

The

The Newsletter of the National Registry of Emergency Medical Technicians

Registry

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A message from the chairman: Core values guide NREMT Board



I am honored to serve as Chairman of the Board of Directors of the National Registry of Emergency Medical Technicians. With this position comes the daunting responsibility of working with the board to lead the Registry in fulfilling its mission as the national certifying organization for EMTs. All of us on the board take this

responsibility very seriously and devote many hours to ensuring that we meet the needs of all our various customers. We have adopted a set of core values to guide us in our decision making and implementation of the strategic plan.

by Mary Beth Michos, RN
Chief of the Department of Fire and Rescue
Prince William County, VA

Our first and most important value is to serve as an advocate for quality patient care. After all, that is what all of us in EMS are here for – to see that patients in need get the best care possible. Whether it be test development, administration or individual decision making, we constantly ask ourselves “does this support this vital role?” The answer has to be yes or we seek an alternative.

We also value demonstrating leadership and professionalism in EMS. We do this through participation in conferences, meetings and educational programs of most of the national EMS organizations. This provides us with the most current industry information and offers opportunities to develop valuable relationships. Members of the staff and board alike have served on national study and program development groups. For example, the Registry was one of the first sponsors of the EMS

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NREMT BOARD: We are the national EMS certification organization

The NREMT Board of Directors has recognized the National Registry as the National EMS Certification Organization as described in the EMS Education Agenda for the Future: A Systems Approach. Efforts that began in 2001 to move toward the objective have been met, and there is much significant evidence to support this recognition:

- NREMT's 33-year history, not-for-profit status and organizational stability
- The acceptance and application of NREMT standards by 44 states and the registration of more than one million EMTs
- The NREMT's investment of more than \$50 million supporting EMS and certification
- NREMT's registration processes, staff, facility and information technology
- The accreditation of the NREMT by the National Commission for Certifying Agencies and adherence to APA standards
- The NREMT's board membership, strategic planning process and governance of inclusiveness
- Its strong industry relationships and role as an EMS community leader

- NREMT's advocacy and participation in these areas: ADA research/compliance, the EMS Education and Practice Blueprint, the National Standard Curriculum, the LEADS study, Committee on Accreditation and participation with state and Federal partners
- Its high customer satisfaction ratings with states and EMTs
- A progression of systematic improvements to its services, including turnaround time and communications and information technology

The EMS Education Agenda calls for a national EMS certification process. Once the Board of Directors had an opportunity to study the NREMT experiences, contributions and customer satisfaction, they felt there was substantial evidence that the NREMT had earned the designation of being the national EMS certification.

“We recognize that along with the designation comes responsibility to maintain and increase the quality of our services and examinations,” Bill Brown, NREMT executive director, said. “The NREMT remains committed to being a responsible EMS community member and being of service to the state EMS licensing bodies, stakeholders and most importantly the public.”



Computer-adaptive testing closer to implementation

The era of pencil-and-paper Registry exams may come to an end by the end of 2006 if the NREMT changes over to computer-adaptive testing (CAT) for all written exams.

Convenience and the ability to address individual candidate abilities are the primary advantages of CAT for registrants and candidates, according to Rob Wagoner, NREMT associate director.

“Currently, candidates complete the required course work and take the written exam in a group at a designated site and time, which were requested and scheduled by the examination coordinator” Wagoner explained. “However, not every candidate may be able to test at that single location and at the scheduled time. At this time though, their options are very limited.”

Although the cost to the candidate will increase, the added convenience and decreased turnaround time with computer-adaptive testing will be well worth it. With the implementation of CAT, candidates will travel to the regional testing site that is most convenient to them and at the time of their choosing. The personalized exam would be taken on a computer, with the results available the next day to the candidate, the NREMT and the candidate’s state EMS office.

The exam is “personalized” in that it has the ability to adjust the level of difficulty of questions based on the individual candidate’s performance. For example, if a candidate responds incorrectly to a difficult question, the next question will be of a lesser difficulty. In this way, overachieving candidates will respond to questions of high level of difficulty, while average or lesser performing candidates will respond to questions of an appropriately lower difficulty level. This is the “adaptive” feature of computer-adaptive testing.

