



NORTH CAROLINA OFFICE OF EMERGENCY MEDICAL SERVICES
DIVISION OF HEALTH SERVICE REGULATION • DEPARTMENT OF HEALTH AND HUMAN SERVICES

EMT EDUCATION PROGRAM REQUIREMENTS

1. The EMT educational program must be conducted by an approved Educational Institution as defined in the rules of the NC Medical Care Commission.
2. The lead instructor for the EMT educational program must be a NC credentialed Level I EMS Instructor at the EMT level or higher as defined in the rules of the NC Medical Care Commission.
3. The curriculum for the EMT educational program shall be at a minimum the most current version of the National Education Standards. These Education Standards must be adopted and approved by the North Carolina Office of Emergency Medical Services.
4. The evaluation check sheets for verification of student independent-skill mastery shall meet the minimum criteria of those developed and maintained by the National Registry of Emergency Medical Technicians specific to the independent skills learned during each specific educational module.
5. The educational institution must maintain all student records that document:
 - a. Compliance with the student prerequisite of a high school diploma, high school equivalency or completion of a validated exam assessing the reading comprehension equivalent to the eleventh-grade level.
 - b. Any learning disabilities that may qualify the student for special consideration by the Office of EMS in the written credentialing examination.
 - c. Student attendance in the classroom, and any clinical or field internship components required of the educational program.
 - d. Successful completion of all components of the program, including written examination scores, independent-skills evaluation check sheets and scope-of-practice evaluation check sheets.

EMT STUDENT PREREQUISITES

1. 17 years of age on or before the official end date of the course.
2. Possession of a high school diploma, high school equivalency or successful completion of an exam assessing basic reading comprehension skills at a minimum at the eleventh-grade level.

DIDACTIC COMPONENT

COMPOSITION

Composition of the didactic component will meet the most current edition of the National EMS Education Standards for the Emergency Medical Technician (EMT), which can be referenced at <https://www.ems.gov/education.html>. To ensure the EMT Student obtains all pertinent education for EMS in North Carolina, the inclusion of Medications and Skills related to the Scope of Practice as an EMT will be required to be covered throughout the course. To determine what Medications and Skills are applicable, refer to the current North Carolina Medical Board Approved Medications and Skills Formulary for EMS Personnel. This document may be downloaded or viewed at: <https://www.ncems.org/nccpstandards.html>

Lesson plans for the delivery of course material by instruction should be derived from the current EMT Instructor Guidelines. The Instructor Guidelines were developed to be a starting point for the development of didactic content. The Instructor Guidelines may be found at <https://www.ems.gov/education.html>

CLINICAL/ FIELD INTERNSHIP COMPONENT

The North Carolina Office of EMS encourages EMT students to observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care. Students are encouraged to actively participate in field internship as this educational component will enhance the overall education of the EMT Student. Students must perform ten patient assessments. The patient assessments can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc..

Clinical/Field Prerequisites:

1. Successful completion of all EMR educational requirements.
2. Recommendation of the educational medical advisor and program lead instructor.
3. Participation in the Clinical or Field setting may occur after student has been evaluated and possesses the ability to perform all applicable skills in the prehospital setting.

Clinical/Field Requirements:

1. Students should observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care, if approved by the medical advisor and program coordinator.
2. The student must participate in and document patient contacts in a field experience approved by the medical advisor and program coordinator.
3. Field internship must be performed with an EMS provider at or above the EMT level.
4. Students must perform ten (Live) patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc

SUCCESSFUL SKILLS COMPLETION

To successfully complete the EMT program, the student must demonstrate competence on each of the following skills during the clinical education AND field internship educational components while in direct contact with patients. Clinical and field internship preceptors shall document the student's performance on all of the skills required in the EMT program curriculum. The Level I Instructor shall review all completed clinical and field internship student evaluations and determine when the student has demonstrated competency on each of the skills. The educational program medical advisor and educational institution may also give credit for skills competency obtained from previous experience or other educational programs. The waiver of any skills for students in an EMT educational program should be reflected in the course outline materials on file at the educational institution. The program medical advisor and Level I lead instructor may determine that the minimum skills requirement for successful program completion is unattainable within the time allotted for clinical and field internship education. If this situation should occur, a joint decision of the program medical advisor and Level I lead instructor may reduce the required numbers of skills or increase the number of clinical and/or field internship hours. If the number of skills is reduced, the Level I instructor should develop an alternative method of ensuring competency in the skills necessary for successful program completion and documentation must be submitted to the OEMS for re-approval of the course.

