

# Washington State Approved 30-Hour EMT Refresher Course Schedule



## Introduction:

The Washington State Department of Health EMS and Trauma Section, in consultation with the state EMS Education and Training Program Director Workgroup, has updated the guidance and EMT course schedule for refresher courses to reflect current Washington State and NREMT recertification standards. This document will replace previously used EMT refresher documents approved in Washington State. Direct questions to [HSQA.EMS@doh.wa.gov](mailto:HSQA.EMS@doh.wa.gov) or 360-236-2842.

## Guidance:

- This 30-hour EMT refresher course will meet the education requirements for Washington State continuing medical education (CME) recertification requirements [WAC 246-976-162](#) for EMTs who do not meet ongoing training and evaluation program (OTEP) requirements listed in [WAC 246-976-163](#).
- This 30-hour refresher course will meet the national and state content education requirements for [National Registry of Emergency Medical Technicians \(NREMT\) recertification via](#) the National Continued Competency Program (NCCP) model (it does not include ten (10) required individual NCCP content hours).
- This 30-hour refresher course will meet the education requirements for state-approved refresher courses required for [lapsed NREMT certifications](#).
- When using this template for EMTs who need retraining based on [WAC 246-976-141](#), state and local content hours may be modified to meet the hourly requirement listed in WAC.
- Local and state content should be taken from the current [National Model EMS Clinical Guidelines](#), [National EMS Education Standards](#), [NREMT NCCP EMT Training Guide](#), [Washington State Approved Procedures and Skills for Certified EMS Providers](#), nationally recognized training programs, and local state and medical program director-approved protocols.
- All skills must be performed in person and evaluated by a state-approved EMS evaluator.
- Pediatric topics are to be included in airway-respiratory-ventilation, cardiovascular, medical-pharmacology, trauma, and operations topics.
- EMTs with supraglottic airway (SGA) and intravenous (IV) therapy endorsements must meet the requirements listed in [WAC 246-976-162](#).
- Distributive education may be used for up to 14 hours of education (limit of seven (7) hours for NREMT NCCP national content).
- Distributive education is defined as instruction where students and instructor do not interact in real time.
- If this course is taken for part of the education requirements for Washington EMT recertification per WAC 246-976-162, CME method, providers will still need to pass the Washington cognitive assessment examination through NREMT/Pearson Vue.
- This document will be updated at a minimum of every four years and as needed to align with the NREMT NCCP training guide, with the next update in 2020 or as needed to align with other national or Washington State requirements.

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Date	Clock Time	Minimum Required Hours	<b>National Content Topic</b> (20 hours, seven of which may be distributive) <ul style="list-style-type: none"> <li>• Identifies skills to be performed</li> </ul>
		2	<b>Airway-Respiratory-Ventilation (AVR):</b> e.g. to include basic airway management, oxygen therapy and adjuncts, oxygenation and ventilation, pulse oximetry, end-tidal CO2 (ETCO2), and suctioning. <ul style="list-style-type: none"> <li>• Continuous positive airway pressure (CPAP) if included in local protocols.</li> <li>• SGA if included in local protocols.</li> <li>• Bag valve mask (BVM) ventilation of an apneic patient</li> <li>• Oxygen administration by non-rebreather mask</li> </ul>
		6	<b>Cardiovascular:</b> e.g. to include acute coronary syndrome (ACS)-chest pain, aspirin, nitroglycerin, 12 lead acquisition, cardiac arrest, automated external defibrillators (AED), ventricular assist devices, stroke, pediatric cardiac arrest, post-resuscitation care, Washington State triage tool for cardiac and stroke. <ul style="list-style-type: none"> <li>• Cardiac arrest management and AED</li> <li>• Mechanical CPR device if included in local protocols.</li> </ul>
		6	<b>Medical/pharmacology:</b> e.g. to include special healthcare needs, infectious disease, pain management, psychiatric and behavioral emergencies, toxicological emergencies (opioids), neurological emergencies, endocrine emergencies (diabetes), immunological emergencies, obstetrics, medical patient assessment, geriatrics fundamental knowledge of the aging process and related illnesses, pharmacology-Narcan IN, epinephrine, metered dose inhaler (Albuterol), oral glucose, and nerve agent antidote. <ul style="list-style-type: none"> <li>• Patient assessment/management - medical</li> </ul>
		4	<b>Trauma:</b> e.g. to include central nervous system injury, hemorrhage control (direct and tourniquet), trauma patient assessment, spinal immobilization, Washington State trauma triage tool. <ul style="list-style-type: none"> <li>• Bleeding control and shock management</li> <li>• Patient assessment and management - trauma</li> <li>• Joint immobilization</li> <li>• Long bone immobilization</li> <li>• Spinal immobilization (supine patient)</li> <li>• Spinal immobilization (seated patient)</li> </ul>
		5	<b>Operations:</b> e.g. to include at-risk populations, ambulance safety, field triage, disasters / multi-casualty incidents (MCI), EMS provider hygiene, safety, and vaccinations, EMS culture of safety, crew resource management, EMS research, evidence based guidelines, med-legal, patient movement.

