



Office of Emergency Medical Services and Trauma System
Education, Training and Regional Support Section

Education Requirements for the Recertification of EMS Personnel

This document is available on the OEMSTS web site at www.doh.wa.gov/hsqa/emstrauma/

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Introduction

In 1989, the Washington State Legislature mandated the “adoption of requirements for ongoing training and evaluation, as approved by the county medical program director, to include appropriate evaluation for individual knowledge and skills. The first responder, emergency medical technician or emergency medical services provider agency may elect a program of continuing education and a written and practical examination instead of meeting the ongoing training and evaluation requirements”, (RCW 18.73.081 (3) (c)).

This legislation resulted in two methods for First Responders and EMTs to obtain education to meet recertification requirements. These include:

1. Continuing medical education (CME), requiring individuals to complete a written and practical skills certification examinations at the end of their certification period.
2. Ongoing Training and Evaluation Program (OTEP), which includes on going written and practical skills evaluations as part of the training program.

In 1996, a pilot program was applied for and approved by the Department of Health (DOH) to allow Dr. Lynn Wittwer, Clark County Medical Program Director, to conduct a pilot OTEP program for Clark County Paramedics. Upon conclusion of the pilot paramedic OTEP program and review by the DOH Licensing and Certification EMS Advisory Committee, it was recommended to expand the OTEP process to include Intermediate Life Support (EMT-Intermediate levels) and Advanced Life Support (EMT-Paramedic) certification levels, which is permissible under RCW 18.71.205.

The development of "OTEP" for all levels of EMS personnel recertification is intended to:

- Reduce "test anxiety" associated with the written and practical examinations.
- Assist department or agency "in-house" EMS training.
- Assist departments with large numbers of volunteers.
- Provide a program based on positive reinforcement in education and evaluation.
- Simplify the recertification.
- Provide an alternative to those departments or agencies that find it difficult to schedule personnel into formal practical and written examinations.
- For individual who desire to maintain National Registry credentials, assist in meeting the reregistration requirements.

Education requirements for recertification are listed in the Washington Administrative Code ([WAC](#)) [246-976-161](#). These requirements consist of annual education and education that must be obtained during an individual’s certification period. Although this specific education requires individuals to maintain competence in these topics and skills, the requirements also provide a total number of **course hours** for each certification level that must be completed. Individuals participating in the OTEP method must meet these requirements, however, due to the competency based nature of OTEP, fewer **class hours** may be needed to complete these requirements than the total course hours indicated.

This document provides information and guidelines regarding both the CME and the OTEP methods of obtaining the required education for recertification in Washington State.

Please contact the Office of Emergency Medical Services and Trauma System, Education Training & Regional Support section at 1-800-458-5281, Ext. 2 or visit our web site at www.doh.wa.gov/hsqa/emstrauma/ for any technical information or assistance.

Education Requirements For Recertification

Washington Administrative Code (WAC) [246-976-161](#), Table A identifies which specific topics must be completed for each certification level. A table providing this information is provided in Appendix A.

I. Annual Education Requirements For Recertification

- A. **CPR and Airway Management** – Includes the current national standards for CPR. foreign body airway obstruction (FBAO), automatic defibrillation and the use of airway adjuncts appropriate to the level of certification, for adults, children and infants, assuring the following pediatric objectives are covered:
 - 1. **Pediatric Objectives** – The EMS provider must be able to:
 - a. Identify and demonstrate airway management techniques for infants and children.
 - b. Demonstrate infant and child CPR.
 - c. Demonstrate FBAO technique for infants and children.
- B. **Spinal Immobilization** – This includes adult, pediatric and geriatric patients, following course objectives found in curricula identified in [WAC 246-976-021](#), for the level of certification being taught, assuring the following pediatric objectives are covered:
 - 1. **Pediatric Objectives** – The EMS provider must be able to:
 - a. Demonstrate the correct techniques for immobilizing the infant and child patient.
 - b. Identify the importance of using the correct size of equipment for the infant and child patient.
 - c. Demonstrate techniques for adapting adult equipment to effectively immobilize the infant and child patient.
- C. **Patient Assessment** – for adult, pediatric and geriatric patients following course objectives found in curricula identified in [WAC 246-976-021](#), for the level of certification being taught, assuring the following pediatric objectives are covered:
 - 1. **Pediatric Objectives** – The EMS provider must be able to:
 - a. Identify and demonstrate basic assessment skills according to the child's age and development.
 - b. Demonstrate the initial assessment skills needed to rapidly differentiate between the critically ill or injured and the stable infant and child patient.
 - c. Identify and demonstrate the correct sequence of priorities to be used in managing the infant and child patient with life threatening injury or illness.
 - d. Identify that the priorities for a severely injured and critically ill infant and child are:
 - 1) Airway management,
 - 2) Oxygenation,
 - 3) Early recognition and treatment of shock,
 - 4) Spinal immobilization,
 - 5) Psychological support.
 - e. Demonstrate a complete focused assessment of an infant and a child.
 - f. Demonstrate ongoing assessment of an infant and a child.
 - g. Identify the differences between the injury patterns of an infant and child compared to that of an adult.
 - h. Identify the psychological dynamics between an infant and child, parent or caregiver and EMS provider.

