediatric Emergencies EMS Online Pediatric SICK/NOT SICK (video) Pediatric Immobilization / Car seat Immobilization | Chapter 35 Handout | Lanora (Rich) |
| 4/22 Saturday 9-4 PM | Skill Labs – Assessment (2), 1 PCR, Immobilization, splinting, and bleeding/shock Take Home Test DUE – Review | Skill Sheets 1-PCR Test | Rich Debbie+ |
| 4/25 Tuesday 6-9 PM | Incident Management Kittitas County MCI Plan/MCI Cards/Start Triage Hazardous Materials Emergencies (Phone App.) | Chapter 40 Cty. PPT | Lanora (Rich) |
| 4/27 Thursday 6-9 PM | Vehicle Extrication & Special Rescue Terrorism & Disaster Management | Chapter 39 Chapter 41 | TBD |
| 4/29 Saturday 9-4 PM | Skill Labs (patients) – Total Patient Care scenarios and catch up on individual skill needs. 1 PCR as needed. Course completion exams discussed. National Registry Paperwork/Testing (info) | Skill Sheets | Rich Debbie+ |
| 5/2 Tuesday 6-9 PM | Supraglottic Airway - DOH | DOH Curriculum | Paramedic-TBD |
| 5/4 Thursday 6-9 PM | Skills Practice as Needed Final course paperwork DUE! (Clinical, PCRs, vitals, makeup, skill sheets) | | SEI Debbie+ |
| 5/9 Tuesday 6-9 PM | State Application & Cert. Maintenance Info. Student Q&A for test review – Student driven! Skills as needed & TPC Scenarios. Final course paperwork OVERDUE!! | | Rich Debbie/Cheryl |
| 5/11 Thursday 6-9 PM Station 21 | Team Approach ALS Assist Skills – may be moved to after course, if time needed for course completion. | Chapter 9 | Paramedic-TBD |
| 5/13 Saturday 9-2 PM | Final Practical Skill Examination (Pending SEI Recommendation!) | | Rich & Lanora Debbie/++ Cheryl-Admin |
| 5/16 Tuesday 6-9 PM | EMT Course Completion Written Exam (2 hrs. to complete test) | | Rich Cheryl, Debbie |