Simply stated, the computer “looks” for a confidence level to assess an individual’s abilities. If the standards are met quickly, the computer shuts off and the candidate passes. If the candidate continues to miss the easiest questions, the computer shuts off and the candidate fails.

“As with the current written exam, computer tests will still be measuring entry level competence,” Wagoner explained. “However, CAT will have the ability to determine this more efficiently with greater precision and fewer items. Exam items will still be developed as they are now and written by subject matter experts, incorporating the same principles the NREMT has always employed.”

Because the tests will be electronic, with the results transmitted electronically, the turnaround time for results reporting will also be significantly reduced.

“Since candidates apply online and take the test electronically, the turnaround time from testing to licensure can potentially be cut from weeks to a matter of hours or days,” Wagoner explained.

“We realize that any processing delay increases the period of time an open slot at an EMS service remains unfilled and increases the

period of time a registrant or candidate either works for less pay or collects no pay,” he added.

Computer-adaptive testing is not a new concept, just new to the NREMT. Computer based testing has been in use for about 25 years, and computer-adaptive testing is already used by many other allied health organizations, including the National Council of State Boards of Nursing and the American Society of Clinical Pathologists.

Information security is a high priority with computer testing, Wagoner added. NREMT testing will be administered by a third-party vendor equipped to handle the volume of exams. Information will be transmitted via a private proprietary network that is not accessible by unauthorized users.

“There will be no possibility for unauthorized access to test information,” Wagoner said. “The vendor will have a private network that is not accessible by outsiders. CAT does not involve use of the worldwide web at all.”

The genesis of CAT for the NREMT grew out of the strategic planning process. In 2002 the NREMT Board of Directors challenged the Standards and Examination Committee to explore alternative testing methods for NREMT exams, including computer-adaptive testing. The committee recommended implementing CAT for all Registry written exams.

“We are currently in the process of drafting a request for proposal to submit to potential vendors,” Wagoner said. “We are only going to consider the top established vendors in the field. We will collect and review the proposals and make a recommendation to the board at the November 2004 meeting. The two-year transition to computer adaptive testing will begin early in 2005.”

Wagoner emphasized the effects that substituting computer-adaptive testing for the current paper-pencil written exam process may have on practical exams are still to be determined.

“Practical exams are, by their nature, complicated to administer,” Wagoner explained. “If the practical is administered prior to the CAT exam, that means all candidates will take the practical, even those who subsequently fail the CAT. If the CAT is administered first, only those candidates who pass would proceed to the practical. However, this means their time-to-licensure will be longer. Exactly how the practical will mesh with CAT is a major area of review facing the members of the Standards and Examination Committee.”

More information on Computer Adaptive Testing will be available to states, educators and other stakeholders as the NREMT continues to investigate the use of CAT in EMS. We suggest you monitor our web site as this investigation continues. There will be a report on implementation of CAT in the 2005 newsletter following a decision by the Board of Directors at the November 2004 meeting.

Message from the chairman *continued from page 1*

Education Blueprint, and has also demonstrated its professionalism through achieving accreditation as a certifying body.

Board members believe it is vital that we function with integrity, honesty and objectivity. The board has its own checks and balances, and we solicit the services of other professionals to ensure we operate objectively, ethically and in accordance with the law.

We firmly believe in using scientific evidence to help us in our decision making. Since there is no vast collection of EMS data and research, we continue to support and participate in research and data collection, and we have devoted considerable effort and funds to this end. The NREMT has been collecting data through our LEADS project and the practice analysis, which is also the basis for test development. Registry exams employ scientific and academically accepted methods of design.

The NREMT staff and board are committed to providing excellent customer service and operating in a staff-friendly environment. We are blessed at the Registry to have a staff dedicated to our mission. They are very hard working and creative, and they realize the important role they play in serving you and helping ensure quality patient care.

The board and Registry operate in an accessible, open and consensus

building manner. There is frequent open communication between the staff and board and with many of our customer groups. Where there are differences in opinion, issues are discussed with the goal of consensus and agreement. Diversity of opinion sometimes make this a challenge, but the effort yields the best decisions possible. All sides are heard and opinions respected.