II. Certification Period Requirements

A. Infectious Disease For EMS Providers

1. This includes updates on information contained in the “Infectious Disease Prevention for EMS Provider” curriculum or the DOH 7-hour HIV/AIDS program.
2. The Department of Labor and Industries yearly exposure control update provided by the employer/EMS agency meets this requirement.

B. Trauma - for adult, pediatric and geriatric patients, following course objectives found in curricula identified in [WAC 246-976-021](#), for the level of certification being taught, assuring the following pediatric objectives are covered:

1. **Pediatric Objectives** – The EMS provider must be able to:
 - a. Identify the importance of early recognition and treatment of shock in the infant and child patient.
 - b. Identify the importance of early recognition and treatment of the multiple trauma infant and child patient
 - c. Identify the importance of rapid transport of the injured infant and child patient.

C. Pharmacology - Pharmacology specific to the medications included in curricula identified in [WAC 246-976-021](#), for the level of certification being taught, and approved by the MPD. This includes medications added and approved by the DOH, Office of Emergency Medical Services and Trauma System.

D. Other Pediatric Topics – includes:

1. **Anatomy and Physiology** - The EMS provider must be able to:
 - a. Identify the anatomy and physiology and define the differences in children of all ages.
 - b. Identify developmental differences between infants, toddlers, pre-school, school age and adolescents, including special needs children.
2. **Medical problems including special needs patients** - The EMS provider must be able to:
 - a. Identify the differentiation between respiratory distress and respiratory failure.
 - b. Identify the importance of early recognition and treatment of shock in the infant and child patient.
 - c. Identify causes and treatments for seizures.
 - d. Identify life-threatening complications of meningitis and sepsis.
 - e. Identify signs and symptoms of dehydration.
 - f. Identify signs and symptoms of hypoglycemia.
 - g. Identify how hypoglycemia may mimic hypoxemia.
 - h. Identify special needs pediatric patients that are technologically dependant, (Tracheotomy tube, central line, GI or feeding tubes, ventilators, community specific needs).
 - i. Identify the signs and symptoms of suspected child abuse.
 - j. Identify the signs and symptoms of anaphylaxis and treatment priorities.
 - k. Identify the importance of rapid transport of the sick infant and child patient.

III. Additional Education to meet total required hours

A. In addition to specific annual and certification period educational requirements, [WAC 246-976-161](#), Table A, specifies the total required number of **course hours** for each certification level.

B. Individuals completing the OTEP method must complete the same educational requirements as indicated above, however due to the competency based nature of OTEP, fewer **class hours** may be needed to complete these requirements than the total **course hours** indicated.

NOTE: Topic content to meet the educational requirements for recertification must follow current Washington State standards including Washington State Specific Objectives (WSSOs) provided in department approved curricula, National recognized training programs or current national standards as indicated. U.S. National Highway Traffic Safety Administration, Department of Transportation EMS Refresher courses may be used to meet topic content when WSSOs have been added.

