

# **South Branch Emergency Medical Services Training Center**

## **SBES TC EMT COURSE #25 – 2022 Spring EMT CLASS**

### **APPLICANT REGISTRATION PACKAGE**

**COMPLETED REGISTRATION PACKETS ARE DUE NO LATER THAN JANUARY 10**

- Course Dates:** January 24, 2022- May 21, 2022 Students must attend all dates. Full schedule is attached
- Course Times:** Monday and Thursday from 18:30- 22:00, Saturdays from 08:30-16:30
- Course Location:** South Branch Emergency Services, 48 Old Highway 22,2<sup>nd</sup> floor, Clinton NJ 08809
- Course Fee:** Payment due with registration, payable to SBES- Includes the cost of the text book, online access, 2 uniform shirts and photo ID.

- **Hunterdon County EMS Agency member:**
  - Direct Pay: \$1,500 (Includes \$395 Book Fee – Must be Agency Check)
- **Hunterdon County Resident non-affiliated\*:**
  - Direct Pay \$1,700 (Includes \$395 Book Fee)
- **Out-of-County\*:**
  - Direct Pay \$1,895 (Includes \$395 Book Fee)

#### **Refund Policy:**

1. When the Training Center cancels a course, 100% refund will be made.
2. When a student wishes to withdraw from a course, a refund must be requested in writing. It must be received by the Training Center within 2 weeks after the start of the class. NO refunds will be given to students who have attended 1 or more class sessions.
3. Failure to attend class does NOT constitute an official withdrawal. To receive a refund, the student must send a written request in accordance with #2 above.
4. Textbooks: The cost of the textbook, listed above as “book fee”, is the responsibility of the student and is NOT included in the tuition. All text books are Non-Refundable once distributed to the student, all sales are final.

**THIS COURSE DELIVERY WILL HAVE LIMITED SEATS**  
**\*Open to Hunterdon County EMS Agencies Only Until January 1, 2022**

# *South Branch Emergency Medical Services Training Center*

## **To Register For This Course:**

- Review this full package of information
- Review course schedule and confirm availability for all course sessions
- Review attached functional position for the EMT
- Complete all requested items (see Application Checklist)
- Return COMPLETED APPLICATION in person, by the date shown above.
- **A SPOT WILL NOT BE RESERVED FOR YOU UNTIL ALL ITEMS HAVE BEEN COMPLETED AND SUBMITTED ALONG WITH PAYMENT**

This Applicant Registration Package must be returned in person with payment to:

Training Officer  
South Branch Emergency Services  
48 Old Highway 22, Clinton NJ  
Monday through Friday

# South Branch Emergency Medical Services Training Center

South Branch Emergency Services Training Center • Station 1-Clinton

Mondays and Thursdays 18:30-22:00 Saturday- 8:30 – 16:30

Text - AAOS Emergency Care & Transportation of the Sick & Injured, 12 Edition

SBES Class #: 25

Students must be present for all sessions listed.

