

Northwest Arkansas Community College
Division of Health Professions
One College Drive Bentonville, AR 72712
(479) 619-4153
PARAMEDIC APPLICATION PACKET AND CHECKLIST

This checklist is provided to assist you in your application to the Paramedic program at Northwest Arkansas Community College. Please complete each step of the admission process. Contact Tana Beenken, EMS Admin Analyst tbeenken@nwacc.edu 479.619.4153

The Application file must contain the following information to be considered complete. If the file is not complete, it will not be considered for Admission. Missing items or information will be identified by Staff and you will be asked to immediately supply the information. Late Applications will **NOT** be accepted, and you will have to wait until the next cycle to re-apply.

CHECKLIST:

Items to be submitted to the Health Professions Division (CHP 2059)

Deadline to submit information is March 1st.

Paramedic Program Application Packet including:

- _____ Essay (Typed minimum of one page on why you want to become a Paramedic)
- _____ Copy of current EMT certification
- _____ Copy of current signed CPR Card
- _____ 3 Letters of Recommendation from active paramedics with whom you work on an ambulance
- _____ Letter from EMS Administrator for recommendation to attend Paramedic Program
- _____ Student Health, Physical Condition, and Disability Form
- _____ Years of service or EMT Internship Form from EMS agency
- _____ Physicians Physical Statement Form
- _____ Authorization to Release Information Form
- _____ Clinical requirements acknowledgement Form
- _____ COVID vaccine documentation ***note this is now required of all Health Professions students who attend clinicals. Clinicals are done in the ER and NWA Children's Hospital. This is a clinical requirement, not an NWACC requirement.*

Items to be submitted to Student Services:

___ Submit official college transcripts from all colleges attended. Transcripts must be sent directly from the Registrar's Office to NWACC Student Services. Also, if a transcript evaluation for credit received at another institution is needed, request a Transcript Audit Form, and submit it to Student Services.

Complete and file all necessary Financial Aid applications with the Financial Aid office well in advance of the beginning of the semester. It is recommended that you file FAFSA no later than January 1st. Submit Financial Aid Application to: NWACC Financial Aid - 2nd floor of Student Center.

A. Curriculum

A grade of "C" or above in all required courses is necessary in order to complete the program.

B. Paramedic Program Admission Requirements

1. The following courses are required for admittance: application and all required documentation submitted.

- a. Prerequisite classes:
 - i. Anatomy and Physiology I
 - ii. Anatomy and Physiology II
 - iii. Medical Terminology
 - iv. Cardiac Dysrhythmia

2. Please note that the course titled "EMT Internship" is required for all student applicants who have not worked for an ambulance service for a minimum of one-year. This course will be exempt for EMTs who work for an emergency paramedic level service and provide a letter from the licensed emergency service (form letter enclosed). Completion of this course or written documentation from licensed emergency service is required (see form attached).

3. A student must meet NWACC admission criteria and the criteria for admission to the Paramedic program before applying for the Paramedic Program.

Students must have an official high school diploma or equivalency.

4. Must have current Arkansas EMT License and NREMT certification.

5. Submit completed required forms to the Health Professions Division.

6. Turn in three letters of recommendation from 3 Paramedics working on an emergency Service

7. Turn in a letter of recommendation from the Paramedic level Emergency Ambulance service that you work(ed) for or did your internship with.

8. Non-Native Speakers of English, seeking admission into Health Professions programs are required to complete an ESL Listening Test. Students can receive more information and/or schedule to take this test through the NWACC testing center, 479-619-4354 or visit https://www.nwacc.edu/web/ldc_testingcenter/. The ESL listening test is designed to assess a student's ability to understand Standard American English. A score of 92 or higher on the COMPASS ESL listening test (taken within the last three (3) years) OR a score of 110 or higher on the Accuplacer ESL listening test is REQUIRED for NNSs students seeking entrance into Health Professions Programs at NWACC. The minimum score or higher indicates the ability to understand linguistically complex discussions, including academic lectures and factual reports. NNSs students seeking career paths in Health Professions scoring below the minimum will need to retest and successfully pass by March 1st.