The CME Method for Recertification

- I. **The "Continuing medical education (CME) method"** is the completion of education courses after initial certification to maintain and enhance skill and knowledge to meet educational requirements for recertification identified in [WAC 246-976-161](#), Table A, (See Appendix A). CME requires the successful completion of a written and practical skills certification examination as part of the recertification requirements identified in [WAC 246-976-171](#) and includes meeting certification requirements identified in [WAC 246-976-141](#).
 - A. **Continuing Medical Education Content:**
 1. Must meet annual and certification period educational requirements identified in Appendix A, utilizing:
 - a. Cognitive, affective and psychomotor objectives found in curricula identified in [WAC 246-976-021](#), for the level of certification being taught.
 - b. Current national standards published for CPR, foreign body airway obstruction (FBAO), and automatic defibrillation.
 - c. County Medical Program Director (MPD) protocols, Regional Patient Care Procedures, and County Operating Procedures.
 - d. Training updates in standards as identified by the Department. This material is made available on the Office of Emergency Medical Services and Trauma System web site at <http://www.doh.wa.gov/hsqa/emstrauma/>.
 2. Education content must be approved by the County MPD.
 3. Nationally recognized training programs may be utilized as CME for content identified in A 1 above.
 - B. **To complete the CME method you must:**
 1. Complete and document educational requirements indicated in Appendix A appropriate to the level of certification.
 2. Skill maintenance requirements for Intermediate Life Support (EMT-Intermediate) and Advanced Life Support (EMT-Paramedic) levels must be performed. These requirements are identified in [WAC 246-976-161](#) Table B. (See Appendix A)
 3. Complete the Department of Health requirements for recertification/renewal in [WAC 246-976-171](#) and certification requirements identified in [WAC 246-976-141](#).
 - C. **Changing Recertification Methods:**
 1. Any EMS provider may elect to obtain their education requirements through the OTEP method by successfully completing all requirements of an MPD and DOH approved OTEP.
 2. If all OTEP requirements are not completed, individuals must successfully complete the Washington State written examination and practical skills examination as identified in [WAC 246-976-171](#) to be recertified.
 - D. **National Registry of Emergency Medical Technicians (NREMT) Reregistration Requirements:**
 1. Many individuals in Washington State maintain NREMT credentials exclusively or in addition to Washington State EMS credentials. In the past, the NREMT required refresher courses as part of their reregistration requirements. This is no longer the case. Education requirements obtained to meet Washington's standards may be used to meet NREMT reregistration requirements when:
 - a. Hour and Topic requirements are met.
 - b. The courses obtained has been properly documented and provided to the NREMT by the stated due date.
 - c. For additional information, please refer to the NREMT web site at <http://www.nremt.org/EMTServices/home.asp>

The OTEP Method of Recertification

"Ongoing training and evaluation program (OTEP) method" is a program of education for EMS personnel, approved by the MPD and the Department of Health to meet the education requirements and core topic content for recertification. OTEP includes cognitive, affective and psychomotor evaluations following completion of each topic presentation to determine student competence of topic content.

OTEP Program Development

This section provides the guidelines to develop an OTEP that meets minimum state standards and provides information to assist in the continual improvement of existing training programs.

- I. **EMS Agency Involvement:** - If an EMS agency decides to conduct an "OTEP" they must:
 - A. Have currently certified EMS providers
 - B. Have county MPD and DOH approved Evaluators and Instructors
 - C. Develop a training program following educational requirements for the recertification of EMS personnel, utilizing topic content identified below.
 - D. Complete the Ongoing Evaluation and Training Application, DOH Form 530-010
 - E. Obtain "OTEP" approval from county MPD and DOH
- II. **Instructor and Evaluator Personnel**
 - A. Evaluators must:
 1. Be a currently certified EMS provider who has completed at least one certification cycle. Certification must be at or above the level of certification being evaluated.
 2. Complete an MPD approved evaluator workshop, specific to the level of certification being evaluated that teaches proficiency in utilizing skill evaluation forms identified below.
 3. Complete the Evaluator application, DOH Form 530-012.
 4. Be approved by the county MPD and DOH
 - B. Instructors shall:
 1. Be a currently certified EMS provider who has completed at least one certification cycle at or above the level of certification be taught.
 2. Be a currently approved Evaluator at the level of certification being taught.
 3. Be approved by the county MPD to instruct and evaluate EMS topics
 - C. Guest Instructors, when utilized, must have specific knowledge and experience in the skills of the prehospital emergency care field for the topic being presented and be approved by the county MPD to instruct EMS topics.
- III. **Participation in OTEP** - To participate in an approved OTEP, EMS personnel must be currently certified as an EMS provider.
- IV. **Medical Program Director (MPD) Responsibilities:** - MPD's or their designated delegate(s) are responsible for approval of:
 - A. OTEP Instructors and Evaluators.
 - B. OTEP for EMS provider recertification.
 - C. Recommendation of recertification of EMS providers to DOH

