

## **EMS PROGRAM**

**Admission Requirements** 



**EMT - Basic** 

## Spring 2024

Please return completed application by deadline date October 1st to the division of Nursing and Allied Health, Attn: Natasha Hill

Mail: P.O. Box 100, Mayhew, MS 39753 Email: alliedhealth@eastms.edu

Drop off: EMCC, GT-Mayhew campus, Douglas building, room 128

Deadline For Completed Admission Requirements (Application, Driver's License, ACT, and Transcripts):

EMT Basic Course-October 1st

# FAST ISSISSIPPI COMMUNITY COLLEGE

## Admissions

#### Non-Discrimination Policy

East Mississippi Community College is committed to assuring that the college and its programs are free from discrimination and harassment based upon race, color, ethnicity, sex, pregnancy, religion, national origin, disability, age, sexual orientation, gender identity, genetic information, status as a U.S. veteran, or any other status protected by state or federal law.

The following offices have been designated to handle inquiries regarding the non-discrimination policies:

Office of the Director of Human Resources 1512 Kemper Street Scooba, Mississippi 39358 662.476.5274

Office of the Dean of Students Golden Triangle Campus
Disability Services Coordinator
8731 South Frontage Road
Mayhew, MS 39753
662.243.1979

Office of the Vice President of Scooba Campus
Title IX Coordinator
1512 Kemper Street
Scooba, Mississippi 39358
662.476.5274



#### **EMS PROGRAM TUITION AND FEES**

#### COSTS:

Tuition, Registration, and Course Fees vary and are subject to change. Go to <a href="www.eastms.edu">www.eastms.edu</a> to review tuition and fees.

Non-refundable fees:

#### **EMT Basic Program**

Stethoscope-\$20.00 Pen light-\$2.00 Pants-\$50.00 Shirt-\$40.00 Boots-\$70.00 Trauma Shears-\$5.00 Preadmission Drug Screen - \$50.00 Castle Branch- \$45.00

Non-refundable cost is estimated based on the lower cost of equipment. Equipment can be more expensive if you choose to purchase certain name brand equipment.



#### EMS PROGRAM LIST OF ESSENTIAL FUNCTIONS

The EMS Program essential functions include but are not limited to the ability to:

#### **Physical Demands:**

- a) Have the physical ability to walk, climb, crawl, bend, push, pull, lift, and balance over less than ideal terrain
- b) Have good physical stamina and endurance, which would not be adversely affected by having to lift, carry and balance at times, in excess of 125 lbs., 250 lbs. with assistance
- c) See different color spectrums
- d) Have good hand eye coordination and manual dexterity to manipulate equipment, instrumentation and medications

#### Requirements for problem solving abilities, data collection, judgment and reasoning

- a) Be able to send and receive verbal messages as well as be able to operate appropriately the communication equipment of current technology
- **b)** Be able to collect facts and to organize data accurately to communicate clearly both orally and in writing in the English language
- c) Be able to differentiate between normal and abnormal findings in human physical conditions by using visual, auditory, olfactory and tactile observations
- **d)** Be able to make good judgment decisions and exhibit problem-solving skills under stressful situations
- **e)** Be attentive to detail and be aware of standards and rules that govern practice and implement therapies based upon mathematical calculations (9<sup>th</sup> grade level)
- f) Possess sufficient emotional stability to be able to perform duties in life or death situations and in potentially dangerous social situations, including responding to calls in districts known to have high crime rates
- g) Be able to handle stress and work well as part of a team
- h) Be oriented to reality and not mentally impaired by mind-altering substances
- i) Not be addicted to drugs
- j) Be able to work shift of 24 hours
- **k)** Be able to tolerate being exposed to extremes in the environment including variable aspects of weather, hazardous fumes, and noise



Possess eyesight in a minimum of one eye correctable to 20/20 vision and be able to determine directions according to a map. Students who desire to drive an ambulance must possess approximately 180-degree peripheral vision capacity and must possess a valid driver's license and must be able to safely and competently operate a motor vehicle in accordance with state law.



#### **EMT BASIC**

Deadline For Completed Admission Requirements (Application, Driver's License, ACT, and Transcripts):

EMT Basic Course- October 1st

#### **Emergency Medical Technician**

Emergency Medical Technician is a one-semester instructional program that prepares individuals to provide basic emergency medical care and transportation for critical and emergent patients who access the emergency medical system. Emergency Medical Technicians function as part of a comprehensive EMS response, under medical oversight, trained in airway management, communications, documentation, general pharmacology, hemorrhage control, ambulance operations, and splinting of adult, pediatric, and infant patients; and special care of patients exposed to heat, cold, radiation, or contagious disease. Students who complete the program are eligible to take the National Registry of Emergency Medical Technicians Exam and become state certified.

### Course Number and Name: EMS 1117 Emergency Medical Technician (EMT)

**Description:** This course includes responsibilities of the EMT during each phase of an ambulance run, patient assessment, emergency medical conditions, appropriate emergency care, and appropriate procedures for transporting patient.

