

Welcome!!!!!! PLEASE READ THIS PACKET CAREFULLY AND IN ITS ENTIRETY!!

The time allowed for registration and enrollment is 10 business days from the delivery date the Registration Link email.

All registration steps must be complete within the allowed time frame. If they are not, registration will be cancelled and a refund processed per our policy. Per policy, the application fee portion will not be refunded.

New students whose background checks are still processing after 10 days and have submitted all other registration steps, will be exempt from this policy.

New students who have only submitted a background check and have not completed the other steps are subject to this policy.

Once you have successfully completed all enrollment steps, you will be enrolled in the PERCOMOnline, Inc. EMT program. We are very pleased to have you in our course, and we sincerely hope that we can help you successfully achieve your goals.

This program is an entry level course to introduce advanced emergency care. This course meets and exceeds the requirements for EMT training for National Registry to test at the EMT or EMT level as well as Texas Department of State Health Services. The curriculum is based on the National Emergency Medical Education Standards. There may be components of this program that are over and above the designated “scope of practice” for your agency, state, or country. It is up to you to research the exact level of practice that will be expected from you in your response environment after you achieve certification. However, you will be held to all standards set in this program as part of your course requirements to receive a course completion certificate.

To be placed into the course, you must first fill out all appropriate forms and paperwork in this packet in .pdf or scan them into .pdf documents and upload it to this enrollment page in the appropriate designated location. You can use Adobe Acrobat DC or other free .pdf readers online that allow you to create digital signatures if you choose.

Once method of payment has been secured and all paperwork and supporting documents are marked received and complete, and we receive your criminal background check results with

no “hits”, you will receive an e-mail with your user name and password to enter the course and begin the program. You also must agree to the Terms and Conditions policy linked on this Enrollment Page so please read it carefully before clicking the mandatory checkbox verifying you have read it.

To gain access to the course, you must follow the instructions in your course access email. Be sure to look carefully at the webpage after you sign on for announcements or other opportunities for learning that may be added while you are taking this course. There is a School Announcements Archives section as well as Student Forums and a Newsfeed for communication purposes associated with your course. Look closely under ALL links in the coursework section of the site as well as those to the sides of your coursework to familiarize yourself with the location of all needed documents, announcements, and other items you will need to complete the program.

The site is in a constant state of revision and upgrades, so be sure to watch for these exciting additions.

Once you enter the course, be sure to start at the top with the very first link and work your way down in the program in order. You **MUST** read everything to be sure that you complete all course requirements.

All course levels are required to complete didactic through passing final exam, skills practice and testing, and then clinical and field rotations. Be sure to read all the information posted inside the course and under the links to the side to ensure you know the process. All skills require specific deadlines for RSVP purposes for you to be able to attend and complete a skills session. Read all documents carefully so you know when you will be allowed to RSVP for skills and in what order you must complete skills. Be sure to send in your clinical paperwork and documents before you are to complete skills testing so that you can be promptly cleared to begin clinical and field rotations. If you wait to send in your paperwork, there **WILL** be delays in you being allowed to schedule rotations. Be aware that many sites require **AT LEAST 30** days’ notice and you can’t schedule until you have been cleared and receive your uniform shirt, ID tag, tablet PC (if requested), acceptance into the Clinical and Field Rotations class in platinumplanner.com and instructions.

While our website lists a “preferred” textbook for your course, you may purchase any current textbook(s). However, the links on our website are associated with a package code that will also include access to the EMT portion of emstesting.com with Platinum Planner. (It is also

recommended that you gain access to multiple textbooks and online resources to be able to adequately answer questions in the Research Exams with the BEST answers to the questions.)

Skills videos and skills sheets are also provided for you to study and review prior to attending your required “EMT Exit Session.” These items are located in the lesson section of the course online. Many of the skills videos (different versions) to help you familiarize and prepare are available at online searchable sites. Be sure to watch videos carefully multiple times and memorize all related skills sheets prior to attending the Practice Session. You MUST be prepared when you arrive at the session to do hands-on facilitated practice on all equipment, perform as a team in patient assessment practice, and adequately perform each skill at the completion of the three-day session for skills testing purposes. If you arrive unprepared at your scheduled Exit Session, instructors reserve the right to ask you to leave and to sign up for a later session. If this occurs, you will be required to pay an extra rescheduling fee to reschedule. One on one skills sessions are optional based on instructor availability. However, there is a cost per session to pay if the student group is below the established minimum for a session to make (typically 3). One on one sessions with only one student will require that the student brings his/her own helper/victim or he/she will be required to bring \$100 cash per session to the site to pay a site provided victim directly for services.