OTEP Applications are available on the OEMSTS website at
<http://www.doh.wa.gov/hsqa/emstrauma/publications.htm>

V. Ongoing Training and Evaluation Program Content:

- A. Must meet annual and certification period educational requirements utilizing:
 - 1. Cognitive, affective and psychomotor objectives found in curricula identified in [WAC 246-976-021](#), for the level of certification being taught in the **following core content areas**:
 - a. Airway /ventilation (including intensive airway management training for personnel with advanced airway qualifications to determine competency).
 - b. Cardiovascular
 - c. Medical emergencies/behavioral
 - d. Trauma (including intensive IV therapy training for personnel with IV therapy qualifications to determine competency
 - e. Obstetrics and pediatrics.
 - f. Operations.
 - 2. The current national standards published for CPR, foreign body airway obstruction (FBAO), defibrillation and patient care appropriate to the level of certification.
 - 3. County Medical Program Director (MPD) protocols, Regional Patient Care Procedures, and County Operating Procedures.
 - 4. Training updates in standards as identified by the Department. This material is made available on the Emergency Medical Services and Trauma System web site at <http://www.doh.wa.gov/hsqa/emstrauma/>
- B. Must provide evaluations to determine the student competence of those cognitive, affective and psychomotor covered, following the completion of each topic presentation.
 - 1. Psychomotor skill evaluations must be recorded on skill evaluation forms from nationally recognized training programs, or on forms provided in approved curricula identified in WAC 246-976-021, for the level of certification being evaluated.
 - 2. If an evaluation form is not provided, a skill evaluation form must be developed and approved by the MPD to evaluate the skill.
- C. Must be approved by the MPD (also see IX below)
- D. May incorporate nationally recognized training programs within an OTEP for the core content areas identified in (A)(1) above.
- E. Skill maintenance requirements for ALS (EMT-Paramedics) and ILS (EMT-Intermediate) personnel may be obtained as part of the OTEP. These requirements are identified in [WAC 246-976-161](#), Table B.

VI. Other Considerations:

- A. Remedial Training - If an EMS provider is unable to demonstrate knowledge and skill competency, he/she may receive remedial training as determined by the MPD.
- B. Any EMS provider changing from the OTEP method to the CME method must meet all requirements of the CME method including the written and practical skills certification examinations identified in [WAC 246-976-171](#).

VII. OTEP Quality Improvement

- A. The key to a successful OTEP is periodic assessment of instructors and evaluators. The following are several suggested approaches to establish an in-house quality assessment (QA) program in training and evaluation:
 - 1. Conduct Peer Evaluations of CME instructors and evaluators. Sample "*Peer Review Forms*" are available from the Education, Training and Regional Support Section upon request.
 - 2. Whenever possible involve the MPD or delegate in training or evaluation sessions.
 - 3. Periodically survey EMS personnel about the strengths, weaknesses of the OTEP and suggestions for improvement.

VIII. National Registry of Emergency Medical Technicians (NREMT) Reregistration Requirements:

A. Many individuals in Washington State maintain NREMT credentials exclusively or in addition to Washington State EMS credentials. In the past, the NREMT required refresher courses as part of their reregistration requirements. This is no longer the case. Education requirements obtained to meet Washington's standards may be used to meet NREMT reregistration requirements when:

1. Hour and Topic requirements are met.
2. The courses obtained has been properly documented and provided to the NREMT by the required due date.
3. For additional information, please refer to the NREMT web site at:
<http://www.nremt.org/EMTServices/home.asp>