C. Tuition per Semester Credit Hour and Other Costs:

Check the current college schedule for tuition and registration fees. Books (for the professional core courses of the Paramedic program), scrubs, lab jacket, name badge, miscellaneous items, and liability insurance may cost approximately \$300- \$350. Fees are subject to change.

Acceptance into the Program

You must be accepted into the program by the program Entrance and interview committee. This committee is the deciding factor on your admissions into the program. The committee is made up of EMS advisory Board members, member of the EMS community, Faculty and Staff of the EMS Education program at NWACC, and the EMS Medical Director.

Criteria for admission is based on:

Your entrance packet completeness

Essay

Interview answers

After acceptance into the Paramedic Program (within first month), students will be required to create an account with Castlebranch and provide them with Immunization information (to include, MMR, Varicella, TB test & Hep B). They will do a Federal Criminal background check and a 10- panel drug screen. The cost of this account will be \$122.00, paid by the student. Immunization fees vary; an estimated cost is up to \$379.00. You will also be required to show proof of Valid EMT Certification and valid CPR for Healthcare Professionals and proof of Health insurance.

D. Due Dates:

- Official college transcripts, transcript evaluations (if credit is from another college), and the completed Paramedic Application must be submitted by **March 1**.

Required forms for application due by March 1

Return checklist items:

NWACC | Center for Health Professions

Tana Beenken | EMS Admin Analyst | office 2059

OR via scanned and emailed to: tbeenken@nwacc.edu

**Northwest Arkansas Community College
Division of Health Professions
Application for Admission
Traditional Paramedic Program**

Date _____ Student ID _____

Full Name _____ Maiden Name _____

Date of Birth _____ SS # _____

Address _____ City _____ ST _____ Zip _____

Phone _____ NWACC email _____

Personal email _____

Department/EMS Service/Internship status _____

Have you lived in the state of AR for the last 5 years consecutively? _____

Are you a veteran? _____

National EMT License # _____ Expiration Date _____

State EMT License # _____ Expiration Date _____

(Dept. MUST have updated license information on file for the entirety of the program)

Please list ambulance service history: _____

I understand that my submission of application to the Paramedic Program does not guarantee a spot in the program. The EMS Admissions Committee must review all documents submitted with my application.

Signed Name

Date

Letter of Recommendation - Paramedic Level Education

I have worked with _____ and I recommend that he/she be admitted into
Print Applicant's Name
NWACC's Paramedic Program.

In recommending this applicant, I attest that he/she has demonstrated the characteristics necessary for continuing his/her education to the paramedic level.
This applicant is functioning at the basic EMT level with above average skills and knowledge. I feel that he/she has the necessary attributes to become a paramedic and have no reservations in recommending him/her.
In working with this applicant, I am comfortable with the skills and knowledge and feel that he/she is a great partner in the EMS agency that we work for. I desire to work with this applicant and would like to see him/her continue his/her education to the paramedic level.

I professionally attest to the following: (check all boxes either Y=yes or N=no)
Y N

- I have worked with the above named applicant on an emergency ambulance enough to make this recommendation.
- I have seen above average performance in this applicant on numerous occasions
- I would like for this individual to take care of my family if they were sick
- I have no reservations working with this applicant and enjoy going on calls with him/her.
- This applicant possesses the attributes necessary to make a great paramedic.
- I have further information about this applicant that I would like to share in person with you.
- I understand that my recommending this applicant for paramedic school is necessary for him/her to be admitted.

I hereby affirm and attest that the above statements to be true and reflect to my best judgment that this applicant is ready for paramedic level education.