We have always tried to be innovative and flexible in our support of EMS. The Registry has been a sponsor of CECBEMS and the Committee on Accreditation for a number of years. In addition, the staff has worked with most states to support their efforts to improve the status of the EMS providers.

Finally, we operate in an environment of fiscal responsibility. We realize many of you and your departments pay for our services. We hold your trust in highest regard and constantly strive to provide quality services at reasonable costs. This is evidenced by the fact that we have raised our rates only once in the past 30 years. I doubt there is a company or other organization with a similar record.

I hope this summary of our core values helps you understand the Registry and why we function the way we do. I look forward to the next two years as chairman and the many exciting programs we are working on to enhance our service to you.

Michos honored as Fire Chief of the Year

Mary Beth Michos, RN, Chief of the Department of Fire and Rescue in Prince William County (Virginia) and new chairman of the NREMT Board of Directors, was named Fire Chief of the Year by Fire Chief Magazine. The award was presented at the International Association of Fire Chiefs (IAFC) Fire Rescue International Exhibits and Conference in Dallas, Texas, in August.

Chief Michos has been a member of the National Registry's Board of Directors since 1993 and is currently serving a two-year term as chairman. She was instrumental in starting a new NREMT Community Relations Program last year when she served as chair of the committee and has been instrumental in the design of the Registry practical exam and establishing the pass/fail score on written examinations. In

recognition of her contributions to EMS, Chief Michos received the James O. Page National EMS Chief Award from the International Association of Fire Chiefs EMS Section in May 2003.

"Chief Michos has made an extraordinary contribution to the EMS community," Bill Brown, NREMT executive director, said. "The impact of her tireless efforts has significantly improved the quality of EMS throughout the nation and will be recognized for years to come. In her role as vice chairman, and now chairman of the NREMT Board of Directors, she brings considerable expertise to the NREMT leadership. As a representative from the fire service, we look forward to her continued contribution to the NREMT decision making process."

NREMT EMS Research Fellowship

As recommended in the EMS Research Agenda for the Future, the NREMT is establishing an EMS Research Fellowship Program available to a qualified candidate.

The National Registry's EMS Fellowship Program is intended to help build a cadre of career EMS researchers, according to Gregg Margolis, NREMT associate director, and will provide a unique combination of mentorship, research and education to develop EMS researchers.

"The EMS Research Agenda identifies the need to increase the number of formally trained EMS researchers, and I think there will be many opportunities for appropriately credentialed EMS researchers in the future" Margolis explained. "This is a great

opportunity for an EMS provider who is interested in a career in research to maintain an income while pursuing a doctorate."

While working in the NREMT Research Program, the EMS Research Fellow will have a reduced workload and fully funded tuition toward an approved terminal degree. The ideal candidate will be a Nationally Registered EMT, have experience as an EMS provider, already hold a bachelors degree and be enrolled in or accepted for admission to an approved doctoral program.

Interested applicants should send a cover letter and resume to Gregg Margolis, associate director, NREMT, P.O. Box 29233, Columbus, OH 43299 by May 1, 2004.



NREMT web site update

The last two issues of *The Registry* newsletter have carried updates on the development and enhancement of the NREMT web site at www.nremt.org. Now that the site is fully functional, it contains a great deal of valuable information that can be readily accessed.

In 2003 visits to www.nremt.org increased from 2002 by 210 percent, or 18,200 more

visits. The top ten most popular pages: Locate an Exam, Check Candidate Status, Check Registrant Status, Registration Applications, Reregistration Applications, Change your Address, Request a copy of Card/Certificate, State EMS office information, 2002 Newsletter and 2003 Newsletter.

This means an increasing number of those affiliated with the NREMT are finding the information they need on the web site. However, it contains a great deal more in addition to the commonly used links. For example, there is also information on the NREMT's general policies, including disciplinary, felony and disability accommodations policies. There is also information on the registration and re-registration procedures, along with answers to frequently asked questions. Much of what candidates and registrants want to know can be located on the web site, eliminating the need for a call to the NREMT.