IX. OTEP Reapproval - Substantive changes to the approved OTEP require documented approval from the county MPD and DOH.

Completing The OTEP Method of Recertification

- I. **To Complete the OTEP method you must:**
 - A. Complete and document department and MPD approved OTEP that includes requirements indicated in [WAC 246-976-161](#), Table A (See Appendix A) to include cognitive, affective and psychomotor evaluations, appropriate to your level of certification.
 - B. Complete and document the skills maintenance requirements indicated in [WAC 246-976-161](#), Table B (See Appendix A), appropriate to your level of certification.
 - C. Complete the Department of Health certification requirements identified in for recertification/renewal in [WAC 246-976-171](#) and certification requirements identified in [WAC 246-976-141](#).
- II. Changing Recertification Methods:
 - A. Any EMS provider may elect to obtain their education requirements for recertification through the CME method by the completion of the education requirements identified in [WAC 246-976-161](#) Table A and B, and successfully completing the Washington State written examination and practical skills examination as identified in [WAC 246-976-171](#).
- III. National Registry of Emergency Medical Technicians (NREMT) Reregistration Requirements:
 - A. Many individuals in Washington State maintain NREMT credentials exclusively or in addition to Washington State EMS credentials. In the past, the NREMT required refresher courses as part of their reregistration requirements. This is no longer the case. Education requirements obtained to meet Washington's standards may be used to meet NREMT reregistration requirements when:
 1. Hour and Topic requirements are met.
 2. The courses obtained has been properly documented and provided to the NREMT by the required due date.
 3. For additional information, please refer to the NREMT web site at: <http://www.nremt.org/EMTServices/home.asp>

OTEP Evaluators and Instructors

An agency conducting an OTEP will need instructor/evaluator personnel. During an OTEP, EMS personnel must complete and demonstrate competency in skills contained in the Washington State approved curricula (for the certification level being taught) and other approved topic content. EMS evaluators are utilized to evaluate these practical skills and determine each individual's competency on each skill covered during the OTEP.

OTEP practical skills evaluators must:

1. Be a currently certified EMS provider who has completed at least one certification cycle. Certification must be at or above the level of certification being evaluated.
2. Complete an MPD approved EMS Evaluator Workshop that teaches the methods and techniques of consistent and objective practical skills evaluation using skill evaluation forms identified by the Department of Health.
3. Complete the EMS Evaluator Application, DOH Form 530-012.
4. Be approved by the Medical Program Director and the Department of Health.

OTEP instructors must:

1. Be currently certified EMS provider who has completed at least one certification cycle. Certification must be at or above the level of certification being evaluated.
2. Be a currently approved EMS Evaluator at or above the level of certification being taught
3. Be approved by the county MPD to instruct and evaluate EMS topics.

Guest Lecturers, when utilized, must have specific knowledge and experience in the skills of the prehospital emergency care field for the topic being presented and be approved by the county MPD to instruct EMS topics.

EMS Evaluator Applications are available on the OEMSTS website at
<http://www.doh.wa.gov/hsqa/emstrauma/publications.htm>

EMS Evaluator Workshops

The purpose of evaluator workshops is to teach methods and techniques to enable individuals to provide reliable, objective practical skill evaluations while properly using evaluation skill forms identified by the Department of Health.

EMS Evaluator Workshops must be conducted by individuals experienced in EMS practical skill instruction, demonstration and evaluation, such as Senior EMS Instructors or other individuals approved by the Medical Program Director.

The EMS Evaluator Workshop curriculum and Course Rosters are available on the OEMSTS website at <http://www.doh.wa.gov/hsqa/emstrauma/publications.htm>

Appendices

Appendix A – Education and Skill Maintenance Requirements

WAC 246-976-161 Education requirements for certification – Table A.

TABLE A: EDUCATION REQUIREMENTS FOR RECERTIFICATION	Basic Life Support		Intermediate Life Support (EMT-Intermediate Levels)					Paramedic (ALS)
	FR	EMT	IV	Air	IV/Air	ILS	ILS/Air	Paramedic
Annual Requirements								
CPR & Airway	X	X	X	X	X	X	X	
Spinal Immobilization	X	X	X	X	X	X	X	
Patient Assessment	X	X	X	X	X	X	X	
Certification Period Requirements								
Infectious Disease	X	X	X	X	X	X	X	X
Trauma		X	X	X	X	X	X	X
Pharmacology		X	X	X	X	X	X	
Other Pediatric Topics	X	X	X	X	X	X	X	X
*Additional education course hours totaling:	15 hrs	30 hrs	45 hrs	45 hrs	60 hrs	60 hrs	75 hrs	150 hrs

"X" indicates an individual must demonstrate knowledge and competency in the topic or skill.