EMT SKILLS

Assessments

- Perform a basic history and physical examination to identify acute complaints and monitor changes.
- Identify the actual and potential complaints of emergency patients.

- Perform a patient assessment and provide prehospital emergency care and transportation for patient complaints:

Patient interview and history gathering:

- Routinely makes patient contact without prompting.
- Position themselves at the patient’s level when appropriate.
- Address patients with respect and compassion.
- Ask questions appropriate for patient complaint in a fluent manner (including complete SAMPLE history).

Physical Exam:

- Perform primary assessment, secondary assessment, and reassessment as appropriate.
- Perform a physical exam in an orderly, logical manner relevant to the chief complaint.
- Refer to appropriate anatomical and physiological terms.
- Recognize critical patients, their needs, and set appropriate priorities (including patients with significant problems involving the airway, breathing, and circulatory systems).

Field Impression and Treatment Plan:

- Comply with medical-legal considerations when providing patient care.
- Develop an accurate differential diagnosis based on an appropriate interview, history, and physical exam.

Therapeutic Communications and Cultural Competency:

- Instill confidence in the patient, family members, and bystanders; involve as appropriate; and respond to their sense of crisis.
- Exhibit acceptance of patients, as they present themselves, without passing judgment.
- Advise patients with accurate information to make informed decisions.
- Relay accurate, complete, concise, and understandable verbal report to personnel at the receiving facility both enroute and upon arrival.
- Exhibit accuracy and completeness of written reports in a timely manner.
 - Uses correct grammar, spelling, punctuation.
 - Correct use of medical terminology and abbreviations.
- Uses logical flow of history, assessment, and results of prehospital care.

Skills Performance:

- Consistently initiate and perform appropriate treatment and skills without prompting.
- Comply with infection control principles including; appropriate use of personal protective equipment, aseptic technique, etc.

Field Impression and Treatment Plan:

- Explain the rationale for application of procedures and protocol in any patient care situation.
- Ensure life threatening problems are recognized, prioritized, and treated before non-life threatening problems.
- Perform treatment appropriate to chief complaint and type of call at the discretion of the preceptor.
- Anticipate/recognize potential problems in the patient’s condition and formulate, initiate, delegate, modify or request appropriate treatment.
- Integrate exam findings into the appropriate destination, priority and transportation mode for each patient.
- Adapt to changes in environment, situation, and patient condition.

Professionalism:

- *Self-motivated*: Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback, and adjusts behavior/performance.
- *Efficient*: Keeps assessment and treatment times to a minimum, releases other personnel when not needed, and organizes team to work faster/better.
- *Flexible*: Makes adjustments to communication style, directs team members, changes impressions based on findings.
- *Careful*: Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up, completes tasks thoroughly.
- *Confident*: Makes decisions, trusts and exercises good personal judgment, is aware of limitations and strengths.
- *Accepts feedback openly*: Listens to preceptor and accepts constructive feedback

Scene Leadership and Safety

- Consistently function independently in all patient care situations.
- Routinely direct other crew members in the delivery of all patient care.
- Coordinate efforts with other agencies and individuals who may be involved in care and transportation of the patient.
- Exercise professional judgment based on analytical thinking.
- Recognize and take appropriate action in potentially hazardous situations.
- Recognize psychological hazards of providing prehospital care as well as techniques for stress recognition and reduction.

Data Collection and Record Keeping

- Consistent improvement of patient care documentation and other required clinical documentation.
- Relay accurate, complete, concise, and understandable verbal report to personnel at the receiving facility both enroute and upon arrival.
- Exhibit accuracy and completeness of written reports in a timely manner.
 - Uses correct grammar, spelling, punctuation.
 - Correct use of medical terminology and abbreviations.
 - Uses logical flow of history, assessment, and results of prehospital care.
- Evaluate the preceptor in a professionally constructive manner.
- Evaluate the hospital/field site in a professionally constructive manner.

CLINICAL/FIELD INTERNSHIP EXPERIENCE

The North Carolina Office of EMS encourages EMT students to observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care. Students are required to actively participate in field internship as this educational component will enhance the overall education of the EMT Student. Students must perform ten patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc. Students enrolled in Initial EMT Programs will be required to perform the following:

Patient interview and history gathering:

- Routinely makes patient contact without prompting.
- Position themselves at the patient's level when appropriate.
- Address patients with respect and compassion.
- Ask questions appropriate for patient complaint in a fluent manner (including complete SAMPLE history).

