

**Emergency Medical Technician (EMT)
Initial Course Registration Process
September 9 – December 18, 2024: Section 48979**

Registration Steps for CEWD EMT class: EMS-4200-48979

Step 1- Gather these documents:

1. High School Diploma or GED
 - a. If taking the reading comprehension, bring copy of results (CASAS Reading Exam score of 249 or higher). Please contact The Learning Center at 910-755-7334 in order to schedule an appointment.
2. Copy of valid Driver's License (must be 18 years of age prior to November 1, 2024, per contracted clinical and field site requirements). Must have valid driver's license by November 22, 2024, for the driving component (copy of valid license is required).
3. If your public safety agency is covering the Insurance and Supply fees you must have a signed letter stating that, to include the amount, on their *official agency letterhead*.

Step 2- Bring the above documents and method of payment (see fee schedule below) to the **Admission's Office** located at BCC Main Campus, Building A, located at 50 College Road, Bolivia, NC 28422. You will complete the registration form at this time.

Step 3- Begin gathering your immunization records (listed page 2), schedule physical exam (last page) and purchase required textbook package. These are not required to register.

Monies due at time of registration is \$267.50

Registration Fee	\$180.00 (unless fee waived under NCCCS waiver)
Insurance Fee	\$57.50
Supply Fee	\$30.00

Other items and fees associated with class (not required at registration)

Textbook Package	\$316 - \$450 (varies based on electronic or printed package, and where purchased). Textbook- Emergency Care and Transportation of the Sick and Injured Advantage, 12 th Edition, with FISDAP testing. Available at the BCC Bookstore, or via the optional discounted order links listed on the next page.
AHA BLS Manual	\$17.50 (must be current edition. Can be borrowed or used).
Complio for Clinical	\$142.00 – includes criminal background check (felony convictions or pending misdemeanors not allowed; except minor traffic violations), drug screening and access to online portal. We will discuss purchasing during class.
BCC Clinical Polo Shirt	\$33.00 –we will discuss purchasing during class.
Clinical Registration Fee	\$125 – due during Clinical registration on October 28, 2024 .
<u>Total for Program:</u>	<u>\$995.50 – \$1,200.00</u> (depending on textbook preference)

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***Other required items (costs vary by student needs and medical provider):**

- a. Physical screening performed by physician attesting student is fit for EMT duties. (**DUE by October 1, 2024**).
- b. Uniform pant, belt and boots (will be discussed first day of class)
- c. Immunizations/Vaccinations (**DUE by October 1, 2024**). Several of these are childhood immunizations which may be found through your physician, the county health department, or your parent or guardian. If you cannot locate these records, you can take a simple blood test, called a titer test, which checks for antibodies for many of these required items.
 - i. Current Influenza (flu) Vaccination (required October - March)
 - ii. Two (2) Measles, Mumps, Rubella (MMR) vaccinations or positive antibody titer
 - iii. History of Chicken Pox (documentation required) or 2 Varicella immunizations
 - iv. TB skin test (PPD). This is a **two-step process**, requiring **two separate TB skin tests performed and read within 7-21 days of each other**. TB screening is due every 12 months. Contact your physician or county health department to have this accomplished.
 - v. Tetanus vaccination within the last 10 years (must remain current during the EMS course)
 - vi. Three (3) Hepatitis B vaccinations or a signed declination statement.
 - vii. Effective June 2023- Novant Health suspended the requirement for a completed COVID-19 series, so that is no longer a current requirement.

Exemption requests for vaccinations can be submitted directly to Novant Health via this link:

<https://care.novanthealth.org/s/exemption-request-submission>

The student is responsible for completing this request by October 1, 2024. Brunswick community College has no input on the evaluation or decision of these requests.