*Individuals obtaining education through the CME method must complete the total number of educational course hours indicated above. **However, due to the competency-based nature of OTEP, fewer class hours may be needed to complete these requirements than the total course hours indicated above.**

NOTE: The most updated version of the administrative code may be found on the OEMSTS website at <http://www.doh.wa.gov/hsga/emstrauma/wacindex.htm>

WAC 246-976-161 Skill maintenance requirements - Table B:

First Certification Period Requirements:

TABLE B: SKILLS MAINTENANCE REQUIREMENTS	Intermediate Life Support (EMT-Intermediate Levels)					Paramedic (ALS)
	IV	Airway	IV/Airway	ILS	ILS/Airway	Paramedic
First Certification Period						
First Year of Certification						
• IV Starts						
Continuing Education Method may not be averaged	36		36	36	36	36
OTEP Method	12		12	12	12	12
• Endotracheal intubations NOTE: (4 per year must be performed on humans for each method)						
Continuing Education Method may not be averaged		12	12		12	12
OTEP Method		4	4		4	4
• Intraosseous infusion placement	X		X	X	X	X
Second and Third Years of Certification						
Annual Requirements						
• IV Starts.*						
Continuing Education Method	36		36	36	36	36
OTEP Method	12		12	12	12	12
• Endotracheal intubations.* NOTE: (4 per year must be performed on humans for each method)						
Continuing Education Method		12	12		12	12
OTEP Method		4	4		4	4
• Intraosseous infusion placement	X		X	X	X	X
During the Certification Period						
• Pediatric airway management		X	X		X	X
• Multi-lumen airway placement				X	X	
• Defibrillation				X	X	

"X" indicates an individual must demonstrate proficiency of the skill to the satisfaction of the MPD.

*The second and third year requirements may be averaged over the two years.

NOTE for Continuing Education Method ONLY: Upon approval of the MPD, individuals unable to complete the required endotracheal intubations during the certification period, may meet the endotracheal intubation requirements by completing a MPD and department approved intensive airway management training program, utilizing cognitive, affective and psychomotor objectives covering all aspects of emergency airway management.

NOTE: The most updated version of the administrative code may be found on the OEMSTS website at <http://www.doh.wa.gov/hsga/emstrauma/wacindex.htm>

WAC 246-976-161 Skill maintenance requirements - Table B: (continued)

Later Certification Period Requirements:

TABLE B: SKILLS MAINTENANCE REQUIREMENTS	Intermediate Life Support (EMT-Intermediate Levels)					Paramedic (ALS)
	IV	Airway	IV/Airway	ILS	ILS/Airway	Paramedic
Later Certification Periods						
Annual Requirements						
• IV Starts	X		X	X	X	X
• Endotracheal intubations	NOTE: (2 per year must be performed on humans for each method)					
Continuing Education Method		4	4		4	4
OTEP Method		2	2		2	2
• Intraosseous infusion placement	X		X	X	X	X
During the Certification Period						
• Pediatric airway management		X	X		X	X
• Multi-lumen airway placement				X	X	
• Defibrillation				X	X	

"X" indicates an individual must demonstrate proficiency of the skill to the satisfaction of the MPD.

*The second and third year requirements may be averaged over the two years.

NOTE for Continuing Education Method ONLY: Upon approval of the MPD, individuals unable to complete the required endotracheal intubations during the certification period, may meet the endotracheal intubation requirements by completing a MPD and department approved intensive airway management training program, utilizing cognitive, affective and psychomotor objectives covering all aspects of emergency airway management.

NOTE: The most updated version of the administrative code may be found on the OEMSTS website at <http://www.doh.wa.gov/hsqa/emstrauma/wacindex.htm>

Appendix B: - Recertification/Renewal Requirements

WAC 246-976-171 To apply for Recertification/Renewal.