Paramedic Name (*Print*)

Paramedic Signature

* Form may be given to applicant or mailed directly to:

**Northwest Arkansas Community College
NWACC | Center for Health Professions
Tana Beenken | EMS Admin Analyst | office 2059
1 College Drive
Bentonville, AR 72712**

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Paramedic Name (*Print*)

Paramedic Signature

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NWACC | Center for Health Professions
Tana Beenken | EMS Admin Analyst | office 2059
1 College Drive
Bentonville, AR 72712**

**EMS Paramedic Level Emergency Service Letter of Recommendation
NWACC Hybrid Paramedic Program**

(This letter of recommendation should be filled out by administration that the applicant has worked for or taken his/her EMT Internship class at. Chief, Assistant Chief, or their designee)

As representative for (EMS/Fire) _____ I recommend
Name of EMS or Fire Department

_____ for Paramedic Level Education at NWACC.
Applicant's Name

He/she has either ridden out with our department or is an employee with our department and we feel that he/she would be successful and a good fit in the paramedic program at NWACC.

Service Administrator Signature

Date

Student Health, Physical Condition, and Disability

Students who are accepted into an Allied Health program must be able to perform all course related physical activities. A copy of the physical tasks required for the program is included in this packet. **The student is required to have a physical and submit certification from a physician that the student is able to perform all of the related physical activities required for this profession. Proof of physical and the student's ability to perform the physical demands is to be submitted with the application packet. A copy of the Physical Demands is included for the student to take to the physician.**

In the event a student becomes pregnant, a written statement is required from a medical doctor stating that the physical exertion required during the course work and clinical work is not contraindicated. After the delivery, written notice is required from a medical doctor that releases the student to return to the normal course related activities of that particular program.

In the event of an extended (anything beyond three days) illness, injury, or surgery, two letters must be submitted by a medical physician. The first letter is due upon the onset and should state the problem and prognosis. The second letter should state fitness to return to normal course related activities and should be submitted prior to returning to the program.

The faculty and/or the advisory committee of individual programs reserve the right to make the final decision regarding a student's return to the program after a medical leave.

Students who are admitted to the Program are required to submit proof of health insurance during orientation.

NWACC strives to provide reasonable accommodation as necessary to allow a student to be successful. If you have a documented disability that would require reasonable accommodation, please contact the Office of Disability Services.

Please sign and return to:

NWACC | Center for Health Professions

Tana Beenken | EMS Admin Analyst | office 2059

OR scan and email to: tbeenken@nwacc.edu

Student Signature _____ Date _____

Witness Signature _____ Date _____

(EMS Agency to complete one of these - not both)

Letter of Employment with Emergency Paramedic Level Ambulance Service

_____ has worked for our agency since _____
Applicant's Name Date of Employment/began work

and meets the two year experience as an EMT basic with our agency.

Agency Name _____

Location _____

OR

Letter of Completion of Clinical Internship

_____ has completed the EMT Internship with our agency. I have reviewed the runs and responses from the preceptors and I make the following recommendation:

_____ I recommend this applicant for paramedic education at NWACC.

_____ I do not recommend this applicant for paramedic education at NWACC.

Name of reviewer _____

Signature of reviewer _____

Date _____

Physicians Physical Statement

I _____ have reviewed the physical demands for the skills and duties of a paramedic and have found this person to be physically able to perform these skills and duties to the best of my knowledge.

(Check one)

_____ I see no need for restrictions at this time.

_____ I have placed the following restrictions: (please list)

Physician Signature

Date

****If applicant is currently employed by an EMS/Fire Agency and they require an annual physical exam, you may opt to submit a copy of that exam in lieu of this form.**

**Northwest Arkansas Community College
EMS Department / Health Professions
Authorization for Release of Information**

I, _____
Print Student Name

hereby authorize members of Northwest Arkansas Community College Faculty/Staff to release my:

- 1 NAME
- 2 ADDRESS
- 3 PHONE NUMBER
- 4 GRADES ALL
- 5 ATTENDANCE
- 6 CLINICAL PROGRESSION
- 7 PROFESSIONALISM

Please provide a list of authorized persons who may receive this information from list above: (Place an X in boxes 1 – 7 or “all”)