Session	Date	Day	Location	Start	Activities
<b>UNIT 1</b>		<b>QTR. 1</b>		<b>PREPARATORY</b>	
1	1/24/22	Mon	Classroom	18:30	Orientation HW Read: Chapters 1, 2, 3, 5, 6, 7, 8, & 9 Lectures: Chapters 1, 2, 3, 5, 6, 7, 8, & 9 Videos: Watch all BSI / PPE Skills and Lifting & Moving Skills Complete Medical Abbreviations Graphic Organizer & Upload to LMS
2	2/5/22	Sat	Classroom	8:30	Safety Skills: Glove Removal, Handwashing, PPE, Fit Testing, Team Building
3	2/5/22	Sat	Classroom	1:00	Lifting & Moving Skills HW Complete Unit 1 Pretest (optional) Study for Unit 1 Exam Read: Chapter 10 Pgs. 338-365 Complete GCS Graphic Organizer, Upload to LMS Videos: Watch Scene Size-Up, Scene Size-Up MOI, Scene Size-Up NOI, & Primary Survey Skills
4	2/7/22	Mon	Classroom	18:30	Instructor Led Review: Unit 1 Unit 1 Exam
<b>UNIT 2</b>		<b>QTR. 1</b>		<b>ASSESSMENT &amp; AIRWAY</b>	
5	2/10/22	Thurs	Classroom	18:30	Assessment Skills 1: Pt. Assessment Primary-Medical & Pt. Assessment Primary-Trauma, Stop the Bleed HW Read: Chapter 11 Lecture: Chapter 11 Videos: Watch Airway Management, OPA, NPA, O2 Devices, O2 Tank, Non-Rebreather, Nasal Cannula, BVM, Pocket Mask, Venturi, Humidified O2, CPAP, and ATV Videos
6	2/14/22	Mon	Classroom	18:30	Airway Skills 1: OPA, NPA, O2 Devices, O2 Tank, Non-Rebreather, Nasal Cannula, BVM, and Pocket Mask HW Read: Chapter 10 Pgs. 366-414 Lectures: Chapter 10
7	2/17/22	Thur	Classroom	18:30	Airway Skills 2: Venturi, Humidified O2, CPAP, and ATV
8	2/19/22	Sat	Classroom	8:30	Airway Skills Scenarios
9	2/19/22	Sat	Classroom	1:00	Psychomotor Exam: Airway Context Station HW Complete Assessment Graphic Organizer, Upload to LMS Videos: Watch Medical Pt. Assessment, Trauma Pt. Assessment, & Bleeding Control Skills
10	2/21/22	Mon	Classroom	18:30	Instructor Led Review: Chapter 10 and 11
11	2/24/22	Thur.	Classroom	18:30	Assessment Skills 2: Rapid Scan, History, Secondary Assessment, & Vital Signs Assign Vital Signs HW, Upload to LMS by Medical Skills 1

# South Branch Emergency Medical Services Training Center

					ER Time Briefing and ER Sign-Up HW Read: Chapters 4 and 38 Lectures: Chapters 4 and 38 Complete Refusal Graphic Organizer, Upload to LMS
Session	Date	Day	Location	Start	Activities
12	2/28/22	Mon	Classroom	18:30	Assessment Skills 3: Communication & Documentation
13	3/03/22	Thurs	Classroom	18:30	Instructor Led Review: Chapters 4 and 38 HW Complete Unit 2 Pretest (optional) Study for Unit 2 Exam
14	3/05/22	Sat	Classroom	8:30	Assessment Skills 4: Putting It All Together
15	3/05/22	Sat	Classroom	1:00	Psychomotor Exam: Medical & Trauma Assessment Unit 2 Written Exam Vital Signs HW Due HW Read: Chapters 12, 13, 14, 15, 16, & 17 Lectures: Chapters 12, 13, 14, 15, 16, & 17 Complete Shock Types Graphic Organizer, upload to LMS Videos: Watch Resuscitation Skills, Medical Assessment with Interventions, Nitroglycerin Administration, Aspirin Administration, and Albuterol Administration
<b>UNIT 3</b> <span style="float: right;"><b>QTR. 2</b></span> <span style="float: right;"><b>MEDICAL 1</b></span>					
16	3/7/22	Mon	Classroom	18:30	CPR Skills: LUCAS & BLS Provider CPR
17	3/10/22	Thurs	Classroom	18:30	Medical Skills 1: Nitro, ASA, MDI, CPAP, Nebulizer HW Complete Medication Graphic Organizer, Upload to LMS Complete Unit 3 Pretest (optional) Study for Unit 3 Exam
18	3/14/22	Mon	Classroom	18:30	Instructor Led Review: Chapters 14, 16, 17
19	3/17/22	Thur.	Classroom	18:30	Medical Skills 1 Scenarios HW Study for Unit 3 Exam Read: Chapters 20, 21, 22 Lectures: Chapters 20, 21, 22 Videos: Watch Epinephrine Administration, Naloxone Administration, and Glucose Administration Skills
20	3/19/22	Sat	Classroom	8:30	Psychomotor Exam: Medical Skills 1 Unit 3 Written Exam
<b>UNIT 4</b> <span style="float: right;"><b>QTR. 2</b></span> <span style="float: right;"><b>MEDICAL 2</b></span>					
21	3/19/22	Sat	Classroom	1:00	Medical Skills 2: Stroke, Epinephrine Auto Injector, Narcan, Glucose, De-Escalation & Restraint HW Read: Chapters 18, 19, 23 Lectures: Chapter 18, 19, 23
22	3/21/22	Mon	Classroom	18:30	Medical Skills 2 Scenarios
23	3/24/22	Thur.	Classroom	18:30	Instructor Led Review: Unit 4 HW Complete Unit 4 Pretest (optional) Study for Unit 4 Exam Read: Chapters 25, 26, 27, 28, 29 Videos: Bleeding Control & Vest Style Extrication Device Skills Review Backboard from Lifting & Moving Videos too.

