

Certification Name: Emergency Medical Technician

Designation: EMT

04-Dec-97

Society

National Association of Emergency Medical Technicians
9140 Ward Parkway,
Kansas City, MO 64114-

Phone:

fax:

email:

Major Requirements

Education: HS

Years of Experience: 0

Examination Required: Yes

Continuing Education Required: Yes

Maintenance Required: Yes

Directorates

Chief of Staff

Programs

Chief of Staff



Emergency Medical Technicians

Nature of the Work

Automobile accident injuries, heart attacks, near drownings, unscheduled childbirths, poisonings, and gunshot wounds all demand urgent medical attention. Emergency medical technicians (EMTs) give immediate care and then transport the sick or injured to medical facilities.

Following instructions from a dispatcher, EMTs who usually work in teams of two drive specially equipped emergency vehicles to the scene of emergencies. If necessary, they request additional help from police, fire, or electric company personnel, or they may enlist bystanders to direct traffic or remove debris. They determine the nature and extent of the patient's injuries or illness while also trying to determine whether the patient has epilepsy, diabetes, or other preexisting medical conditions. EMTs then give appropriate emergency care following strict guidelines for which procedures they may perform. All EMTs, including those with basic skills, the EMT-Basic, may open airways, restore breathing, control bleeding, treat for shock, administer oxygen, immobilize fractures, bandage wounds, assist in childbirth, manage emotionally disturbed patients, treat and assist heart attack victims, give initial care to poison and burn victims, and treat patients with anti-shock trousers, which prevent a person's blood pressure from falling too low.

EMT-Intermediates, or EMT-I's, have more advanced training and can perform such additional procedures as administer intravenous fluids; and use defibrillators to give lifesaving shocks to a stopped heart.

EMT-Paramedics provide the most extensive prehospital care. In addition to the procedures already described, paramedics may administer drugs orally and intravenously, interpret EKG's, perform endotracheal intubations, and use monitors and other complex equipment.

Some conditions are simple enough to be handled following general rules and guidelines. More complicated problems can only be carried out under the step-by-step direction of medical personnel with whom the EMTs are in radio contact.

When victims are trapped, as in the case of an automobile accident, cave-in, or building collapse, EMTs free them or provide emergency care while others free them.

When transporting patients to a medical facility, EMTs may use special equipment such as backboards to immobilize them before placing them on stretchers and securing them in the ambulance. While one EMT drives, the other monitors the patient's vital signs and gives additional care as needed. Some EMTs work for hospital trauma centers or jurisdictions which use helicopters to transport critically ill or injured patients.

At a medical facility, EMTs transfer patients to the emergency department, report to the staff their observations and the care they provided, and may help provide emergency treatment.

After each run, EMTs replace used supplies and check equipment. If patients have had a contagious disease, EMTs decontaminate the interior of the ambulance and report cases to the proper authorities.

Most job openings for EMTs will result from people who leave the field.

Working Conditions

EMTs work both indoors and outdoors, in all kinds of weather. Much of their time is spent standing, kneeling, bending, and lifting. They may risk noise-induced hearing loss from ambulance sirens and back injuries from lifting patients.

EMT's may be exposed to diseases such as Hepatitis-B and AIDS, as well as violence from drug overdose victims. The work is not only physically strenuous, but stressful not surprising in a job that involves life-or-death situations. However, many people find the work exciting and challenging.

EMT's employed by fire departments often have about a 50-hour workweek. Those employed by hospitals frequently work between 45 and 58 hours a week and those in private between 48 and 51 hours. Some EMT's, especially those in police and fire departments, are on call for extended periods. Because most emergency services function 24 hours a day, EMT's have irregular working hours that add to job stress.

Employment

In 1992, EMT's held 114,000 jobs. Two-fifths were in private ambulance services, about a third were in municipal fire, police, or rescue squad departments, and a quarter were in hospitals. In addition, there are many volunteer EMT's.

Most paid EMT's work in metropolitan areas. In many smaller cities, towns, and rural areas, there are no paid EMT jobs. All services are provided by volunteers.