_____ - Employer / Prospective

ALL	1	2	3	4	5	6	7

_____ - Parent

ALL	1	2	3	4	5	6	7

_____ - Spouse

ALL	1	2	3	4	5	6	7

_____ - Other (please state)

ALL	1	2	3	4	5	6	7

_____ - Anybody

ALL	1	2	3	4	5	6	7

(By signing below, I authorize the above information may be released to approve parties.)
A List of authorized persons on your list above will be sent to your department training officer even if no one is listed at your department. Further information will only be shared with authorized persons.

Student's Signature

Date

Witness Signature

Date

Acknowledgement of Clinical Requirements

Currently, NWACC is not requiring the COVID-19 vaccine as a condition for being a student. However, the NWACC Center for Health Professions (“CHP”) has affiliation agreements with health facilities which may require clinical students and instructors to receive the COVID-19 vaccine as a condition of participating in clinicals in their facilities. Most clinical sites where students rotate as part of their clinical rotations ARE presently requiring students and clinical instructors/rotators to be fully vaccinated in order to enter their facilities, absent an exemption granted by the particular site. As part of our affiliation agreements, NWACC is required to meet all clinical site admission requirements in order to send students to these facilities.

This means that students who enter a health professions program will be unable to complete their clinical requirements without going to at least one of the facilities mandating the vaccine. Further, due to the nature of the health profession program, NWACC cannot adjust the location of where clinicals may be performed or exempt students from the College’s clinical requirements. Upon being accepted into a NWACC CHP program, you will be required to upload all clinical documentation to a third-party clinical requirement tracking website. Please note NWACC does not maintain or store these records and will only provide a clinical documentation checklist to clinical sites.

By signing this acknowledgement, you understand that: 1) you will be required, and you agree to comply with requirements imposed by CHP’s health affiliates where student clinicals are held and 2) one such requirement may be the receipt of the COVID-19 vaccine, unless the student is able to obtain an exemption from the site imposing the requirement.

Or you must agree to start your vaccine dose upon acceptance and then be able to provide that documentation to your program based on the affiliate requirements specific to the institution.

NWACC reserves the right to deny admission into a professional program, when the applicant refuses to agree to comply with requirements imposed by the clinical sites.

As of the date of this acknowledgement, the CNA and Dental programs are the only programs that can be completed without completing a clinical in which the COVID-19 vaccine requirement has been imposed by a CHP clinical affiliate. However, if NWACC receives notification that one of the affiliates associated with these programs will mandate the vaccine, students in their respective program will be required to have the vaccine in order to comply with requirements imposed by our health affiliates and complete their clinical experience.

By signing, I _____, have read and understand the statement above and agree to the terms of this acknowledgement.

Date: _____

Signature: _____

Program name: _____

**Northwest Arkansas Community College
Emergency Medical Services
Technical Standards**

Students who wish to pursue a career in Emergency Medical Services must meet the following essential minimal physical, mental and job standards in order to successfully complete the educational activities in the Emergency Medical Services program.

Admission to the NWACC Emergency Medical Services program is conditional on the candidate's ability to satisfy these technical standards, with or without reasonable accommodation. Reasonable accommodations will be made on an individual basis.

Students who have special needs are encouraged to identify themselves to the Program Director and the Disability Resource Center for reasonable accommodations. Reasonable accommodations will be based on current documentation provided to the Disability Resource Center.