This course is self-paced. However, all students are required to check by logging into the site at least once a week. This is to meet the mandatory attendance requirement. Failure to log in weekly could lead you to being dropped from the program for non-participation. Please review the Student Manual regarding the attendance policy. This manual is available under the Resource links inside your course access.

Students are also required to attend a minimum of two of the Chat Room Sessions with the Instructor, which will be typically provided each week. (Chat room schedules are posted on the Chat Room Calendar but are typically on Monday evenings.) Watch the Calendar, Newsfeed and Forums for posts with changes, links and passwords to access the rooms, etc. This session is scheduled for one hour, and it will be an opportunity to interact in a real time environment with your instructor and for some scenario-based learning. If you do not attend and participate in two of these sessions, you will not be cleared for Final Exam, will not be allowed to complete the course and will not receive a course completion certificate.

There are deadlines you are expected to meet to complete this EMT Program. The overall course deadline date will be 6 months from the date of receipt of the course access email. You are expected to complete all online work through Final Exam in less than 3 months. Once you have taken and passed the Final Exam, you should RSVP for your preferred EMT Exit Session session and immediately send in all clinical paperwork

requirements so that you can schedule your rotations soon after the skills session. You have the remaining time left of the 6 months designated for the Program to complete the skills session and all rotations.

If you cannot complete within the designated overall deadline time frames above, you WILL be charged \$100 per month plus processing fees for extensions if the are approved. You should plan accordingly. To be able to meet these deadlines, you should plan on spending a minimum of 15 hours per week doing the didactic coursework. Some students who move more slowly during academic processes should plan on spending more time per week if needed to stay on top of the coursework and finish within the designated didactic deadlines. (Remember, you can work faster and finish the entire program BEFORE the designated course deadlines.) You should work with and communicate with your instructor regularly to ensure you are cleared to schedule your skills sessions, qualifying exams, and rotations in a timely manner and not get caught in a waiting pattern due to lack of planning on your part.

Your instructor's name and contact information is made available in your course access email. You can also contact him/her inside the course platform through the available messaging system, Forum or by email. Use the Student Chat Room as well to communicate with fellow students, establish "study halls", etc. Working together is allowed as long as what you submit is your OWN work. **We routinely run assignments through plagiarism checkers and cheating is grounds for dismissal from the program and reporting to the state licensing agency, which could cost you being allowed to be certified by the state or NREMT. It is required by law that Texas EMS educators report instances of cheating to Texas Department of State Health Services.**

REMEMBER!!!! Grading is NOT done for your course every day. Exams in emstesting.com grade automatically and post grades automatically. Homework submissions are graded usually within 2 weeks of submission. If there are any delays over and above that, you will be notified in the Forum Announcements in your. You should continue your coursework while waiting on homework assignment submissions to be graded. If you do not receive feedback and a grade within 2 weeks of submission, you should email or message your instructor to check on its status. Sometimes, assignments are simply not received even though you submitted it due to internet issues, server issues, or email issues. Sometimes assignments simply get lost in incoming submission overload. So, check with your instructor. All grades should post inside the gradebook in emstesting.com, even for your homework, chat rooms, etc.

Also watch the Events Calendar after you log in to your course for all dates that are applicable or important to you such as skills session dates and their associated RSVP deadlines, school

holidays and vacation dates, etc. NOTE: IT IS IMPERATIVE THAT YOU REVIEW THE SCHOOL EVENTS CALENDAR AND PLOT YOUR PLANNED COURSE AHEAD OF TIME FOR COMPLETION OF DIDACTIC WORK. Skills sessions typically go in “cycles” and if you don’t plan ahead, you may have to wait to start skills sessions until another available cycle begins or you may have to request and pay for one on one skills sessions. Planning ahead is a critical characteristic of the good prehospital professional.

Relax and enjoy the course. We want you to succeed and hope to assist you in that endeavor. Be sure to e-mail or message any questions or come to the chat room and ask away. 😊 We are honored to have you in our program and look forward to meeting you soon.