There is also background information about the NREMT, including history, as well as current updates on the Registry's strategic plan, annual report summaries and information on the ongoing LEADS survey project.

The NREMT expects to use the website as the primary communication vehicle to registrants. It is hoped NREMTs visit the site and see if any changes or news important to them is on the front page. Sometime soon staff will be added who will be responsible to keep information on changes at the NREMT available to registrants. The intent is not to produce an EMT news site, just keep NREMTs informed.

"We hope NREMTs use the site to keep their address current and for a variety of reasons," Bill Brown, NREMT executive director, said. "We average 130,000 phone calls a year. We want people to check the web site for information before they call the NREMT."

www.nremt.org

Answers to most questions on NREMT web site

There is a section on the web site that pertains to most frequently asked questions (FAQs) relating to registration and reregistration. This should help to answer any questions candidates and registrants might have pertaining to reregistration. For easy access to this information, go to www.nremt.org/EMTServices/rr_faq.asp

Regarding Intermediate 85/99 and Paramedic refresher requirements, there was an article in the spring 2002 newsletter explaining the requirements, and there is a related summary in this issue. This information may also be viewed at the web address www.nremt.org/downloads/Newsletter_2002.pdf. The refresher requirement can be completed through a state approved refresher course adhering to the 2001 National DOT curriculum or through continuing education that meets the mandatory and

flexible core content. Registrants must receive education covering all objectives within the mandatory core content and the hours required and receive education on at least one objective within each division of the Flexible Core content and hours required. The reregistration form in Section 1A outlines three ways to submit your training hours: refresher certificate, refresher attachment or official letter from training director/medical director.

Registrants who complete the special topic courses (PHTLS, BTLS, ACLS, AMLS, PEPP, and PPC, 16-hour course for each) will fulfill the mandatory and flexible core content of the refresher.

Registrants may also check their reregistration status online under "Quick Links to Most Popular Pages" on the NREMT web site home page.

New officers and members elected to the NREMT Board

The new officers and members elected to the NREMT Board of Directors Began their terms in January.

The chairman is Mary Beth Michos, RN and Chief of the Department of Fire and Rescue in Prince William County (Virginia). She previously served two-year terms as treasurer and vice-chairman. Chief Michos has been a member of the board of directors since 1993 and has served as a member and chairman of many committees.

M. Sandy Bogucki, MD, PhD, who just completed a two-year term as treasurer, was elected vice-chairman. Dr. Bogucki is an associate professor in the Section of Emergency Medicine at Yale University School of Medicine. Dr. Bogucki was first elected to the National Registry Board of Directors in 1997, and has recently served as the chairman of the Research Committee.

Jimm Murray, who is currently the administrator for the Wyoming Department of Health, Community & Family Health Division, assumes the role of treasurer. Mr. Murray has been on the Registry Board since 1996, and has been a nationally registered EMT since 1971. In fact, he is number three on the list of actively registered EMTs in the nation.

Elected to the board for the first time was Dan Manz, current state EMS director from Vermont. In addition, Mark King, EMS director from West Virginia, and Dr. Roger White, an anesthesiologist/cardiologist from the Mayo Clinic, were re-elected to the board.

The executive officers (chairman, vice-chairman, treasurer, and immediate past chairman), serve two-year terms, and board members serve four-year terms. All officers and board members are elected by the board.

The new refresher requirements for Intermediate 85/99s and Paramedics detailed in the spring 2002 issue of The Registry newsletter take effect for the designated advanced level EMTs whose reregistration is due March 31, 2004, and thereafter.

The new requirements are divided into two categories of refresher education: Mandatory Core Content and Flexible Core content. Checklists for Intermediate 85/99s and Paramedics were included in the spring 2002 newsletter.

The Mandatory Core Content was developed based upon assessment and patient care tasks that were identified by EMTs in the practice analysis to have a high potential for harm yet a low frequency of delivery. Registered NREMT-Intermediate 85/99s and NREMT-Paramedics must receive education over every topic listed in the Mandatory Core Content.

