



**VERMONT DEPARTMENT OF HEALTH
EMERGENCY MEDICAL SERVICES OFFICE
Post Office Box 70, 108 Cherry Street
Burlington, Vermont 05402-0070
1-800-244-0911 (in VT) or 1-802-863-7310**



**EMERGENCY MEDICAL TECHNICIAN
LICENSE RENEWAL APPLICATION**

This form is to be used by all persons applying to renew their EMT license. If you are an Advanced-EMT, please use forms designated for those levels. Please keep a copy of this application for your service's credentialing records.

INSTRUCTIONS

Renewing with a National Registry of EMTs Certification:

If you are renewing your Vermont EMS license with a National Registry of EMTs certification, please include a photocopy of your NREMT card with this application. Complete pages 2 & 5. You do not need to complete pages 3 or 4.

Renewing your Vermont EMT license with documentation of continuing education*:

The Vermont EMT continued competency requirements are identical to those of the National Registry of EMTs. If you have never held a National Registry certification at the EMT-B or EMT level, you must meet all continuing education requirements for NR-EMT recertification as described on pages 3 and 4 of this application (40 total hours).

***NOTE: If you once held National Registry certification and let it lapse, you must regain it to renew your Vermont license. If you have questions about whether you ever held National Registry, please call the EMS Office for assistance.**

Page 2 (Mandatory):

In the top section of this page please provide your demographic and service affiliation information. To be eligible for a Vermont EMS license, you must have an affiliation with a licensed EMS agency or be affiliated with a medical facility that requires you to hold this level of EMS licensure. A current email address is required for access to free online continuing education.

In the middle section of this page, please indicate whether you are renewing your license through documentation of continued competency or with a National Registry of EMTs certification.

Pages 3 and 4 (only required if you do not have a current NREMT certification)

Note: If submitting continued competency education information, your Training Officer must attest with a signature on **Page 5** that you completed all required education and skills verifications documented on this application. **If you are your agency's Training Officer, your District Training Coordinator must sign your application (all other applications can only be signed by the Training Officer.)**

Page 5 (Mandatory):

Please answer the seven questions and then print and sign your name. Please also fill in the application completion date and your date of birth. Your Head of Service must attest with a signature that you are affiliated with the licensed agency indicated on this application. **The only person authorized to sign as your Head of Service is the person listed on your service's license application.**

Continued Competency Requirements - Emergency Medical Technician

If you do not hold a current NR-EMT certification, please document your competency education below.

National Continued Competency Requirements (Up to 7 hours distributive)	Hours	Date(s)
Airway, Respiration and Ventilation - 1.5 Hours		
Ventilation	1	
Oxygenation	0.5	
Cardiovascular - 6 Hours		
Post-Resuscitative Care	0.5	
Stroke	1	
Cardiac Arrest	2	
Ventricular Assist Devices	0.5	
Pediatric Cardiac Arrest	2	
Trauma - 1.5 Hours		
Central Nervous System Injury	0.5	
Hemorrhage Control	0.5	
Trauma Triage	0.5	
Operations - 5 Hours		
At-Risk Populations	0.5	
Pediatric Transport	0.5	
Ambulance Safety	0.5	
Field Triage - Disasters/MCIs	0.5	
EMS Provider Hygiene, Safety & Vaccinations	0.5	
EMS Culture of Safety	0.5	
Crew Resource Management	1	
Evidence-Based Guidelines	0.5	
Role of Research	0.5	
Medical - 6 Hours		
Special Healthcare Needs	1.5	
OB Emergencies	0.5	
Toxicological Emergencies - Opioids	0.5	
Endocrine - Diabetes	1	
Immunological Diseases	0.5	
Infectious Diseases	0.5	
Psychiatric & Behavioral Emergencies	0.5	
Pain Management	0.5	
Neurological Emergencies - Seizures	0.5	

State/Local Continued Competency Requirements (Up to 7 hrs distributive)	Hours	Date(s)
Stroke Protocol	0.5	
Pediatrics	1	
Documentation	0.5	
Patient Refusals	0.5	
EMS Provider Wellness	0.5	
EMS Culture of Safety	1	
Spinal Injury Management	1	
Cardiac Arrest Management (VTACH-R program)	1	
EMS in the Warm Zone	0.5	
Anaphylaxis (includes Ready, Check, Inject)	0.5	
Naloxone	0.5	
Airway Management	1	
District/Agency Specific Topics - 1.5 Hours (Fill in topics below)	Hours	Dates

Individual Continued Competency Requirements - 10 Hours in topics of your choosing (Up to 10 hours distributive)	Hours	Dates

Skills Verification	Date	Method*
Patient Assessment/Management - Trauma		
Patient Assessment/Management - Medical		
<u>Ventilatory Management Skills/Knowledge</u>		
Simple Adjuncts		
Supplemental Oxygen Delivery		
Bag Valve Mask - one-rescuer / two-rescuer		
Cardiac Arrest Management - AED		
Hemorrhage Control & Splinting Procedures		
Spinal Immobilization - Seated and Supine		
OB/Gynecologic Skills/Knowledge		
Radio Communications		
Report Writing & Documentation		

*Methods: QA/QI, Direct Observation (DO), Other