ORIENTATION INFORMATION

You will have access to the required items and documents for clinical enrollment under the appropriate link inside your coursework location on the site. You should work on completing these forms and submit them through the designated system or route before you complete skills testing. **It is BEST if you gather all the documents and submit them at one time.**

The 10-panel drug screen, however, must be completed within 30 days of starting rotations. Other items (such as the Hepatitis B vaccination series) will take time and you should start them NOW to be allowed to sign up for your rotations. Some clinical sites require titers to prove sero-conversion, not just the shot records. If your chosen clinical site requires titers, you must complete them as well or select a different site. If you are planning to rotate through a program with whom PERCOM holds a Cooperative Clinical Agreement, they may have other or extra requirements and paperwork that you will also have to complete.

A minimum list to expect is below. You **MUST** initial every item below to verify that you understand and have received this information to be accepted into the program.

_____ A complete Hepatitis B immunization series

(This is a series of 3 immunizations that will take you up to 6 months to complete, so if you have not had this series, you should start it now. You may contact your physician or your local health department to receive these shots. Check prices – the health department may be significantly less expensive. Check your childhood shot record to see if you received this series already. That shot record would be all the proof you need. We cannot guarantee placement in any clinical or field site

unless you have completed the series or produce a positive titer showing immunity. If you have had the series, you will need to produce the shot record as proof or have a Hepatitis B titer greater than 10 milli– International Units per milliliter (mIU/mL) of surface antibody. You can have your blood drawn for this test at your doctor’s office.)

_____ Tetanus Shot

_____ Chicken Pox (varicella zoster virus) vaccine or proof of having contracted the disease.

_____ Prior to patient contact, students born on or after January 1957, must show acceptable evidence of:

1. vaccination of two doses of measles-containing vaccine administered since January 1, 1968;
 2. Two dose of rubella vaccine;
 3. Two dose of mumps vaccine;
- (Most commonly referred to as MMR. If you do not have evidence that this requirement has been met, you can receive the necessary vaccinations at your local health department or your doctor’s office.)

_____ TB skin test(must be within 6 months of starting clinical rotations) or, if you have had a past positive reading on this test, a chest X ray showing that you are clear of disease

_____ 10 or 15 panel urine drug screen through our designated vendor (may accept employer or military screens if verified)

_____ Seasonal flu vaccine

_____ Conjugate Meningitis vaccine

_____ National Criminal History check that shows all convictions and deferred adjudications as well as Sex Offender Database and the OIG/GSA (Office of Inspector General search for people barred from working in

healthcare facilities) through our designated vendor. (MAY accept employer or military paperwork if it meets all requirements)

(This is now done during enrollment.)

Clinical uniforms, stethoscope, blood pressure cuff, nametag, and other items are necessary. PERCOM supplies one PERCOM uniform shirt, nametag, and access to a tablet PC. The student must supply all other items. (Each Cooperative Clinical program will have its own requirements and you will be required to purchase items to meet those requirements. PERCOM will not purchase these items for you.) Some clinical or field sites also require other items such as N95 masks and appropriate certification showing completion of N95 training, other masks, gloves, shoe covers, etc. If these are required for you to rotate at a site, you will be required to complete the process on your own and purchase any of those items. PERCOM will not purchase them for you or provide outside training. If you cannot do this, you will need to select another site. Check with the Clinical Coordinator to ensure you purchase the correct items through the correct sources.

All of these items may cost money that is over and above the tuition you paid to complete the didactic portion of the EMT, AEMT or EMT program as well as tuition for your clinical portion of the course. There is no set price for any of these items, they vary with provider and school requirements.



PERCOMOnline, Inc.

EMERGENCY MEDICAL SERVICE PROFESSIONS

STUDENT AGREEMENT

I, the undersigned, a student in the Emergency Medical Service Academy through PERCOM, for and in consideration of the education and training I will receive from PERCOMOnline, Inc. (hereinafter referred to as PERCOM), its faculty and staff, in consideration of my acceptance into the program, and for other consideration to be received by me, receipt of which is hereby acknowledged, do hereby **promise and agree as follows by initialing each item and signing below. I understand I MUST initial each item and sign to be accepted into the program.**

