Kittitas County EMS Division
2024 OTEP/CME Personal Record of Training

Name: _____ Certification: _____ Exp. Date: ___/___/___

Module 1: **Documentation – Report Writing & Patient Refusals**
Specifics: Online 24-7 EMS (due 3/31/24)
Instructor/Class Coordinator Signature: _____ Date: _____

Module 2: Medical Assessment – Respiratory Emergencies
Specifics: Medical Assessment/Treatment w/TPC Scenarios, Pharmacology, Infant & Adult HPCPR/AW
Instructor/Class Coordinator Signature: _____ Date: _____

Module 3: Trauma Assessment – Upper Body (Face & Blunt Chest)
Specifics: Trauma Assessment/Treatment w/TPC Scenarios, Spinal Motion Restriction, WA Trauma TT
Instructor/Class Coordinator Signature: _____ Date: _____

Module 4: Diabetic/AMS Emergencies
Specifics: Assessment/Treatment w/TPC scenarios, BGC, PCR, DOH Updates (TBA)
Instructor/Class Coordinator Signature: _____ Date: _____

Module 5: Pediatric Trauma Emergencies
Specifics: Assessment/Treatment w/ RT Scenarios, SMR/Car Seat Safety, HPCPR/AM
Instructor/Class Coordinator Signature: _____ Date: _____

Module 6: Geriatric Poisonings & Annual Pharmacology Skill Maintenance
Specifics: Assessment/Treatment w/TPC Scenarios, Pharmacology (Naloxone, Epi "Check & Inject", Zofran annual skill maintenance), DOH Updates (TBA)
Instructor/Class Coordinator Signature: _____ Date: _____

Completion of the following online content is REQUIRED.
Recommended completion w/corresponding module.

- **M1: Patient Report Writing & Patient Refusals (due 3/31/24)**
- **M3: Extrication & Patient Packaging (due 9/30/24)**
- **M5: Crew Resource Management (due 12/31/24)**

Upon completion of each module's objectives, the student should have the instructor or class coordinator sign and date their *Personal Record of Training*. Successful completion must be documented on the class training roster to receive credit. Keep skill sheets with training records.

TRAINING RECORDS ARE YOUR RESPONSIBILITY!
Students should keep training records for four years after each recertification.

OTEP Method of recertification requires minimum quarterly participation.

IF YOUR CERT. IS EXPIRED OR INOPERABLE, YOU CANNOT PRACTICE AS AN EMS PROVIDER.

For more information or to contact staff, please go to kittitascountyems.org.