Educators, medical directors and training officers may find content that reflects these topics in the NHTSA EMT-Intermediate & Paramedic Refresher Curricula. Registrants may obtain exposure to these topics in a variety of formats, including lecture, simulated skill presentations, case or run review discussions, conference attendance or via a formal course. When registrants complete the reregistration report, NREMT will check to assure that each task has been documented. In states that require a formal EMT-Intermediate 85/99s or Paramedic refresher course completion, the registrant must attend that course and cannot substitute the formal course by attending topical content outside of the course.

The Flexible Core Content represents education over topics identified by EMTs to have both high potential for harm and high frequency of delivery. NREMT-Intermediate 85/99s, NREMT-Paramedics, states, or employers may choose which patient assessment and care tasks they wish to review based upon individual, system or state needs assessments.

New advanced level refresher requirements take effect in 2004

Educators, medical directors and training officers may find content that reflects these topics in the NHTSA EMT-Intermediate 85/99s or EMT-Paramedic Curriculum. The NREMT will require prescribed hours in the Flexible Core Content; however an NREMT-Intermediate 85/99 or Paramedic may report all hours of education over a single task within the section such as the task "assess and provide care to a patient

experiencing non-traumatic chest pain/discomfort." When registrants complete the reregistration report, NREMT will check to assure hours of content have been covered but not every single topic area is required.

A variety of nationally recognized EMS education courses are available for EMS providers. NREMT-Intermediate 85/99s or NREMT-Paramedics who complete Advanced Cardiac Life Support may use the 16 hour initial course as meeting the requirements for the airway, breathing and cardiology sections of both the Mandatory and Flexible Core Content. NREMT-Intermediate 85/99s or NREMT-Paramedics who attend the NAEMT's Advanced Medical Life Support may use the course to cover all medical topics outlined in the Mandatory and Flexible Core Content.

NREMT-Intermediate 85/99s or NREMT-Paramedics who attend either the NAEMT's Pediatric Life Support Course or the American Academy of Pediatrics-PEPP course may use that content to cover the pediatric topics in Mandatory and Flexible Core Content. NREMT-Intermediate 85/99s or NREMT-Paramedics who attend either the NAEMT's PreHospital Trauma Life Support Course or the American College of Emergency Physicians Basic Trauma Life Support Course may use that content to cover the trauma topics in the Mandatory and Flexible Core Content. Distributive Education may be used as a part of the Mandatory and Flexible Core Content for a total of 10 hours.

For more information about the new refresher requirements and for the refresher checklists, visit the NREMT web site at www.nremt.org.

National Registry of Emergency Medical Technicians

EMBLEMS



FR-96
This emblem is available to Registered First Responders.



N-90
This emblem is issued to all Registered EMT-Basics.



NS-94
Scotchlite™ Reflective Emblem
This safety emblem is optionally available and will greatly enhance nighttime visibility of the NREMT.



NI-81
This emblem is issued to all Registrants in the EMT-Intermediate classification.



MP-78
This emblem is issued to all Registrants in the EMT-Paramedic classification.



N-90-M
This subdued emblem is issued to Registered EMT-Basics serving in the military.



EMT



Paramedic



EMT



Paramedic



Tie Bar
with clasp, gold plated

Payments or contributions to the National Registry of Emergency Medical Technicians, Inc., are not deductible as charitable contributions for Federal Income Tax purposes. Payments may be deductible as a business expense. If in doubt, please consult your tax adviser.

Item	Qty.	Cost (each)	Amount
FR-96		1.50	
N-90		2.00	
NS-94		3.50	
MP-78		3.00	
NI-81		2.50	
N-90-M (Subdued NREMT Emblem) Military		2.50	
Lapel Pin/EMT		2.50	
Lapel Pin/Paramedic		4.00	
Tie Bar		2.50	
Decal/EMT		1.00	
Decal/Paramedic		1.50	

Only fully registered EMTs (not provisional) may order above items. Maximum of 15 items can be ordered by an individual EMT at a time.

Poster 2000		15.00	
Paramedic In Review CD-ROM		30.00	
TOTAL			

Send check or money order to: NREMT, P.O. Box 29233, Columbus, Ohio 43229

Registry No.		
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<i>Please write your registry number on your check.</i>		

Spring 2004

The Registry

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