# South Branch Emergency Medical Services Training Center

Session	Date	Day	Location	Start	Activities
24	3/28/22	Mon	Classroom	18:30	Psychomotor Exam: Medical Skills 2 Unit 4 Written Exam Environmental Presentation Briefing
<b>UNIT 5 QTR. 3 TRAUMA 1</b>					
25	3/31/22	Thurs	Classroom	18:30	Trauma Skills 1: Bleeding Control, Bandaging, KED, Backboard HW Lectures: Chapters 25, 26, 27, 28, 29 Review Chapter 13 and your Shock Types Graphic Organizer, shock questions will be on trauma exams
26	4/02/22	Sat	Classroom	8:30	Trauma Skills 1 Scenarios
27	4/02/22	Sat	Classroom	1:00	Instructor Led Review: Unit 5 HW Complete Unit 5 Pretest (optional) Study for Unit 5 Exam Read: Chapters 30, 31, 32 Lectures: Chapters 30, 31, 32 Videos: Watch Long Bone Immobilization Skill
28	4/04/22	Mon	Classroom	18:30	Psychomotor Exam: Trauma Skills 1-Bandaging/Backboard Unit 5 Written Exam Apply for SID # from fema.gov
<b>UNIT 6 QTR. 3 TRAUMA 2</b>					
29	4/07/22	Thurs	Classroom	18:30	Trauma Skills 2: Chest Seal & Ventilation Support, Traction Splint, Board Splinting HW Read: Chapter 33 Lecture: Chapter 33 Complete Trauma Guidelines Graphic Organizer, Upload to LMS Make sure environmental presentation is ready
30	04/11/22	Mon	Classroom	18:30	Trauma Skills 2 Scenarios
31	4/14/22	Thurs	Classroom	18:30	Instructor Led Review: Unit 6
32	4/18/22	Mon	Classroom	18:30	Flipped Classroom: Environmental Presentations Skills Review (if time remains) HW Complete Unit 6 Pretest (optional) Study for Unit 6 Exam
33	4/21/22	Thurs	Classroom	18:30	Psychomotor Exam: Trauma Skills 2 Unit 6 Written Exam HW Read: Chapters 24, 34, 35, 36, and 37 Lectures: Chapters 24, 34, 35, 36, and 37 Complete Pediatric Assessment Graphic Organizer, Upload to LMS Complete Childbirth Graphic Organizer, Upload to LMS
<b>UNIT 7 QTR. 3 SPECIAL POPULATIONS</b>					
34	4/25/22	Mon	Classroom	18:30	Special Pops Skills: Childbirth, Pedi Board/Mate, Infant Car Seat, Infant CPR, Securing the Kyphosis & Hip Injuries
35	4/28/22	Thur.	Classroom	18:30	Instructor Led Review: Unit 7 HW Read Human Trafficking Presentation & Take Quiz Complete Developmental Disabilities Online Course Upload Trafficking & Disabilities Certificates to LMS Complete Unit 7 Pretest (optional) Study for Unit 7 Exam