Hour Breakdown: Semester Credit Hours: 7; Lecture: 4; Lab Clinical: 3; Contact Hours: 165 Upon successful completion of the course, the student will be eligible to take the National Registry Examination.

#### **Priorities for Admission:**

- 1. Ambulance Personnel
- 2. Rescue Personnel
- 3. Hospital Emergency Care Personnel



- 4. Fire Department Personnel
- 5. Law Enforcement Personnel
- 6. Civil Defense Workers

PLEASE NOTE: All students are accepted provisionally pending all required paperwork and a clear criminal background check.

#### **EMCC Admission Procedure:**

- 1. Go to <a href="http://www.eastms.edu/">http://www.eastms.edu/</a> and select the "Apply Now!" link to submit an online application for admission to East Mississippi Community College if you have not attended in the past 12 months
- 2. A copy of the applicant's valid driver's license showing the applicant to be 18 years old before the beginning date of the EMT class
- 3. An official transcript from the applicant's high school showing date of graduation or official GED transcript showing high school equivalency
- 4. Submit official transcripts from **all colleges** previously attended. Transcripts cannot be stamped "issued to student"
- 5. A minimum ACT composite of 16

#### **EMS Program Admission:**

After the deadline you will be notified if you have been selected for pending admission. If you accept a slot in the program, you will be sent an information packet to complete. It is your responsibility to be sure that all of your paperwork is on file prior to the deadline.

- 6. A copy of current Valid CPR (AHA Healthcare Provider level or ARC CPR for Professional Rescuer) certification Card.
- 7. Physically fit based on a physical examination by physician (dated within 30 days prior to beginning date of class).
- 8. Evidence of measles and mumps vaccination or evidence of immunity documented by having one of the following:
  - a. Documentation of having received two (2) live measles vaccinations (MMR) after first birthday.
  - b. Documentation of having had physician-diagnosed measles
  - c. Laboratory evidence of measles/mumps immunity, or
  - d. Birth before 1957 and with Rubella immunity.



- Proof of Diphtheria/Tetanus (must be dated within 10 years)
- 10. Proof of Polio vaccine
- 11. A negative **two-step TB skin Test** a negative Chest X-ray or QuantiFERON results in lieu of skin test for students with history of positive skin tests. This is a yearly requirement. A copy of the results of the test must be submitted annually.
- 12. Proof of vaccination for Hepatitis B
- 13. Proof of varicella vaccine
- 14. Flu vaccines are required by clinical facilities
- 15. COVID-19 Vaccination Students will be required to follow each third-party clinical affiliate's (e.g., hospitals, long-term care facilities, and other healthcare providers) COVID-19 protocol. The college has no control over policies mandated by these clinical affiliates. Clinical affiliates may require students presenting inside their facilities to be fully vaccinated and provide proof of vaccination in order to participate in the clinical portion of the College's health science curriculum. If a participating clinical affiliate allows certain medical and religious exemptions to COVID-19 vaccination mandates and the student wishes to apply for such an exemption, the student must first apply for an exemption with the EMCC Nursing and Health Sciences Clinical Review Committee. If approved by the committee, the student may use such approval as support for requesting an exemption with clinical affiliates, as necessary. An approved exemption by the committee is no guarantee that any or all of the clinical affiliates will approve an exemption. Furthermore, the student understands that an exemption application does not guarantee that the student will be eligible to complete clinical requirements of their particular Nursing and Health Science program as set forth by the college and accrediting body.
- 16. All pending students must have a drug screen performed at a time and location <u>designated</u> <u>by the school</u>. No other results will be accepted. Offer of admission will be rescinded if the student fails to keep the assigned time or location of their drug screen for any reason. All non-negative drug screens will be reviewed on a case-by-case basis prior to final acceptance into the SUT program. Cost of the drug screen is the responsibility of the applicant.
- 17. Pursuant to Section 37-29-232 of the Mississippi Code of 1972, Annotated, and Section 43-11-13 of the Mississippi Code of 1972, Annotated, nursing and allied health students



must submit to a fingerprint background check prior to any clinical activity in a licensed healthcare facility. Each student pending admission must receive a "clear" criminal background check in order to be fully admitted to the program.



Payment for the background check is the responsibility of the student. In addition to the disqualifiers listed in section 43-31-13, (felony possession of or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, any sex offense listed in Section 45-33-23(f), child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, or felonious abuse and/or battery of a vulnerable adult, or that any such conviction or plea was reversed on appeal or a pardon was granted for the conviction or plea.) a healthcare facility has the right to deny any student access to their facility for clinical purposes that they feel is unsuitable for employment or for the clinical setting. If a student is barred from any clinical agency for any reason they will not be eligible to enter or continue in the program. Payment for the criminal background check is the responsibility of the student and must be made at the time of application. All fingerprinting for the criminal background check must be completed by the first week of class. All pending students must have a criminal background check performed at a time and location designed by the school.