____ 1. I understand that I must complete a criminal background check as part of my enrollment process. If my criminal background check reveals that I have convictions or deferred adjudications for felonies, theft, alcohol or drug charges, murder, attempted murder, rape, assault, battery, child endangerment, other crimes against the person, or any other conviction or deferred adjudication that could be perceived as a potential threat to PERCOM's faculty, staff, fellow students, clinical or field sites or their patients, clinical or field sites, or Cooperative Programs, enrollment will be halted and monies paid will be refunded minus the fees for the criminal background check, emstesting.com access, and other fees for administering or managing the enrollment as outlined in the Refund Policy. If the student is still accepted, PERCOM does not guarantee that clinical or field sites will not deny entry for rotations based on any item that shows on the criminal background check. In the event that clinical or field sites still refuse entry, PERCOM will not refund any portion of tuition or other monies paid to PERCOM.

____ 2. Refund Policy – I understand that from seven days of the course access date, I may request and receive a full refund minus a \$ 250.00 application fee. From the seventh day following the assigned course access date to the fourteenth day a refund of 50% may be requested. Following the last hour on the fourteenth day I am no longer eligible for a refund of any money paid to PERCOM. If I have not completed all enrollment steps as required within seven days of my payment to PERCOM, the course access date will be considered to be my initial payment date.

___3. The following are incorporated into this document by reference for all purposes, and they shall become a part of this agreement:

- The Course Syllabus
- PERCOM Emergency Medical Service Professions Program Student Handbook
- PERCOM Infection Control and Body Substance Isolation Manual
- PERCOM Clinical/Internship Manual
- Course Schedule

I understand I must locate and read all portions of these documents once I am enrolled. I agree and promise to comply with all rules, regulations and requirements contained in the said documents, and with any additional rules as communicated to me by my instructors or the coordinators during the course. I understand that I am responsible for knowing and following the rules of all external experience (clinical or internship) providers where I may have rotations during the course, including the wearing of the prescribed uniform at all times during clinical or internship experiences.

___4. I understand and agree that I can be dropped from any course with a failing grade for violation of any rule or requirement contained in the **referenced documents**.

___5. I understand and agree to the following:

- * that the profession of Emergency Medical Technician is dangerous.
- * that I may contract a contagious disease, possibly a fatal one, through contact with patients.
- * that it is mandatory that I practice infection control and body substance isolation techniques that have been explained to me and are outlined in the Infection Control and Body Substance Isolation Manual.
- * that I may be involved in a motor vehicle accident either as a member of a crew responding to or from an emergency call, as a student observer; at the scene of an emergency, or otherwise, and that I may be seriously injured or killed.
- * that emergency calls are made to areas where crimes have been committed or may be in the process of being committed when I arrive there, and that I may be the victim of criminal activity.

*** that the emergency medical service profession requires the provider to come into contact with patients from every walk of life. The medical professional must treat each patient professionally and without regard to age, nationality, gender, sexual preference, physical and/or mental disability, health status, race, religion, creed, color, marital status, place of residence, membership or activity in any organization, or socio-economic level, and no student shall discriminate against any patient for the aforesaid reasons or for any other reason.**

Discrimination against any patient for any reason will not be tolerated and may be grounds for termination from the program.

____ 6. I agree that I will review and maintain the policies set forth for minimizing exposure to body fluids in the Infectious Disease and Body Substance Isolation manual as well as follow standard universal precautions as outlined by the Centers for Disease Control. In the clinical or EMS rotation setting, I also agree to abide by all infectious disease exposure guidelines and agree that I may be required to complete N95 Fit Testing training and/or provide my own masks, gloves, face shields, or other protective gear at my expense. I agree that in the event of any occurrence in which I do not fully understand how to proceed with patient care with regard to protection of self and co-workers from exposure to infection, I will seek the advice of my preceptor or other person in charge of my clinical or internship experience before proceeding to render such care. I hereby agree that in the event I am exposed or possibly exposed to an infectious disease in the course of my internship, clinical experience, or laboratory experience, I will immediately report such exposure to my preceptor or instructor (or directly to the Clinical Coordinator - Infection Control Officer for PERCOM) and follow the procedures set forth in the Infectious Disease and Body Substance Isolation Manual and those respective to the clinical or field EMS site where I am rotating. **All fees incurred for medical care or treatment or testing will be my responsibility. By enrolling I agree that I am required to hold a current medical health insurance policy prior to scheduling clinical or field rotations and must place any or all claims for this or any other injury incurred during lab or rotations settings with my personal insurance and any outstanding fees or co-payments or co-shares are my responsibility. If my insurance lapses, all fees for medical care or treatment or testing for this or any other injury I may incur in lab or rotations are my financial responsibility and not that of PERCOM or any of its staff, faculty, administration, Medical Director, Board of Directors, affiliated skills sites or instructors, sponsors, or affiliated clinical or field sites in any way.**