The following technical standards and essential skills are functions that must be met with or without reasonable accommodations:

1. Complete the Arkansas State application for Emergency Medical Technician-Paramedic certification including affirmation regarding criminal convictions.
2. Complete an approved State of Arkansas EMT course or its equivalent;
3. Must hold a valid State of Arkansas National Registry EMT or its equivalent;
4. Must be able to communicate effectively via telephone and radio equipment;
5. Ability to lift, carry, and balance up to 100 pounds (200 pounds with assistance) on level ground, uneven terrain and stairs;
6. Be able to effectively receive and interpret oral, written, and diagnostic form instructions in the English language;
7. Have the ability to use good judgment and remain calm in high stress situations;
8. Ability to perform medication calculations under high pressure situations;
9. Ability to knowledgeably operate complex advanced life support equipment under high stress situations;
10. Ability to be unaffected by loud noises and flashing lights;
11. Ability to read English language manuals;
12. Ability to interview patients, their families, and/or bystanders to obtain critical information dealing with mechanism of injury (MOI) or nature of illness (NOI);
13. Ability to document, in writing or computer-based documentation systems, all relevant information in prescribed format in light of legal ramifications of such;
14. Ability to converse, in English, with coworkers, nurses, physicians, and other medical professionals in regard to the status of your patient;
15. Possess good manual dexterity with the ability to perform all tasks related to the highest quality of patient care;
16. Have the physical stamina to stand and walk 12+ hours in a clinical or field setting;
17. Ability to bend, stoop, and crawl on uneven terrain;
18. Ability to withstand varied environmental conditions such as extreme heat, cold, and

moisture;

19. Ability to work with other providers to make appropriate patient care and treatment decisions;

20. Must be physically free of use of non-prescription drugs, illegal drugs, and alcohol;

21. Must demonstrate a professional demeanor and behavior, and must perform all aspects of work in an ethical manner in relation to peers, faculty, staff and patients;

22. Must adhere to the codes of confidentiality;

23. Must conform to appropriate standards of dress, appearance, language and public behavior;

24. Must show respect for individuals of different age, ethical background, religion and/or sexual orientation;

25. The mental capacity to assimilate, analyze, synthesize, integrate concepts and problem solve to formulate assessment and therapeutic judgments and to be able to distinguish deviations from the norm;

26. Sufficient postural and neuromuscular control, sensory function, and coordination to perform appropriate physical examinations using accepted techniques; and accurately, safely and efficiently use equipment and materials during assessment and treatment of patients;

27. Possess sufficient emotional stability to be able to perform duties in life or death situations and in potentially dangerous social situations.

The student must notify the Program Director if there is any change to his/her ability to meet the technical standards while enrolled in the NWACC EMS Program.

I certify that I have read and understand the technical standards listed above, and I believe to the best of my knowledge that I meet each of these standards without accommodation. I understand that if I am unable to meet these standards I will not be admitted into the program at this time.

I, _____, have read and understand the requirements as listed.
(Print name)

Signature _____

Date _____

**Physical Demands – Per Federal Government
Paramedic (EMTP)
079.010**

**Paramedic (EMTP)
079.010**

Job Responsibilities: In emergency medical situations, takes leadership role and assumes responsibility for applying specific knowledge and skills related to basic and advanced life support to patients. Provides advanced life support to patients under supervision of physician and directs lower level EMTs to assist based on their levels of competency within their scope of practice.

Essential Functions: In order to successfully perform the job of an EMTP, the following physical demands are required as defined by the Dictionary of Occupational Titles and Classification of Jobs

Strength Requirements including standing, walking, sitting, lifting, carrying, pushing, pulling, and/ or controls =

Medium Work: Ability to lift, carry and balance up to 125 pounds.

N Not Present

O Occasionally

F Frequently

C Constantly

PHYSICAL DEMANDS

1. Strength

a. Standing 4%

Walking 5%

Sitting 3%

b. Lifting F

Carrying F

Pushing 0

Pulling 0

2. Climbing F

Balancing F

3. Stooping F

Kneeling F

Crouching F

Crawling F

4. Reaching F

Handling F

Fingering F

Feeling F

5. Talking

Activity or condition does not exist

Activity or condition exists up to 1/3 of the time

Activity or condition exists from 1/3 to 2/3 of the time
Activity or Condition exists 2/3 or more of the time

COMMENTS

1a Walking and standing are major components of this job.