The number of students accepted into each class may be limited due to available space, equipment, funds, etc. Because of this, it is important to be prompt in meeting deadlines on required paperwork.

\* EMT Refresher Training, a periodically-required review course for Registered Emergency Medical Technicians, and Emergency Medical Responder Training, a course designed to provide training in all aspects of emergency medical care required by the first person (First Responder) at the scene of an accident or sudden illness are offered through EMCC Workforce Services.



#### THE APPLICATION PROCESS CHECKLIST:

- Go to <a href="http://www.eastms.edu/">http://www.eastms.edu/</a> to submit an online application for admission to East Mississippi Community College if you have not attended in the past 12 months. Acceptance to East Mississippi Community College does not guarantee acceptance to the EMS program. Letters of pending acceptance will come from the Director of Emergency Medical Services Technology.
- 2. Fill out an application for the Emergency Medical Services Technology Program (included in this packet). This application should be returned to the address listed on the EMS application.
- 3. Request transcripts to be sent to EMCC from all other educational institutions you have attended this includes high school. (Transfer Request Form included in this packet) Make sure you request transcripts from all schools attended.
- 4. Make sure your ACT scores (minimum composite score 16) are on file in the admissions office or schedule and take your ACT before the published deadline.
- 5. After the deadline you will be notified if you have been selected for pending admission. If you accept a slot in the program, you will be sent an information packet to complete. It is your responsibility to be sure that all of your paperwork is on file prior to the deadline. Remember, just because you requested a document to be sent to EMCC does not mean that it was actually sent or received.



from All Colleges Previously Attended.

## Admissions

#### Official Transcript Request Form

Please send an official copy of my transcript to the address checked below.

If you plan to attend the Scooba Campus, Meridian Navy Base Extension, or Macon Extension use this address:

□East Mississippi Community College ◆Office of Admissions ◆P.O. Box 158 ◆Scooba, MS 39358

662-476-8442

If you plan to attend the Golden Triangle Campus or Columbus Air Base Extension use this address:

□East Mississippi Community College • Office of Admissions • P.O. Box 100 • Mayhew, MS 39753 662-243-1900 Last School/College Attended Date of Attendance or Graduation Name (Please use name you were enrolled under) Student's Current Address (Number or Street) (City) (State) (Zip) Student's Email Address\_\_\_\_\_ Date of Birth\_\_\_\_\_Social Security Number\_\_\_\_\_ Signature Date Please send transcript: □Immediately □After grades are posted □After graduation Note: On high school transcript, please show date of graduation, ACT/SAT scores, and principal's signature. \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* Do Not Mail This Form Back To EMCC. Complete It And Mail To Last School Attended. Make Sure You Send The Appropriate Transcript Fee With This Request. Athletes Must Provide Transcripts



For Nursing and Health Sciences use
only.
Received by:

#### **EMERGENCY MEDICAL SERVICES TECHNOLOGY**

Applicants should print the following application, complete the application as directed and return to the division of Nursing and Allied Health, Attn: Kim Calvert in one of three ways.

APPLICATION DEADLINE: October 1st

Mail: P.O. Box 100, Mayhew, MS 39753 Email: alliedhealth@eastms.edu

Drop off: EMCC, GT-Mayhew campus, Douglas building, room 128

\*Mailed applications must be received by 4:30 PM on October 1st.

For questions please call 662-243-1910

#### **APPLICATION**

#### PLEASE TYPE OR PRINT

Deadline For Completed Admission Requirements (Application, Driver's License, ACT, and Transcripts):

EMT Basic Course- October 1st

		Personal In	formation			
Name:						
Last		First	Middle		Maiden	
Social Security Nu	mber:					
Address:						
Street		P.O. Box	City	State	Zip Code	
Email address:						
Telephone #s: Hor	me		Cell			
	EMEF	RGENCY CONTA	ACT INFORM	MATION		
Name	Rela	Relationship		Contact numl		



Academic Information*								
High School Attended:	Graduation Date:							
School Address, City, State:	GED Test: Yes No							
List all colleges attended (including EMCC):								
Name and location of institution	Dates a	ittended	Major or area of St	udy	Degree Awarded			
* An official transcript from all educational institutions attended and/or GED results must be								
mailed to:	Admissi	ons						
East Mississippi Community College								
	P.O. Box							
	Mayhev	v, Mississip	opi 39753					
Proof o	f Credentia	als/Licensur	es Information*					
Name of facility previously or currently employed as a healthcare worker	Healthcare Position/Title (		Crede	Credentials/Licensure				
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•	Have you ever been convicted of, pled no contest to, or are charges pending against you a felony or misdemeanor in any state/jurisdiction? YESNO	u foi
•	I state that the foregoing statements in this application are true and accurate.	
•	I am aware that omission of transcripts from other schools attended, or any famisleading, or incomplete statements made on this application could be grounds for radmission to, or later dismissal from, the Emergency Medical Services Technology Progr	non
	SignedDate	