- (1) To apply for recertification, the applicant must provide information that meets the requirements identified in **WAC 246-976-141(2)**; except current Washington state certification is considered proof of course completion, age, and initial infectious disease training.
- (2) Proof of successful completion of education and skills maintenance, required for the level of certification, as defined in this chapter and identified in Tables A and B of WAC 246-976-161.
- (3) Demonstrate knowledge and practical skills competency:
 - (a) For individuals participating in the OTEP method of education at the level of certification, successful completion of the OTEP fulfills the requirement of the DOH written and practical skills examinations.
 - (b) Individuals completing the CME method of education must provide proof of successful completion of the DOH written examination and practical skills examination for the level of certification.
 - (i) Basic life support (BLS) and intermediate life support (ILS) personnel must successfully complete the DOH approved practical skills examination for the level of certification.
 - (ii) Paramedics must successfully complete practical skills evaluations required by the MPD to determine ongoing competence.

Certification: 246-976-141

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Effective 5/6/00

NOTE: The most updated version of the administrative code may be found on the OEMSTS website at <http://www.doh.wa.gov/hsga/emstrauma/wacindex.htm>

Appendix C: - Certification Requirements

WAC 246-976-141 To apply for certification.

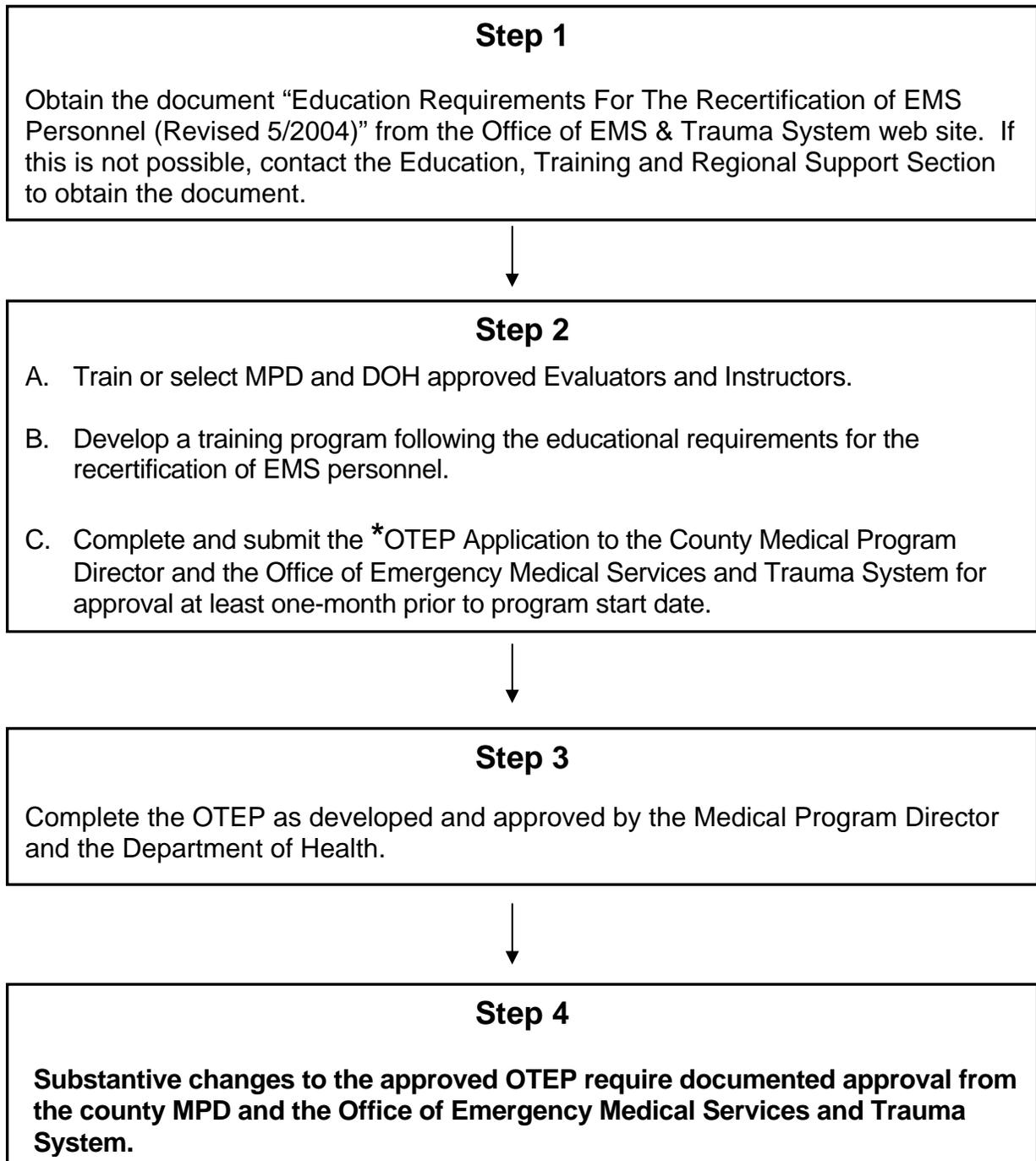
- (1) Department responsibilities. The department will publish procedures for initial certification which include:
 - (a) Examinations. An applicant may have up to three attempts within six months after course completion to successfully complete the examinations;
 - (b) The process for administration of examinations; and
 - (c) Administrative requirements and the necessary forms.
- (2) Applicant responsibilities. To apply for initial certification, submit to the department:
 - (a) An application for certification on forms provided by the department;
 - (b) Proof of identity: An official photo identification (which may be state, federal or military identification, drivers' license, or passport);
 - (c) Proof of age;
 - (d) Proof of completion of an approved course or courses for the level of certification sought;
 - (e) Proof of completion of approved infectious disease training to meet the requirements of chapter 70.24 RCW;
 - (f) Proof of successful completion of an approved examination within eighteen months prior to application;
 - (g) Proof of active membership, paid or volunteer, in one of the following EMS/TC organizations:
 - (i) Licensed provider of aid or ambulance services;
 - (ii) Law enforcement agency; or
 - (iii) Other affiliated EMS/TC service;
 - (h) The MPD's recommendation for certification;
For EMTs, proof of high school graduation, GED, or equivalent;
 - (j) Other information required by this chapter.
- (3) Certification is effective on the date the department issues the certificate, and will be valid for three years except as extended by the department for the efficient processing of license renewals. The expiration date will be indicated on the certification card.
- (4) Certification of intermediate level technicians and paramedics is valid only:
 - (a) In the county or counties where recommended by the MPD and approved by the department;
 - (b) In other counties where formal EMS/TC medical control agreements are in place; or
 - (c) In other counties when accompanying a patient in transit from a county meeting the criteria in (a) or (b) of this subsection.