____ 7. Knowing all the above facts and with a thorough understanding of the risks involved in the training I am about to participate in, I hereby declare that I am willing to assume all risks involved with my training and that I do hereby assume all such risks, whatever they may be, and that if I become unwilling to assume all risks involved in my course of study, I will immediately inform my instructor and coordinator of such unwillingness and will immediately withdraw from the course.

____ 8. Further, I recognize that being under the influence of alcohol and/or drugs while in class or during any clinical or internship experience is inconsistent with the learning experience and my performance as a health care provider. Therefore, I specifically agree to be tested for alcohol and/or drugs if I am asked to do so by an instructor or the coordinator who believes that I may be under the influence of alcohol and/or drugs either during class or during any clinical or internship rotation. I agree that if I refuse such testing, **which shall be at my own expense**, and carried out at the place determined by my Instructor, Coordinator, Program Director or Medical Director. I may be dropped from the course as a “FAIL”. I agree that if it is determined that I am under the influence of alcohol and/or drugs that I may either be required to receive counseling or be dropped from the program with a failing grade. I also understand that this will be reported to the state licensing organization(s) as required by law.

____ 9. Furthermore, I understand that I will both directly and indirectly come in contact with patient protected health information (PHI) which is to be held in the strictest confidence, even when I am no longer a student in the program. Federal and state law prohibits the deliberate or inadvertent sharing of PHI with anyone other than those who have the legal right to know. Even my clinical paperwork, tablet PC, or other

mobile device being used to collect patient data is considered confidential as it contains dates of service and patient health information. I must be very careful to maintain complete control of my electronic device and forms at all times, only allowing designated preceptors, instructors, coordinators, or medical directors to view or possess the materials held therein. **At no time is it acceptable to share PHI with others than those designated above.**

____ 10. I understand that I will have the opportunity to borrow a tablet PC from PERCOM for use during the clinical and field rotations segment of my course. I also may be allowed to use computers at affiliated schools, clinical or field sites, or affiliated skills sites. When using computers at schools, clinical sites, or field internship sites, I agree that I will not add any software to any computer. I will not give out or authorize anyone to use their personal name, login name, or password. I will not intentionally write, produce, generate, copy, propagate, or attempt to introduce any computer code designed to self-replicate, damage, or otherwise hinder the performance of any computers, memory, file system, or software. I will not intentionally damage the system, damage information not belonging to them, misuse system sources, or allow others to do so. **I will return the tablet PC and all accessories in good condition and in the original box as per the Tablet PC agreement, or if the tablet PC is lost in mailing it back and I have not provided the designated insurance through the postal service, I will be charged a fee per the agreement. If I do not pay the fee, my course completion certificate and clearance with NREMT will be withheld until such time as all outstanding fees are paid and my account is financially cleared with PERCOM.**

If I choose to access email on either the PERCOM or other affiliates school, sites, instructors, or other computers associated with or with which I am given access as a student at PERCOM. I am aware that emails are not private and will be subject to review at any time at these locations. I also agree that is not acceptable to send or receive E-mails that contain harassing, obscene, pornographic, discriminatory, lewd or lascivious material. I agree and understand that I am not allowed to store or transmit any information that is in violation of U.S. Federal law or Texas State law.

By enrolling you agree that Internet access with the PERCOM tablet PC or computers or other devices made available at clinical or field sites or other lab sites is to PERCOM's website or other related websites ONLY and is at the discretion PERCOM and/or the site. Internet access shall be limited to use for lab, skills or clinical data entries, access to coursework through PERCOM's designated website or associated websites (emstesting.com, platinumplanner.com). You agree that it is not acceptable to access any site that contains harassing, obscene, pornographic, discriminatory, lewd or lascivious material on either the PERCOM computers or any computer owned or provided by an affiliate, skills site, sponsor, instructor or any other computer associated with or with which you are given access as a student at PERCOM.