Training, Other Qualifications, and Advancement

Formal training is needed to become an EMT. EMT-Basic training is 100 to 120 hours of classroom work plus 10 hours of internship in a hospital emergency room. Training is available in 50 States and the District of Columbia, and is offered by police, fire, and health departments; in hospitals; and as a nondegree course in colleges and universities.

The EMT basic program provides instruction and practice in dealing with bleeding, fractures, airway obstruction, cardiac arrest, and emergency childbirth. Students learn to use and care for common emergency equipment, such as backboards, suction devices, splints, oxygen delivery systems, and stretchers.

EMT-Intermediate training varies from State to State, but includes 35-55 hours of additional instruction in patient assessment as well as the use of esophageal airways, intravenous fluids, and antishock garments. Training programs for EMT-Paramedics generally last between 750 and 2,000 hours. Refresher courses and continuing education are available for EMT's at all levels.

Applicants to an EMT training course generally must be at least 18 years old and have a high school diploma or the equivalent and a driver's license. Recommended high school subjects for prospective EMT's are driver education, health, and science. Training in the Armed Forces as a medic is also good preparation.

In addition to EMT training, EMT's in fire and police departments must be qualified as firefighters or police officers.

Graduates of approved EMT-Basic training programs who pass a written and practical examination administered by the State certifying agency or the National Registry of Emergency Medical Technicians earn the title of Registered EMT-Basic. Prerequisites for taking the EMT-Intermediate examination include registration as an EMT-Basic, required classroom work, and a specified amount of clinical experience and field internship. Registration for EMT-Paramedic by the National Registry of Emergency Medical Technicians or a State emergency medical services agency requires current registration or State certification as an EMT-Basic, completion of an EMT-Paramedic training program and required clinical and field internships as well as passing of a written and practical examination. Although not a general requirement for employment, registration acknowledges an EMT's qualifications and may make higher paying jobs easier to obtain.

All 50 States have some kind of certification procedure. In 29 States and the District of Columbia, registration with the National Registry is required at some or all levels of certification. Other States require their own certification examination or provide the option of taking the National Registry examination.

To maintain their certification, all EMT's must reregister, usually every 2 years. In order to reregister, an individual must

be working as an EMT and meet a continuing education requirement.

EMTs should have emotional stability, good dexterity, agility, physical coordination and be able to lift and carry heavy loads. EMTs need good eyesight (corrective lenses may be used) with accurate color vision.

Advancement beyond the EMT-Paramedic level usually means leaving fieldwork. An EMT-Paramedic can become a supervisor, operations manager, administrative director, or executive director of emergency services. Some EMTs become EMT instructors, firefighters, dispatchers, or police officers, or others move into sales or marketing of emergency medical equipment. Finally, some become EMTs to assess their interest in health care and then decide to return to school and become R.N.'s, physicians, or other health workers.

Job Outlook

Most job openings will occur because of this occupation's substantial replacement needs. Turnover is quite high, reflecting this occupation's stressful working conditions, limited advancement potential, and the modest pay and benefits in the private sector.

Employment of EMTs is expected to grow faster than average for all occupations through the year 2005. Driving the growth will be an expanding population. Also, the number of older people, who are more likely to need emergency services, is increasing rapidly.

Opportunities for EMTs are expected to be excellent in hospitals and private ambulance services, where pay and benefits usually are low. Competition for jobs will be keen in fire, police, and rescue squad departments because of attractive pay and benefits and good job security.

Earnings

Earnings of EMTs depend on the employment setting and geographic location as well as the individual's training and experience. According to a survey conducted by the

Journal of Emergency Medical Services (JEMS), average starting salaries in 1993 were \$20,092 for EMT-Ambulance or Basic, \$19,530 for EMT-Intermediate, and \$24,390 for EMT-Paramedic. EMTs working in fire departments command the highest salaries, as the accompanying table shows.

Table 1. Average annual salaries of emergency medical technicians, by type of employer, 1993

Employer	Paramedic	EMT7I	EMT7-Basic
All employers (mean)	\$28,079	\$22,682	\$22,848
Private ambulance services	25,606	20,060	19,383
Hospitals	24,944	21,088	18,845
Fire departments	34,994	30,914	31,141

SOURCE: Journal of Emergency Medical Services

Those in emergency medical services which are part of fire or police departments receive the same benefits as firefighters or police officers.