Textbook Order Links:

DIGITAL (no physical book):

<http://www.jblearning.com/cart/Default.aspx?bc=29038-7&ref=psg&coupon=BRUNSCC>

HARDCOVER physical book with digital content:

<http://www.jblearning.com/cart/Default.aspx?bc=29037-0&ref=psg&coupon=BRUNSCC>

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Functional Job Analysis/Characteristics and Expectations

The National Highway and Traffic Safety Administration has a Functional Job Analysis for all levels of EMS providers. These list the minimum expectations for all levels of EMS provider.

<https://www.ems.gov/resources/search/?category=education#sort=date>

Mental Health and Wellness

Prehospital healthcare is a service industry type of profession. We help others in their time of need, which is very rewarding yet also very stressful.

Pride and ownership for your profession while helping others in their time of need are amazing experiences. With this in mind, maintaining a healthy balance related to your mental and physical health are extremely important.

Find constructive and healthy hobbies that you enjoy, eat reasonably well, stay active, and always make some healthy time for you.

For any questions, please contact:

Chip Munna, EMS Program Director
munnaj@brunswickcc.edu

910.755.7387

Per NCOEMS Rule, students have 90 days from completion date of the course to make their first attempt at the North Carolina State EMT Exam.

"The Brunswick Community College Paramedic program holds a Letter of Review, which is NOT a CAAHEP accreditation status, but is a status granted by the Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions (CoAEMSP) signifying that a program seeking initial accreditation has demonstrated sufficient compliance with the accreditation standards through the Letter of Review Self Study Report (LSSR) and other documentation. However, it is NOT a guarantee of eventual accreditation."

**Emergency Medical Technician
(EMT) Initial Course
Schedule**

EMS-4200-48979

September 9 - December 18, 2024

September						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

December						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

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Class Meets at:
Brunswick Community College
50 College Road
Bolivia, NC 28422
Building B, Room 129

Dates subject to change

Class Meeting Dates

Monday-Thursday classes meet from 6:00 - 10:00 PM
Saturday-Sunday classes meet from 9:00 - 5:00 PM (1-hour lunch)
Weekly online coursework is also required
The four 12-hour clinical/field shifts are scheduled separately

Must be 18 years of age prior to November 1, 2024
Valid Driver's License required by November 22, 2024

Brunswick Community College
www.brunswickcc.edu/ems-courses

For more information, contact:
Chip Munna, EMS Program Director
910-755-7383
munnaj@brunswickcc.edu



HISTORY & PHYSICAL CERTIFICATION FORM FOR EMS STUDENT JOB FUNCTIONS

The North Carolina Community College System and other national standards require that Emergency Medical Services (EMS) students have a History and Physical completed by a Healthcare Provider (HCP) certifying that they are physically and emotionally able to perform the duties of a health professional in providing safe care to patients. In addition, the student is required to provide proof of immunity to certain diseases, and complete screening for tuberculosis. The student has a list of these requirements should he/she require your assistance in completing them.

To the HCP: Please use your office forms to complete the H&P. BCC does not require a form for our files. We only require that this page be completed, stamped, and returned to us. The student has a list of EMS job functions to share with you.

Please complete the following:

Student (patient) _____ DOB: _____

I have examined the above named patient on this date, _____, and based on my assessment of this student's physical, mental, and emotional health he/she appears:

ABLE to participate in the activities of an EMS student in the clinical setting.

NOT ABLE to participate in the activities of an EMS student in the clinical setting

If no, please explain _____

_____/_____/_____
Signature of MD/NP/PA Date

Name/Stamp Phone

Office Address (Street, City, State, Zip)

To be completed by the Student:

I understand that in certain situations I may be required to provide a copy of my History & Physical to a clinical affiliate partner at their request, per the clinical and field contracts. An example would be a review of the institution by an accrediting or oversight organization (i.e. NCOEMS, CoAEMSP, CAAHEP, OSHA, etc.). I also understand, and agree to maintain my health during my enrollment in the EMS program, and to seek assistance when needed, knowing that a failure to do so may compromise the health and safety of the patients in my care.

Signature _____ Date ____/____/____

Print Name _____