Sitting is necessary for transportation to and from the scene of emergency.

5 NWACC EMS-Updated June 2021

1b The Paramedic is required to assist in lifting and carrying injured or sick persons to ambulance and from ambulance into hospital. May be required to engage in pushing and/or pulling to assist other EMS providers to extricate patient pinned beneath vehicle, pinned inside vehicle, in vehicles with electrical hazards.

2 Climbing and balancing may be required to gain access to site of emergency, i.e., stairs, hillsides, ladders, and in safely assisting in transporting patient.

3 Patients are often found injured or sick in locations where Assessment of patient is possible only through the Paramedic's stooping, kneeling, crouching, or crawling.

4 Required for assessing pulse, assessing breathing, blocking nose and checking for ventilation, lifting chin, head or jaw for opening airway, following angle of ribs to determine correct position for hands after each ventilation, compressing sternum, and assisting in lifting of patient, administering medications through intravenous therapy or other means, and handling of advanced life support equipment, such as mirror airway devices. Extension of arms to use hands and fingers to assess vital signs, feeling and touching of patient's skin to assess body warmth, handling limited equipment, and transporting of patient are important aspects of this position. Finger dexterity needed to insert needle, and prepare fluids/medication for administration and to operate equipment.

5 Responding to patients, physicians, and co-workers through hearing is necessary in transmitting patient information and

Ordinary F

Other 0

Hearing

Ordinary F

Conversation

Other F

following directions. May be required to shout for help and additional assistance.

6 Verbally responding to dispatcher's message on phone or radio is necessary for quick, efficient service that can be vital to life in emergency situations. Communication on scene is critical for interviewing patient and in some

Instances, significant others, and in relaying this information in most expedient manner. Sounds of vehicles may alert

Paramedic that additional help is on the way. Other sounds can alert the Paramedic that other persons may be hurt or

injured, i.e., someone thrown behind a bush in a vehicle accident who cannot be seen and whose vehicle may be barely audible.

6. Seeing 7

Acuity, Near F

Acuity, Far F Depth Perception F Accommodation F

Sight is used to drive ambulance to scene of injury or illness, to visually inspect patient and area, to read map, to read small print on medication/prescription containers, to read drug

reference manuals, and to administer treatment.

7. General Education: High school graduation or equivalency is required.

8. Vocational Preparation:

a. College: None

b. Vocational Education Courses: An additional 900-1200 hours of education beyond the 110 required for the Basic EMT.

c. Apprenticeship: None

d. In-plant Training: None

On-the-Job-Training: During course of training, the Paramedic in training status will spend varying amounts of time in supervised clinical work in hospital and field settings.

Performance on Other Jobs: None required; however, training in the military as a medic is seen as beneficial.

9. Experience: None. (Work as an EMT on an ambulance is recommended.)

10. Orientation: None.

11. Licenses, Etc.: Certification as Emergency Medical Technician: Paramedic, ACLS and CPR. Must maintain annual certification through continuing education

12. Relation to Other Jobs and Workers:

Promotion: In some locations, Paramedics may become instructors, dispatchers or administrators. Transfers: None

Supervision Received: Physician

Supervision: Some to lower level Basic EMTs.

13. Machines, Tools, Equipment, and Work Aids: Ambulance, radio/telephone/pager, blood pressure cuff, thermometer, extrication devices, esophageal airway obturator, ventilation mask, spinal boards, intravenous therapy equipment: needles and fluids, anti-shock garments, wheelchairs, and stretchers, EKG machines, defibrillator, visual airway intubation and other complex equipment, and sometimes, a computer for documentation.

14. Materials and Products: Broad range of medications including narcotics, disposable latex gloves, bandages, universal dressings such as gauze pads, tape, blankets, pillows and sheets, oxygen, drugs, and intravenous fluids.

**For additional information on description of tasks and qualifications,
please contact the EMS Program at 479.619.4251**