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Session	Date	Day	Location	Start	Activities
36	4/30/22	Sat	Classroom	8:30	Special Pops Scenarios
37	4/30/22	Sat	Classroom	1:00	Psychomotor Exam: Special Populations Unit 7 Exam HW Read: Chapters 39, 40, 41 Lectures: Chapters 39, 40, 41 Recommendation: Start completing FEMA courses IS 100, 700, 907, & Hazmat Awareness
<b>UNIT 8 QTR. 4 OPERATIONS</b>					
38	5/2/22	Mon	Classroom	18:30	Operations 1: Triage Tag Presentation & Activity, MCI Tabletop. Extrication Walkthrough (pending supply availability)
39	5/5/22	Thurs	Classroom	18:30	Operations 2: Activity
40	5/9/22	Mon	Home	18:30	Complete FEMA courses IS 100, 700, 907, & HazMat Awareness, <u>must</u> be uploaded to the LMS no later than the day of the Unit 8 Written Exam. HW Complete Unit 8 Pretest (optional) Study for Unit 8 Exam
					<i>This is not an instructor-led session, students complete online courses independently.</i>
41	5/12/22	Thurs	Classroom	18:30	Instructor Led Review: Unit 8 Unit 8 Written Exam HW Study for Final Exam
<b>UNIT 9 QTR. 4 FINALS</b>					
42	5/14/22	Sat	Classroom	08:30	Final Skills Review: Resuscitation Final Student Audit, *Hospital Time Records must be uploaded to LMS prior to this date to successfully finish class!
43	5/14/22	Sat	Classroom	1:00	Final Skills Review: Medical HW Study for Final Exam
44	5/16/22	Mon	Classroom	18:30	Instructor Led Review - Finals Q & A Students bring questions for review HW Study for Final Exam
45	5/19/22	Thurs	Classroom	18:30	Final Skills Review: Trauma
46	5/21/22	Sat	Classroom	8:30	Final Written Exam & Final Psychomotor Exam 1
47	5/21/22	Sat	Classroom	1:00	Final Psychomotor Exams 2 & 3

# ***South Branch Emergency Services Training Center***

## **THIS IS A COLLEGE LEVEL COURSE**

Before registering, please be aware of the following requirements of this course:

All students MUST:

- Have easy access to a computer for home study work. Expect to complete approximately 10-14 hours a week online independent study, as well as online quizzes and tests. A laptop computer is preferable for class.
- Be able to read, write, communicate and interpret instructions in the English Language. (All text materials are written at the 10<sup>th</sup> grade level).
- Be in good physical condition and be able to lift.
- Participate in all lecture and practical sessions. Students must attend all sessions in their entirety. Any absences must be made up prior to the state final certification exam. Due to the course layout, makeup sessions will be extremely difficult to schedule.
- You MUST purchase your book from SBES (purchase price \$395) which gives you access to the online system.
- Bring a stethoscope and a watch with a second hand to ALL classroom sessions
- Once received, students must wear supplied uniforms & IDs as outlined in the SOG's.
- Have a notebook and pencil/pen at all times

# ***South Branch Emergency Services Training Center***

## **FUNCTIONAL POSITION DESCRIPTION FOR THE EMERGENCY MEDICAL TECHNICIAN**

### **INTRODUCTION**

The following is a position description for the Emergency Medical Technician (EMT). This document identifies the minimum competencies of the EMT.

### **COMPETENCIES**

The EMT must demonstrate competency in handling emergencies utilizing basic life support equipment in accordance with the objectives in the National Highway Traffic Safety Administration EMS Education Standards for EMT and other objectives identified by the New Jersey Department of Health, to include having the ability to:

1. Verbally communicate in person, via telephone, telecommunications and other electronic devices using the English language.
2. Hear and interpret spoken information from co-workers, patients, physicians and dispatchers and sounds common to the emergency scene.
3. Lift, carry and balance a minimum of 125 pounds equally distributed (250 pounds with assistance), a height of 33 inches, a distance of 10 feet.
4. Read and comprehend written materials under stressful conditions.
5. Verbally interview patient, family members, bystanders and hears and interprets their responses.
6. Document physically in writing all relevant information in prescribed format.
7. Demonstrate manual dexterity and fine motor skills, with ability to perform all tasks related to quality patient care.
8. Bend, stoop, crawl and walk on uneven surfaces. Meet minimum vision requirements to operate a motor vehicle within the state. Function in varied environmental conditions such as lite or darkened work areas, extreme heat, cold and moisture.

