4765-16-02 **Transitional EMT-intermediate update course.**

- (A) An EMT-intermediate who is not certified as having completed training in emergency pharmacology as outlined in paragraph (A) of rule 4765-16-01 of the Administrative Code must complete the 2002 transitional EMT-intermediate update curriculum, as outlined in this rule, prior to July 1, 2005, in order to renew a certificate to practice after that date.
- (B) A 2002 transitional EMT-intermediate update course shall only be provided by an EMT-intermediate or EMT-paramedic accredited training program and shall be for forty hours according to objectives approved by the board in all of the following subject areas:
 - (1) A portion that covers an understanding of the basic principles of pharmacology to include the following medications:

(a) Oxygen;

(b) Nitroglycerin;

(c) Dextrose fifty per-cent in water;

(d) Aspirin;

(e) Epinephrine;

(f) Dphenhydramine;

(g) Diazepam;

(h) Lorazepam;

(i) Naloxone;

(j) Bronchodilators;

(k) Glucagon;

(1) Nitrous oxide;

(m) Nalbuphine;

(n) Morphine sulfate;

(o) Ketorolac, meperidine, or other analgesics for pain relief;

(p) Any additional drug approved by the board.

(2) A portion that covers the procedures for accessing venous circulation and

administration of medications;

- (3) A portion that covers the procedures for establishing and maintaining a patient airway, and oxygenation and ventilation of the patient;
- (4) A portion that covers the procedures for assessment and management of the trauma patient with a thoracoabdominal injury.
- (C) Completion of the 2002 transitional EMT-intermediate update course will count as forty hours of continuing education toward the required sixty hours of continuing education for an EMT-intermediate.
- (D) An EMT-paramedic who has dropped back to the level of an EMT-intermediate within three years prior to the effective date of this rule is not required to complete the transitional EMT-intermediate update course outlined in this rule.

Replaces:

Part of 4765-8-04

Effective:

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