Related Occupations

Other workers in occupations that require quick and level-headed reactions to life-or-death situations are police officers, firefighters, air traffic controllers, workers in other health occupations, and members of the Armed Forces.

Sources of Additional Information

Information concerning training courses, registration, and job opportunities for EMTs can be obtained by writing to the

State Emergency Medical Service Director.

General information about EMTs is available from:

National Association of Emergency Medical Technicians, 9140 Ward Pky., Kansas City, MO 64114

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The National Registry of Emergency Medical Technicians

National Registration

Registered EMT-Basic



Written Examination Dates and Times

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The Emergency Medical Technician has earned recognition and status similar to that of other allied health professions. This status was not automatically bestowed. It evolved as EMT's delivered improved patient care because of their training, retraining, commitment and personal sacrifice.

On June 4, 1970 the National Registry of Emergency Medical Technicians was established in response to a recommendation from President Lyndon Johnson's Committee on Highway Safety that a national certification agency be established for EMS. Fully understanding its role as a registration agency which issues certificates of competency. The National Registry provides a mechanism to help assure the protection of the public. NREMT verifies achievement of minimal competencies of EMT's through the establishment and implementation of uniform requirements of EMT training, examination and continuing education.

The National Registry EMT-Basic examination is drafted by a committee of EMS experts in education, medicine and field practice. The draft examination is reviewed by an item-rating committee and extensively field tested. Prior to implementation, the items are reviewed by a standard setting committee which utilizes a psychometric formula to establish a passing criteria for the examination. This process leads to fully standardized, statistically valid and reliable registration department.

From the beginning, the impact of the Registry's EMT-Basic examination designated the importance of training programs which recognize and implement the depth and breadth of instruction in all phases of pre-hospital emergency care. The Registration and examination processes act as viable instruments, measuring the skills and competencies necessary to deliver quality basic life support care.

The National Registry is a not-for-profit, independent, non-governmental agency. For more information on the history of the NREMT and its role in emergency medical services across the nation, the applicant is requested to contact our office.

ENTRY REQUIREMENTS

All individuals applying for EMT-Basic registration must meet the following requirements to be eligible for national registration:

1. Applicant must be 18 years of age or older.
2. Successful complete, within the last two years, a state-approved National Standard EMT-Basic training program, as developed and promulgated by the U.S. Department of Transportation.

Candidates who are not state certified and fail to become registered within two (2) years following EMT-Basic course completion must retake the entire EMT-Basic training program.

If the candidate's initial training is beyond two (2) years and the candidate has maintained state certification, the candidate must complete a current state approved National Standard EMT-Basic refresher training course.

If the candidate's initial training is beyond two (2) years and state certification has not been maintained, the candidate must complete the entire EMT-Basic training program.

3. In states not mandating National Registry EMT-Basic registration, candidates must include official documentation (card or certificate) verifying current state certification at the EMT-Basic level.

4. Candidates are required to successfully complete, within the past twelve months, all sections of a state-approved EMT-Basic practical examination that equals or exceeds the criteria established by the National Registry.

5. Truthfully complete the felony statement on the application and submit the appropriate documentation, if necessary.

5. Submission of current CPR credentials (either American Heart Association or American Red cross). Verification may be in the form of and instructor signature or copies of both sides of a current card affixed to the appropriate spaces on the back of the National Registry EMT-Basic applications.

7. Submission of a completed application attesting tot he above requirements.

8.. A registration fee of ~~\$1300~~ (money order or institutional check), payable to the National Registry of Emergency Medical Technicians, must be submitted with the application. This fee covers the cost of all printed material, examination, postage, data processing, reporting of examination results, and administration.

the Fee will be refunded if an application is not acceptable. The fee will not be refunded if the application is accepted and entered into data processing.