**SBES EMS TRAINING CENTER – 48 Old Highway 22 – PO Box 5265 – Clinton NJ 08809**

Phone: (908) 735-4012 – email: [learn@sbes365.org](mailto:learn@sbes365.org) – website: [www.sbes365.org/training](http://www.sbes365.org/training)



# **South Branch Emergency Services Training Center**

## **SBES EMS Training Center – EMT Training Hybrid Program**

### **APPLICANT REGISTRATION CHECKLIST**

Use this checklist to make sure you have completed and attached the following paperwork to make sure that you have a successful submission. A spot will not be reserved for you in class until all documents and payment are completed:

<b>COMPLETED</b>	<b>Item</b>
	APPLICANT REGISTRATION FORM
	STUDENT CONTRACT
	MINOR STUDENT GUIDELINES & CONSENT (For students under the age of 18)
	HEPATITIS B VACCINATION SELECTION
	ACKNOWLEDGEMENT OF RECEIPT, NJ OEMS REGULATIONS
	Copy of Healthcare Provider CPR Card or Proof of enrollment in class.
	Documented Learning Disability
	Payment Check (Hunterdon County EMS affiliated students must have check from their sending agency, not a personal check)

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# South Branch Emergency Services Training Center

## SBES EMS Training Center – EMT Training Hybrid Program

### APPLICANT REGISTRATION FORM

2022 Spring EMT #25

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email: \_\_\_\_\_

Home Phone # (\_\_\_\_)\_\_\_\_-\_\_\_\_ Cell Phone # (\_\_\_\_)\_\_\_\_-\_\_\_\_

Polo Size (circle one): S M L XL 2X 3X 4X

Emergency Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone # (\_\_\_\_)\_\_\_\_-\_\_\_\_ Alternate Phone # (\_\_\_\_)\_\_\_\_-\_\_\_\_

Medical Conditions: \_\_\_\_\_

Medications: \_\_\_\_\_

Allergies: \_\_\_\_\_

Are you on a rescue squad? Y N If so, what one? \_\_\_\_\_

Please tell us if you have any first aid experience (use back of more room is needed):

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# South Branch Emergency Services Training Center

## SBES EMS Training Center – EMT Training Hybrid Program

### STUDENT CONTRACT

AS A STUDENT ENROLLED IN THE EMERGENCY MEDICAL TECHNICIAN TRAINING PROGRAM AT THE CLINTON FIRST AID AND RESCUE EMERGENCY SERVICES, I AM OBLIGATED TO FOLLOW ALL THE RULES AND REGULATIONS OUTLINED ON THIS FORM:

- I AM IN RECEIPT OF THE N.J.A.C. 8:40A-5.8.
- I AM IN RECEIPT OF THE N.J.A.C. 8:40A-5.3.
- I AM IN RECEIPT OF CLINTON FIRST AID AND RESCUE EMERGENCY SERVICES TRAINING CENTER'S STANDARD OPERATING GUIDELINES.
- I ACKNOWLEDGE THAT I HAVE REVIEWED AND UNDERSTAND THE REFUND POLICY LISTED ON THIS APPLICATION
- I AM IN RECEIPT AND MEET THE CRITERIA FOR THE FUNCTIONAL POSITION OF THE EMT.
- I ACKNOWLEDGE THAT I HAVE NOT BEEN ARRESTED IN ANY STATE/ US JURISDICTION OR THAT I HAVE BEEN CLEARED BY THE NJ OFFICE OF EMERGENCY MEDICAL SERVICES TO CONTINUE MY EDUCATION AS AN EMT.
- I ACKNOWLEDGE THAT THE MANAGEMENT OF THIS EMT PROGRAM MAY UTILIZE MY EMAIL ADDRESS TO SEND IMPORTANT UPDATES AND INFORMATION, AND THAT IT IS MY RESPONSIBILITY TO MAKE SURE I MAINTAIN AND CHECK THE EMAIL I PROVIDED FREQUENTLY.