With approval of the MPD, a certified intermediate level technician or paramedic may function as an EMT in counties other than those described in (a) through (c) of this subsection.

[Statutory Authority: Chapters 18.71, 18.73, and 70.168 RCW. 00-08-102, § 246-976-141, filed 4/5/00, effective 5/6/00.]

NOTE: The most updated version of the administrative code may be found on the OEMSTS website at <http://www.doh.wa.gov/hsga/emstrauma/wacindex.htm>

Appendix D – The OTEP Development Flow Process



If you have questions?

Call the Education, Training and Regional Support Section at
(800) 458-5281, Extension 2

***The OTEP Application is available on the OEMSTS website at
<http://www.doh.wa.gov/hsqa/emstrauma/publications.htm>**

ONGOING TRAINING AND EVALUATION PROGRAM APPLICATION

Training Agency _____

Mailing Address _____

Street Address

City/Zip

OTEP Coordinator _____

Number of Participants _____

Indicate the training levels included in the OTEP (Check boxes that apply):

FR

(BLS)

EMT

IV

AIR

IV/AIR

(INTERMEDIATE)

ILS

ILS/AIR

PM

(ALS)

Number of DOH approved EMS Skills Evaluators: _____ (Attach list of names and EMS Registry #s)

Below, outline your OTEP plan (CME topics) covering a three-year cycle. Attach additional sheets if necessary. OTEP applications should be renewed whenever significant changes are made. Sign the application and obtain required signatures, then submit to the address below.

OTEP Coordinator/Agency Head (Print/Type)

Signature

Date

APPROVAL SIGNATURES

County MPD or Designee (Print/Type)

Signature

Date

Obtain required signatures and submit to:

DOH - Office of EMS & Trauma System
EMS Education, Training & Regional Support Section
P.O. Box 47853
Olympia, Washington 98504-7853

DOH/OEMSTS ETRS Section (Print/Type)

Signature

Date