9. Successful complete the above requirements and the National Registry EMT-Basic written examination.

EXPIRATION DATE

Initial expiration dates are established in reference to the date al successful completion of the examination. Individuals initially registered during the first six months of the year will revert tot the beginning of that year for an anniversary date. Those initially registered during the last six months of the year will begin their biennium the first day of the following year. All Subsequent registration periods will be for the full two-year period.

For example:

Individuals successfully completing the examination between the dates of January 1, 1996 and June 30, 1996, will receive an expiration date of March 31, 1998.

Individuals successfully completing the examination between the dates of July 1, 1996 and December 31, 1996, will receive an expiration date of March 31, 19996

LAPSED REGISTRATION

To be reinstated once EMT-Basic national registration has lapsed, the candidate must:

If lapsed within a two year period, successfully complete a state-approved National Standard EMT-Basic Refresher

training course; submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry.

If lapsed beyond a two year period and still currently state certified at the EMT-Basic level, successfully complete a state-approved National Standard EMT-Basic Refresher training course; submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry.

If lapsed beyond a two year period and state certification at the EMT-Basic level has also lapsed, successfully complete another state-approved National Standard EMT-Basic training program, submit a new application and fee; and successfully complete the National Registry EMT-Basic written examination and state-approved practical examination that meets or exceeds the established criteria of the National Registry.

EXAMINATION PROCESS

EMT-BASIC WRITTEN EXAMINATION The written examination, consisting of 150 multiple-choice questions, is based on tasks identified in the EMT-Basic Practice Analysis conducted by the National Registry of Emergency Medical Technicians and the 1994 National Standard EMT-Basic Curriculum. The range of questions in each subtest are as follows:

SUBTEST # OF QUESTIONS Patient Assessment 24-30 Airway Management 24-30 Circulation 22-28 Musculoskeletal, Behavioral 21-17 Neurological and Environmental Children and OB/GYN 19-25 EMS Systems, Ethical, Legal 21-27 Communications, Documentation Safety and Triage / Transportation TOTAL 150

Each candidate must realize an overall minimum score of 70% (105 items correct) to pass the examination. Candidates failing the examination may reapply for subsequent examinations by meeting the current entry requirements and submitting another application and fee. If a candidate fails the written examination, the practical examination remains valid for a 12-month period from the date it was unsuccessfully completed. Candidates are allowed three opportunities to complete the written examination. Candidates applying for the fourth time must submit, at a minimum, official verification (certificate) of successful completion of 24 hours of refresher education which adheres to requirements outlined in section I-A. This refresher must be completed between the third and fourth attempts of the examination. Candidates who fail the examination on the sixth attempt must repeat the entire EMT-Basic training program in order to apply for subsequent examination attempts.

Candidates should allow three to four weeks for reporting of examination results. When results are not received or applications are not returned within six weeks, candidates or coordinators are urged to contact the NREMT.

A copy of the EMT-Basic Practice Analysis is available from the National Registry for a fee of \$5.00. A self-assessment examination to aid students in preparing for the registration examination is available from the National Registry for a fee of \$15.00.

The National Registry reserves the right to review and investigate any written examination that may be in question.

THE PRACTICAL EXAMINATION

Section I of the National Registry EMT-Basic application requires official verification of CPR credentials (either American Heart Association or the American Red Cross). This verification may be in the form of an instructor signature or a copy of the candidate's current BLS card affixed to the appropriate space in Section I of the application.

The practical examination requires the candidate to physically apply the necessary skills of the EMT-Basic. All candidates are required to successfully complete, within a 12-month period prior to sitting for the written examination, all sections of a state-approved EMT-Basic practical examination that meets or exceeds the established criteria of the National Registry.