- NREMT determines national content topics.
- Specific information related to the instruction of these topics should be taken from the National Continued Competency Program document, which is on the NREMT website. Which provides instructor preparations, lesson objectives, and lesson content.
- National content includes 20 hours of education; NREMT allows seven of those hours to be distributive.
- All skills must be performed in person and evaluated by an approved EMS evaluator.

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Date	Clock Time	Minimum Required Hours	State and Local Content Topics (10 hours, seven of which may be distributive)
		<p>This content may be taught separately or worked into the above topic hours to meet the total 30-hour course requirement.</p>	<p><b>State and local content:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Patient Advocacy                             <ul style="list-style-type: none"> <li>○ Reporting obligations</li> <li>○ Provider orders for life-sustaining treatment (POLST)</li> <li>○ People with disabilities or functional needs</li> </ul> </li> <li><input type="checkbox"/> Provider Advocacy                             <ul style="list-style-type: none"> <li>○ Suicide awareness, mental and physical wellbeing, and workplace safety</li> </ul> </li> <li><input type="checkbox"/> Law and Regulations                             <ul style="list-style-type: none"> <li>○ Scope of practice and regulatory requirements</li> </ul> </li> <li><input type="checkbox"/> Protocols                             <ul style="list-style-type: none"> <li>○ State triage tools: stroke, cardiac, trauma</li> <li>○ County MPD patient care protocols (protocols)</li> <li>○ County operating procedures (COPs)</li> <li>○ Regional patient care procedures (PCPs)</li> </ul> </li> <li><input type="checkbox"/> Disaster Preparedness                             <ul style="list-style-type: none"> <li>○ Incident command system (ICS) and disaster preparedness</li> </ul> </li> <li><input type="checkbox"/> Documentation                             <ul style="list-style-type: none"> <li>○ Clinical patient care: data quality and documentation standards, key performance indicators (KPI), and research</li> </ul> </li> </ul>
		<p>Minimum skills to be included during the refresher course.</p>	<p>Skills lab and verification to include:</p> <ul style="list-style-type: none"> <li>● BVM ventilation of an apneic patient</li> <li>● Oxygen administration by non-rebreather mask</li> <li>● Patient assessment-management - medical</li> <li>● Patient assessment-management - trauma</li> <li>● Cardiac arrest management-AED</li> <li>● Bleeding control-shock management</li> <li>● Long bone immobilization</li> <li>● Joint immobilization</li> <li>● Spinal immobilization (supine patient)</li> <li>● Spinal immobilization (seated patient)</li> </ul>
<ul style="list-style-type: none"> <li>● Washington State Department of Health in conjunction with state MPDs determined state and local content topics.</li> <li>● Guidance on these topics should be taken from the Washington State Department of Health Guideline for State and Local Topic Areas for NREMT NCCP Recertification (DOH 530-206 December 2017).</li> <li>● The document is located <a href="#">here</a> on the DOH website.</li> <li>● State and local content includes 10 hours of education; NREMT allows 7 of those hours to be distributive.</li> </ul>			
<ul style="list-style-type: none"> <li>● Individual content of 10-hours is required for NREMT recertification; this does not include 10 hours of required individual NCCP content.</li> </ul>			