Physical Exam:

- Perform primary assessment, secondary assessment, and reassessment as appropriate.
- Perform a physical exam in an orderly, logical manner relevant to the chief complaint.
- Refer to appropriate anatomical and physiological terms.
- Recognize critical patients, their needs, and set appropriate priorities (including patients with significant problems involving the airway, breathing, and circulatory systems).

Field Impression and Treatment Plan:

- Comply with medical-legal considerations when providing patient care.
- Develop an accurate differential diagnosis based on an appropriate interview, history, and physical exam.
- Perform a basic history and physical examination to identify acute complaints and monitor changes.
- Identify the actual and potential complaints of emergency patients.
- Perform a comprehensive history and physical examination to identify factors affecting the health and health needs of a patient.
- Formulate a field impression based on an analysis of comprehensive assessment findings, anatomy, physiology, pathophysiology, and epidemiology.
- Relate assessment findings to underlying pathological and physiological changes in the patient's condition.
- Integrate and synthesize the multiple determinants of health and clinical care.
- Perform health screening and referrals.

Therapeutic communication and cultural competency:

- Instill confidence in the patient, family members, and bystanders; involve as appropriate; and respond to their sense of crisis.
- Exhibit acceptance of patients, as they present themselves, without passing judgment.
- Advise patients with accurate information to make informed decisions.
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Skills Performance:

- Consistently initiate and perform appropriate treatment and skills without prompting.
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Field Impression and Treatment Plan:

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- Integrate exam findings into the appropriate destination, priority and transportation mode for each patient.
- Adapt to changes in environment, situation, and patient condition.

Clinical and Field

- *Self-motivated*: Takes initiative to complete assignments and improve/correct problems, strives for excellence, incorporates feedback, and adjusts behavior/performance.
- *Efficient*: Keeps assessment and treatment times to a minimum, releases other personnel when not needed, and organizes team to work faster/better.
- *Flexible*: Make adjustments to communication style, directs team members, changes impressions based on findings.
- *Careful*: Pays attention to detail of skills, documentation, patient comfort, set-up and clean-up, completes tasks thoroughly.
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Scene Leader and Safety

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- Exercise professional judgment based on analytical thinking.
- Recognize and take appropriate action in potentially hazardous situations.
- Recognize psychological hazards of providing prehospital care as well as techniques for stress recognition and reduction.

Data Entry & Record Keeping

- Consistent improvement of patient care documentation and other required clinical documentation.
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EMT EDUCATIONAL PROGRAM SUMMARY

The following represents a summary of the required components and minimum time requirements for the EMT program:

1. Didactic, skills labs, written exams, scope of practice to equal 192 hours.
 - a. This section ***must*** include the following:
 - i. EMS Credential maintenance and renewal component
 1. State requirements
 2. National requirements
 - ii. Traffic Incident Management for Emergency Responders
 1. May be found free of charge at:
 - a. <https://learning.respondersafety.com/Clusters/National-TIM-Training-Certificate.aspx>

- iii. State or Nationally recognized emergency vehicle driving program, to include a physical driving component utilizing a Type I, II or III ambulance
 1. Acceptable courses include: FIP-EVD, NAEMT EVOS, CEVO II, CEVO 3, VFIS EVDT, or NHTSA EVOC.
2. A minimum of 48 hours in the Clinical or Field setting:
 - a. A clinical or field educational component is required. The educational institution should ensure enough patient contact time for the student to successfully perform ten (Live) patient assessments without assistance.
 - b. This minimum is established to ensure that the student has satisfactorily met all competencies required for completion of the educational program.
 - c. If a student is deemed as “Competent” prior to the completion of the minimum hours, then the educational medical advisor, program lead instructor and program coordinator are responsible for ensuring that the student can satisfactorily enter the workforce as an entry level EMS professional at or above the level of education completed.
 - d. If a student is deemed as “Needs Improvement” upon the completion of the minimum hours, then the educational medical advisor, program lead instructor and program coordinator are responsible for ensuring that the student is provided an outline for remediation. The remediation outline should include additional clinical or field hours to ensure the student can satisfactorily meet all competencies required for successful completion of the educational program.
 - e. Documentation must be maintained in the students file to show that the educational medical advisor, program lead instructor and program coordinator were in complete agreement with the final determination.

EMT Program Length= 240 hours