Section II of the National Registry EMT-Basic application requires the Program Director or the Service Director of Training/Operations to verify, by signature, that the candidate has demonstrated an acceptable level of competency in each of the following skill areas as a result of the training program:

1. Patient Assessment / Management-Trauma 2. Patient Assessment / Management - Medical 3. Cardiac Arrest Management / AED 4. Spinal Immobilization (Seated Patient) 5. Spinal Immobilization (Supine Patient) 6. Bag-Valve-Mask Apneic Patient with a Pulse 7. Long Bone Fracture Immobilization 8. Joint Dislocation Immobilization 9. Traction Splinting 10. Bleeding Control / Shock Management 11. Upper Airway Adjuncts and Suction 12. Mouth to Mask with Supplemental Oxygen 13. Supplemental Oxygen Administration

Section III of the National Registry EMT-Basic application requires state-approved officials to verify, by signature, successful completion of a state-approved practical examination that, as a minimum, evaluates the following skills and meets or exceeds the established criteria of the National Registry.

Station #1 Patient Assessment / Management - Trauma Station #2 Patient Assessment / Management - Medical Station #3 Cardiac Arrest Management / AED Station #4 Spinal Immobilization (Seated or Supine Patient) Station #5 Bag-Valve-Mask Apneic Patient with a Pulse Station #6 Random Skill Station (one of the following Long Bone Immobilization Joint Dislocation Immobilization Traction Splinting Bleeding Control / Shock Management Upper Airway Adjuncts and Suction Mouth to Mask with Supplemental Oxygen Supplemental Oxygen Administration The National Registry reserves the right to review and investigate any practical examination that may be in question.

EXAMINATION ACCOMMODATIONS

The National Registry will offer reasonable and appropriate accommodations for the written component of the examination for those persons with a documented learning disability. The documentation must include a diagnosis of learning disability in the area of reading decoding and/or reading comprehension based upon the results of standardized psychoeducational assessment including an appropriate standardized measure of achievement in reading decoding and/or reading comprehension.

Individuals requesting accommodations for the written component of the examination should contact the National Registry for copies of the Examination Accommodations Policy.

INACTIVE STATUS

An inactive status is designed for National Registered EMTs who are not actively engaged in ambulance service/rescue service or patient health care activity. Inactive status is designed for those registrants who must be inactive for a period of time due to moving, illness, pursuit of education, family responsibilities, etc. The period of inactive status will be limited to two years of what would normally be one registration period. Inactive status will be awarded only to those who have fulfilled refresher, CPR and continuing education requirements. At the end, or prior to the end of the inactive period, the registrant may request a return to EMT-Basic active status by way of official written verification from their employer or supervisor.

Registrants can not request inactive status during the initial registration period.

Registrants who have been granted inactive status must fulfill all reregistration requirements during the inactive period.

DISCIPLINARY POLICY REVOCATION OF CERTIFICATES

NREMT has disciplinary procedures, rights of appeals and due process within its policies. Individuals applying for registration or reregistration who wish to exercise these rights may contact the National Registry for copies of the Disciplinary Procedures.

REREGISTRATION

Reregistration is on a biennial basis (once every two years) upon completion and verification of required continuing education and submission of the reregistration form and fee. All EMT-Basics reregistering will have to meet the full requirements currently in effect.

To renew registration, the applicant must:

1. Complete the official National Registry reregistration and continuing education report form and return it, with the proper documentation and fee, to the Registry office. The National Registry reserves the right to investigate reregistration materials at any time from any registrant. Registrants may be required to re-submit all materials upon written notice form

the NREMT.

2. Be actively working within the emergency ambulance service, rescue service or patient/health care activity.
3. Complete all continuing education requirements in section 1A, 1B, and II prior to his/her expiration date.

Reregistration report forms are mailed in November prior to the expiration date. Reregistration forms must be submitted to the Registry office no later than March 31 of the following year.

Reregistration Requirements (Contact us for specific requirements re: Reregistration Requirements)

National Registry National Headquarters

EMT questions or requests for information [e-mail nremtpddofc@attmail.com](mailto:nremtpddofc@attmail.com)

Paramedic questions or requests for information [e-mail nremtrlwofc@attmail.com](mailto:nremtrlwofc@attmail.com)

Management & Marketing Inc. (206) 363-7577 in the Seattle area, (808) 528-1110 in Honolulu area, or 1-800-363-7570. Fax (206) 363-0502 (If your are interested in more information Fax or e-mail your detailed requests)

[e-mail larks@halcyon.com](mailto:larks@halcyon.com)

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