NAME (PRINT): \_\_\_\_\_

HOME ADDRESS (PRINT): \_\_\_\_\_

CITY (PRINT): \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL (PRINT): \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ SECONDARY PHONE: \_\_\_\_\_

GUARDIAN'S NAME, if applicable (PRINT): \_\_\_\_\_

GUARDIAN'S PHONE NUMBER: \_\_\_\_\_

***I HAVE RECEIVED, READ, UNDERSTAND AND AGREE TO THE ABOVE LISTED DOCUMENTS. ALL MY INFORMATION IS CORRECT.***

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

GUARDIAN'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# **South Branch Emergency Services Training Center**

## **SBES EMS Training Center – EMT Training Hybrid Program**

**To: Parents/Guardian of MINOR Students attending the SBES EMT Program**

While we at the SBES Training Center welcome their ambition to become Emergency Medical Technicians, for their protection, the following guidelines need to be strictly adhered to throughout the duration of the class. We ask that you please make sure you review and initial each of these items with the minor student attending our program

Parent Initial	Student Initial	
		No minor student attending this class will be permitted to leave the premises during classroom hours, including lectures, breaks or lunch, except as noted below: <ul style="list-style-type: none"> <li><input type="checkbox"/> Minor Student may leave SBES facility during breaks or meals</li> <li><input type="checkbox"/> Minor Student may leave SBES facility during breaks or meals, but only when accompanied by: _____</li> </ul>
		No minor student will be allowed to smoke or use other tobacco products, including electronic smoking devices, chewing tobacco, etc., while anywhere on the property of SBES or any of our class locations.
		All students, per New Jersey Department of Health Guidelines, must be on time for class. The minor student is responsible for making all arraignments to travel to and from class sessions.
		The student is required to wear the appropriate classroom attire, as outlined in the student’s Standard Operating Guideline, to all classroom and practical sessions.
		SBES TC has a zero-tolerance policy for harassment, violence or carrying of devices considered to be weapons. Minor students may be immediately dismissed by the instructor if any concerns regarding these areas arise, and the safety of the minor student, other students, faculty or the community is at risk.

By signing this form, the minor student and parent/guardian agree to the rules set forth above. The student agrees to speak to a course instructor if a situation occurs where the student may need to deviate from the rules. A course administrator will be advised, and if the situation cannot be resolved, it may be found necessary to call the parent/guardian regarding the matter. Both parent/guardian and the student understand that any deviation from these rules may result in dismissal from the class and forfeiture of any fees privately paid by the student or parents/guardians.

Student Name: \_\_\_\_\_ Student Signature: \_\_\_\_\_  
 Parent/Guardian: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Date Signed: \_\_\_ / \_\_\_ / \_\_\_ Contact Telephone #(s): \_\_\_\_\_  
 Contact Email(s): \_\_\_\_\_

# South Branch Emergency Services Training Center

## SBES EMS Training Center – EMT Training Hybrid Program

### HEPATITIS B VACCINE

You must select one of the following options (Select one):

- I have previously received my Hepatitis B Vaccination, and completed information below; or
- I have NOT received my Hepatitis B Vaccination, but do require it; or
- I Waive my rights to receive a Hepatitis B Vaccination, and completed waiver below

### ***HEPATITIS B VACCINE IMMUNICATION RECORD***

Student Name: \_\_\_\_\_

Date of first dose: \_\_\_\_\_

Date of second dose: \_\_\_\_\_

Date of third dose: \_\_\_\_\_

Antibody test results - pre-vaccine (optional): \_\_\_\_\_

Antibody test results - post-vaccine: \_\_\_\_\_

Time interval since last injection: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Parent/Guardian Signature, if minor: \_\_\_\_\_