____ 11. I hereby grant to PERCOM, its officers, agents, employees, licensees and assigns (collectively, "Released Entities"), unlimited permission to use, exploit, adapt, modify, reproduce, distribute, and display, in any form now known or later developed, the material(s) listed below ("Materials"), throughout the world, by incorporating them into publications, catalogues, brochures, books, magazines, photo exhibits, motion picture films, videotapes, Internet web pages, or other media of whatsoever nature.

I hereby release and agree to indemnify, defend, and save harmless PERCOM, its officers, agents, employees, licensees and assigns, from any and all claims I, or any third party, may have now or in the future for invasion of privacy, right of publicity, copyright infringement, defamation, or any other cause of action arising out of the use, exploitation, reproduction, adaptation, distribution, broadcast, performance or

display of the Materials. I further agree to indemnify, defend, and hold harmless the Released Entities from and against any lawsuit or cause of action against the Released entities based upon, arising out of, or otherwise relating to the materials, including without limitation, any cause of action relating to said use.

I waive any right to inspect or to approve any works that may be created using the Materials and waive any claim with respect to the eventual use to which the Materials may be applied.

I understand and agree that PERCOM is and shall be the exclusive owner of all right, title, and interest, including copyright, in the Materials and any works using said Materials, and any commercial, informational, educational, advertising, or promotional materials containing the Materials.

I understand that if I am involved in law enforcement or military employment or operations whereby my image, picture or other identifying graphics could impair my employment, my safety, or operations, or is prohibited by those agencies or organizations, I must inform the Program Director immediately following my enrollment so that the Program Director can ensure identifying images, pictures or graphics of me are not utilized or released for public viewing in any way.

With full and complete knowledge and understanding of all statements contained in this document, and having asked for clarification of any parts that I might not have understood, so that I do have a clear and complete understanding of this document and what I am signing and agreeing to, I hereby promise and agree as follows:

- a. to follow and obey each requirement set forth in this agreement and in the documents that are referenced herein and made a part hereof;***
- b. to hold harmless and indemnify, and I DO HEREBY RELEASE, HOLD HARMLESS, and indemnify PERCOMOnline, Inc, its affiliates, faculty, staff, agents and employees, from any and all liability, payments, claims, costs, causes of action, judgments and attorney's fees of whatsoever nature and howsoever arising (1) in any way in connection with my being a student at PERCOM and being enrolled in the EMS Academy, (2) from any clinical or internship experience in connection with the courses being taken, or (3) in any other way whatsoever.***

_____ I further promise and agree that if I violate or fail to follow, abide by, conform to, and carry out in any way the promises, representations, requirements, and covenants set forth in this document, I agree that I may be dropped from all courses in PERCOMOnline, Inc.'s program in which I am enrolled, or that I may be marked as "FAIL" in such courses, subject only to the rules of due process and to the procedures set forth in the Student Handbook.

I have read, understand and agree to each and every provision contained in this agreement and all items contained herein.

SIGNED AND AGREED TO this _____ day of _____, 20 ____.

_____ You may digitally sign or print, sign and scan to pdf

Signature

Printed Name

Refund Policy.

Definitions:

- Beginning course date: Official Course Access date as registered and documented by Admissions on the course roster or the date seven days after the initial payment if the enrollee has not completed all required enrollment steps
- Course fees: Fees paid to PERCOMOnline, Inc, consist of the following components:
 - Tuition fee which also covers the following:
 - access to PERCOM's webpage and to course materials online
 - If student is to complete rotations, one clinical uniform shirt, one student ID tag, and loan to student of a tablet PC if requested for rotations

Policy:

An applicant/enrollee or paying 3rd party may request and receive full refund minus a \$ 250.00 application fee within seven days of the course access date as defined in the "Definitions" portion of this document. From the seventh day following the assigned course access date to the fourteenth day a refund of 50% may be requested. Following the last hour on the fourteenth day no refund is applicable. If the applicant/enrollee has not completed all enrollment steps as required within seven days of my payment to PERCOM, the course access date will be considered to be the initial payment date.

A \$250 enrollment fee will be withheld from all refunds. No refunds will be made unless a written request for refund, sent by United States Postal Service, UPS, or FedEx, an email request, a faxed written request, or a verbal request by telephone conversation with the Program Director, is received by PERCOM at the addresses and numbers hereinafter listed, no later than seven days following course access or seven days following initial payment if enrollment is not completed.

