



# MidState Medical Center

## **SPONSOR HOSPITAL PROGRAM**

**203-694-8594    FAX 203-694-7610**

### **2008 CME Policy and Schedule**

To:    EMT-Intermediates and EMT-Paramedics

From: Thomas Russell, MS, NREMT-P & Gary Tickey, Pre-Hospital Care Medical Team

The CT Office of Emergency Medical Services has abandoned its efforts to coordinate a statewide transition of paramedics to the most current National Standard Curriculum for the EMT-paramedic. With this in mind, the 2008 CME Program has been developed as a regional sponsor hospital approach to ensure educational opportunities for our State of Connecticut licensed/certified and nationally registered EMS personnel. The National registry-EMT-P template has been applied to offer a menu of opportunity for those paramedics who wish to maintain their National Registry status.

Enclosed are the 2008 MidState Sponsor Hospital Program CME Policy and Schedule.  
**There are several changes so please read the packet carefully.**

Please be sure to submit your reservation for the Practical Skills Workshop & Testing by sending in the enclosed form by February 22, 2008.

I have also included the MidState Medical Authorization Policy, which has recently been revised. Please review this policy and keep it for future reference.

The EMS Coordinators and MIC Medical Director have made every effort to provide a regional approach to the CME program. There may be some variation based on specific needs so always follow the guidelines and requirements of your primary sponsor hospital. Please contact the MidState Sponsor Hospital Program office if you have any questions concerning the CME Program.

Best wishes for a Healthy and Happy EMS Year!





## **SPONSOR HOSPITAL PROGRAM**

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### **MOBILE INTENSIVE CARE PERSONNEL MEDICAL AUTHORIZATION POLICY**

**PURPOSE:** To provide a mechanism by which State of Connecticut certified Mobile Intensive Care (MIC) personnel can become medically authorized by the MidState Sponsor Hospital Program MIC Medical Director. Only employees of MIC services sponsored by the MidState Sponsor Hospital Program are eligible to obtain medical authorization.

#### **PROCESS:**

- A. The MIC candidate must provide the following documentation to the MidState EMS Office:
  1. A copy of a current State of Connecticut EMT card or license at the MIC level of certification for which medical authorization is being sought.
  2. A copy of current BLS-C, ACLS and PALS cards. (ACLS & PALS required for paramedics only)
  3. A letter from the sponsored MIC service verifying employment At the MIC level for which medical authorization is being sought.
  4. A completed MidState Sponsor Hospital MIC Personnel Application.
  5. A letter of support from the last MIC Medical Director who Provided medical authorization verifying that the candidate is eligible for on-going medical authorization and attesting to her/his professionalism; if the candidate is a new graduate, a letter of support from the Course Medical Director or Course Coordinator

verifying that the candidate graduated in good standing and attesting to her/his professionalism.

- B. Upon review and approval of the completed application the MIC candidate Will schedule a written protocol exam with the MidState EMS office.
1. Upon completion of the protocol exam, the exam will be reviewed with the candidate.
  2. If the candidate fails the exam, a make-up exam will be scheduled.
- C. Successful completion of the above will result in the granting of a Probationary medical authorization status of up to, but not exceeding, ninety (90) days. During this probationary period the MIC paramedic candidate will provide pre-hospital patient care under the supervision of the MidState Sponsor Hospital Program approved Paramedic Field Instructor (PFI). All other levels of MIC candidates will provide pre-hospital patient care under the supervision of a MidState Sponsor Hospital Program approved field preceptor. While the candidate may have up to three (3) months to demonstrate his/her ability, the following minimum criteria will apply:
1. New graduate EMT-Paramedic (EMT-P) candidates must complete A minimum of thirty (30) advanced life support (ALS) calls in a minimum time period of four (4) weeks. New graduates must precept as a third for a minimum of ten (10) calls.
  2. EMT-P challenge candidates with prior field experience must Complete a minimum of fifteen (15) ALS calls in a minimum time period of two (2) weeks. Experienced paramedics must precept as a third for a minimum of five (5) calls.
  3. New graduate EMT-Intermediate (EMT-I) candidates must Complete a minimum of ten (10) ALS calls in a minimum time period of four (4) weeks.
  4. EMT-I challenge candidates must complete a minimum of five (5) ALS calls in a minimum time period of two (2) weeks.
  5. ALS calls are defined as those calls in which the MIC candidate is Responsible for assessment of the patient, formulation of a treatment plan and performance of appropriate ALS skills under the supervision of an approved PFI or field preceptor. Precepting technicians **are required to turn in every 5 (five) calls** for evaluation by the EMS Office.

6. All calls will be evaluated and documented on Field Evaluation Forms provided by the MSSHP. A copy of the completed run form must be attached to each evaluation form for each call.
  7. The minimum requirements can be waived or modified at the discretion of the MIC Medical Director.
- D. Following successful field preceptorship the MIC candidate will submit field evaluation documentation to the Mid State Sponsor Hospital Program office. Arrangements will be made for final field evaluation through the Program office.
  - E. When the PFI(s) or field preceptor (s), the EMS Coordinator (s) and the MIC candidate agree that the MIC candidate's clinical competence and professional demeanor merit acceptance, a written recommendation will be made to the MIC Medical Director for medical authorization of the MIC candidate.
  - F. Upon completion of the final field observation an interview with the MIC Medical Director may be scheduled through the MidState Sponsor Hospital Office.
  - G. During the probationary period, the PFI/field preceptor, the MIC Service Representative, the EMS Coordinators, the Sponsor Hospital Program Pre-Hospital Care Coordinator and MIC Medical Director will confer frequently to continually evaluate the MIC candidate's progress.
  - H. Should the MIC candidate fail to meet the required standards, the MIC Medical Director will review the candidate's status and define a written course of action.
  - I. Should a medically authorized EMT-I or EMT-P wish to function at the EMT level only but wishes to maintain EMT-I certification or EMT-P licensing a written notification of such must be submitted to the NHSHP and one of the following must occur:
    1. The EMT-I or EMT-P may complete the requirements of the MidState Sponsor Hospital MIC Continuing Education Policy.
    2. The EMT-I or EMT-P may successfully complete an EMT-B Refresher within six months of relinquishing medical authorization and every three calendar years there after.
  - J. Should a medically authorized EMT-I or EMT-P become inactive (greater

than three months) because of illness, injury, military duty, family/medical leave or school commitments or other reasons, a written notification of such must be submitted to the MidState Sponsor Hospital including a plan to maintain continuing medical education requirements that is approved by the MIC Medical Director.

- K. When an inactive EMT-I or EMT-P wants to return to clinical patient care Activities, the request must be made in writing to the MidState Sponsor Hospital and the following must occur.
1. A plan to refresh patient care skills in the emergency department and operating room if deemed necessary by the MIC Medical Director.
  2. A plan to have a field evaluation completed by a PFI or member of The MidState Sponsor Hospital staff if deemed necessary by the MIC Medical Director.
  3. Submission of current required licenses and certifications.
  4. Submission of documented continuing medical education hours.

Approved: January 25,2003  
Revised: 12/2004,12/2004,12/2005, 12/2006, 12/2007