### ***DECLINATION STATEMENT***

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me (Must contact sponsoring organization for approval).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ***South Branch Emergency Services Training Center***

## **SBES EMS Training Center – EMT Training Hybrid Program**

### **New Jersey Department of Health § 8:40A-5.3 Attendance**

Each student shall attend all required program sessions. Attendance shall be recorded on an official session roster. Official session roster forms are available from OEMS upon request. All session rosters shall be delivered to OEMS at least ten (10) calendar days prior to the North Atlantic Certification Examination. No student shall be credited with attendance at a session who:

- Fails to attend the entire session;
- Arrives more than fifteen (15) minutes late for the session;
- Has been expelled from the session for disruptive behavior;
- Leaves prior to the completion of the session;
- Attends the session, but is unwilling to participate in the required activities and instruction for that session; or
- Fails to sign the attendance sheet.

Subject to the provisions of (c) below, any student missing a session shall make the session up within 30 days of the course completion date prior to becoming eligible to test for the National Registry of Emergency Medical Technicians. The program coordinator shall be responsible for assisting the student with locating a suitable make-up session. The options available to a student are:

- Attendance at the same session in another SBES EMT training program;
- Any student missing two (3) consecutive sessions may be expelled from the EMT training program and may be required to apply for, and participate in, an entirely new EMT training program.

- CONTINUED –

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# **South Branch Emergency Services Training Center**

## **SBES EMS Training Center –EMT Training Hybrid Program**

### **New Jersey Department of Health § 8:40A-5.8 Program Curriculum**

- (a) The Department hereby adopts and incorporates by reference the program curriculum as the curriculum for all EMT-Basic training programs conducted in New Jersey.
1. A person must successfully complete each of the program curriculum's seven training modules, and shall not be permitted to move on to the next consecutive module until he or she has successfully passed the examination for the previous module. A person who fails a module examination shall be permitted to re-test following remediation. A person who fails two consecutive examinations for the same module shall be automatically expelled from the EMT- Basic training program and shall be required to apply for, and participate in, an entirely new EMT-Basic training program.
- (b) No training agency shall offer an EMT-Basic training program that provides instruction in material that is beyond the permitted scope of practice for an EMT-Basic, as defined in this chapter, the program curriculum, or any applicable law, rules and/or regulation.
- (c) Each lecture portion of an EMT-Basic training program shall comply with the corresponding lesson plan listed in the program curriculum.
- (d) Each practical skills session shall comply with the standard of care as defined in the program curriculum or any applicable law, rule and/or regulation.
- (e) Each EMT-Basic training program shall include a 10-hour clinical experience in the emergency department of an acute care hospital or another area related to pre-hospital care that has been approved by the Department.
1. The clinical and/or field experiences shall be limited to observation of procedures and patients, and the application of clinical skills that are taught as part of the program curriculum. The clinical experience shall occur under the direct supervision of a Field Preceptor designated by the supervisor of the emergency department staff or other area included as part of the clinical experience.
  2. No person shall serve as a field preceptor unless that person is medically qualified to operate at least to the level of an EMT-Basic.
  3. Students participating in the clinical experience shall neither be required nor allowed to perform any skill or procedure that is outside the scope of practice for an EMT-Basic, nor shall a student be allowed to replace required emergency department staff.
  4. The program coordinator or emergency department staff may permit the student to spend up to five hours of the required clinical experience as an observer on a MICU, subject to the restrictions set forth in (e) 1 and 3 above.
- (f) The EMT-B Statewide Faculty shall assist the Department in the implementation of the EMT-Basic training program curriculum and the oversight of the instructional plan.
- (g) Training in the utilization of AEDs shall be delivered as part of the EMT-Basic and EMT-Basic Refresher Programs and shall be in accordance with the EMT-Basic training program curriculum.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

I acknowledge receipt of and review of the above requirements.