- Online classes are not subject to refund except in exceptional circumstances where the student is unable to access course materials due to unavailability of computer compatibility requirements. In case of computer incompatibility problems, student must notify PERCOM and afford PERCOM a reasonable opportunity to correct such problems prior to being potentially eligible for refund.

Refund request based upon grievance or dissatisfaction with course:

PERCOM will consider any and all refund requests based upon grievance or dissatisfaction with the course. PERCOM has the sole and exclusive right to determine whether or not to grant, deny, grant in part, or deny in part, such requests. PERCOM shall have the right to refer such requests to 3rd parties for arbitration if, in its sole and exclusive determination, such a referral would be fair and advantageous to determine the facts and issues involved with the student's grievance and dissatisfaction with the course; however, PERCOM shall never have any obligation to refund any portion of fees or tuition paid by any student who shall have failed to follow substantially the course requirements as set forth in the course syllabus. PERCOM shall have the sole, exclusive, and final right to determine whether or not a student has substantially followed course requirements.

Professional Education and Resources Company

ADA Disabilities Policy

DISABILITIES OR HANDICAPS:

Students who enter the program with a disability or handicap must notify the Program Director by the beginning of the third class for any reasonable accommodation requests.

Any alterations in testing or clinical rotations during the course do not ensure that the same alteration will be made for the student in the national-testing situation. If a student needs accommodation for a disability at a national-testing site, the student must notify the coordinator by the beginning of the third class. Any accommodation for disability at the national-testing site must be prearranged with the national examination program. It is not the responsibility of PERCOM to arrange or make decisions regarding the national approval of any disability or handicap that might affect the candidate during the testing process, nor does PERCOM take any responsibility for any refusal or denial of lack of acceptance by the national examination or state certifying organizations. Disabilities and Handicaps that are to receive an accommodation at the national-testing site shall be confirmed by a physician's statement of disability/handicap or any other requirements as listed by the national testing or state certifying organizations or agencies.

Your Rights Under the Americans with Disabilities Act

The Americans with Disabilities Act (ADA) has many implications for students in EMS courses. The intent of the ADA emphasizes that individuals not be excluded from jobs or training due to a disability, nor shall such disability influence the result of the examination process that is a prerequisite for a job. Passing the written and skills exams during an EMS Course and passing the National or State Certification Exam are prerequisites for a job as an EMT or EMT.

The law permits testing that requires the use of sensory, manual, or speaking skills, where tests are intended to measure the essential functions of the profession. For example, an applicant with dyslexia could be required to take a written exam, if the ability to read and process is an essential job function, and the exam measures the ability to read. Skills performance must be done within a certain time frame and utilizing certain equipment. The performance measurement for time and accuracy is an essential job function. Therefore, a person with a

disability may not be denied the opportunity to take an exam, but the person may be required to take the exam within a certain time frame or to meet a certain criteria.

Some Points of the ADA

- * Prospective students should read and understand the Functional Job Description before entering the program.
- * Students cannot be discriminated against on the basis of a disability in the offering of the education program.
- * There can be NO accommodation during screening tests or course testing that will compromise or fundamentally alter the testing of knowledge or skills that are required to function safely in the profession. The following are examples in which no accommodation can be given.
 1. No additional time frames for skills set with specific time frames.
 2. No unlimited time to complete a written exam.
 3. No written exams to be given by an oral reader
 4. No specialized or simplified exams or reading material below the ninth grade reading level.

Requesting Accommodation

If accommodation is requested, please contact the program coordinator as soon as possible. For more information concerning the ADA, contact the Association on Higher Education and Disability at 614/488-4972 or the Texas Governor's Committee for Persons with Disabilities at 512/463-5739.

State of Texas

Department of State Health Services

Office of Emergency Medical Services

FUNCTIONAL POSITION DESCRIPTION

ECA/EMT/EMT-I/EMT-P

Introduction

We are providing the following position description for ECA/EMT/AEMT/EMT-P. This should guide you when giving advice to anyone who is interested in understanding what qualifications, competencies and tasks are required of the ECA/EMT/AEMT/EMT-P.

Qualifications:

Successfully complete a department approved course. Verification of skills proficiency and achievement of a passing score on the written certification examination.

Must be at least 18 years of age. Generally, the knowledge and skills required show the need for a high school education or equivalent. Ability to communicate verbally; via telephone and radio equipment; ability to lift, carry, and balance up to 125 pounds (250 with assistance); ability to interpret written, oral and diagnostic form instructions; ability to use good judgment and remain calm in high-stress situations; ability to be unaffected by loud noises and flashing lights; ability to function efficiently

throughout an entire work shift without interruption; ability to calculate weight and volume ratios and read small print, both under life threatening time constraints; ability to read English language manuals and road maps; accurately discern street signs and address numbers; ability to interview patient, family members, and bystanders; ability to document, in writing, all relevant information in prescribed format in light of legal ramifications of such; ability to converse in English with coworkers and hospital staff as to status of patient. Good manual dexterity, with ability to perform all tasks related to highest quality patient care. Ability to bend, stoop, and crawl on uneven terrain; and the ability to withstand varied environmental conditions such as extreme heat, cold, and moisture. Ability to work in low light and confined spaces.

COMPETENCY AREAS

EMR Emergency Medical Responder

Must demonstrate competency handling emergencies utilizing all Basic Life Support equipment and skills in accordance with all behavioral objectives in the DOT/First Responder Training Course and the FEMA document entitled "Recognizing and Identifying Hazardous Materials", and to include curricula on aids to resuscitation, blood pressure by palpation and auscultation, oral suctioning, spinal immobilization, patient assessment, and adult, child, and infant cardiopulmonary resuscitation. The automated external defibrillator curriculum is optional.

EMT Emergency Medical Technician

Must demonstrate competency handling emergencies utilizing all Basic Life

Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic curriculum and the FEMA document entitled "Recognizing and Identifying Hazardous Materials". Curriculum includes objectives pertaining to the use of the automated external defibrillator, epinephrine auto-injector and inhaler bronchodilators.

AEMT

Must demonstrate competency handling emergencies utilizing all Basic and Advanced Life Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic and AEMT curriculum. The curriculum will include objectives pertaining to endotracheal intubation.

EMT-P Paramedic

Must demonstrate competency handling emergencies utilizing all Basic and Advanced Life Support equipment and skills in accordance with all behavioral objectives in the DOT/EMT Basic, AEMT curriculum, and the EMT-P curriculum. The EMT-P has reached the highest level of pre-hospital certification.

Description of Tasks

Receives call from dispatcher, responds verbally to emergency calls, reads maps, may drive ambulance to emergency site, uses most expeditious route, and observes traffic ordinances and regulations.

Determines nature and extent of illness or injury, takes pulse, blood pressure, visually observes changes in skin color, makes determination regarding patient status, establishes priority for emergency care, renders appropriate emergency care (based on competency level); may administer intravenous drugs or fluid replacement as directed by physician. May use equipment (based on competency level) such as but not limited to, defibrillator, electrocardiograph, performs endotracheal intubation to open airways and ventilate patient, inflates pneumatic anti-shock garment to improve patient's blood circulation.

Assists in lifting, carrying, and transporting patient to ambulance and on to a medical facility. Reassures patients and bystanders, avoids mishandling patient and undue haste, searches for medical identification emblem to aid in care. Extricates patient from entrapment, assesses extent of injury, uses prescribed techniques and appliances, radios dispatcher for additional assistance or services, provides light rescue service if required, provides additional emergency care following established protocols.

Complies with regulations in handling deceased, notifies authorities, arranges for protection of property and evidence at scene. Determines appropriate facility to which patient will be transported, reports nature and extent of injuries or illness to that facility, asks for direction from hospital physician or emergency department. Observes patient en route and administers care as directed by physician or emergency department or according to published protocol. Identifies diagnostic signs that require communication with facility. Assists in removing patient from ambulance and into emergency facility. Reports verbally and in writing observations about and care of patient at the scene and in-route to facility, provides assistance to emergency staff as required.

Replaces supplies, sends used supplies for sterilization, checks all equipment for future readiness, maintains ambulance in operable condition, ensures ambulances cleanliness and orderliness of equipment and supplies, decontaminates vehicle interior, determines vehicle readiness by checking oil, gas, water in battery and radiator, and tire pressure, maintains familiarity with all specialized equipment.