



## EMS Academy Checkoff Sheet - GEORGIA

**DIDACTIC PORTION CONSISTS OF PARTS 1 - 8**  
**Must be completed before student can begin clinicals**

### 1) BRING TO ORIENTATION

Initial Application -----	
Color copy of ID -----	
Diploma or transcript -----	

### 2) COMPLETE THE FIRST WEEK OF CLASS

Signed Student Handbook Agreement -----	
Signed Drug Consent Form -----	
Signed Background Consent Forms (2) -----	
Create JBL Account. Course ID TBA -----	

### 3) SKILLS MUST BE COMPLETED OR CANNOT TAKE FINAL EXAM

**\*TRADITIONAL/HYBRID STUDENTS May sign up first week of class. Must complete and pass all skills prior to final schedule on syllabus.\***

**\*ONLINE STUDENTS-Sign up for Medical after Chapter 23. Sign up for Trauma after Chapter 31.\***

Medical Skills Practice Day - one day only -----	
Trauma Skills Practice Day - one day only -----	
Skills Competency Day - one day only -----	

\* Student may have to schedule additional skill sessions\*

### 4) JB LEARNING QUIZZES MUST BE COMPLETED OR CANNOT TAKE FINAL EXAM

*Chapters 1-41 -----	
JB Learning Terminology Quiz -----	
JB Learning Medication Quiz -----	

### 5) MEDICAL FILE MUST BE COMPLETED OR CANNOT TAKE FINAL EXAM

Minimum medical records current thru clinicals	
*TB skin test <1yr old-----	
*Tetatus <10 yrs old-----	
*MMR 2 shots or (+) titer-----	
*Varicella (chickenpox) vaccine or form or (+) titer-----	
*Hepatitis B series or (+) titer-----	
*Flu vaccine (required Aug 1 - May 31) -----	
*Medical Physical (on RC Form) -< 1 year old-----	

**6) MUST BE COMPLETED OR CANNOT TAKE FINAL EXAM**

\*All students, traditional/hybrid and online.\*

AHA BLS class from RC Health Services (required & included)-----	<input type="checkbox"/>
Drug Cards -due date assigned by instructor-----	<input type="checkbox"/>
Terminology Homework -due date assigned by instructor-----	<input type="checkbox"/>
Documentation Homework (PCR) due date assigned by instructor-----	<input type="checkbox"/>
Vital Signs Homework -due date assigned by instructor-----	<input type="checkbox"/>
Any other work assigned by instructor -----	<input type="checkbox"/>
*Payments complete*-----	<input type="checkbox"/>
*TRAD/HYBRID- Payments complete by final exam date on syllabus.*	
*ONLINE- Payments complete prior to scheduling final exam.*	

**\*\*ONLINE STUDENTS ONLY\*\***

Hours Log-----	<input type="checkbox"/>
----------------	--------------------------

**STEPS 1-6 MUST BE COMPLETED IN FULL OR STUDENT CANNOT TAKE FINAL AND MAY BE REMOVED FROM RCHS EMT ACADEMY**

**7) FINAL EXAM**

<b>Two attempts only, must get 70% on first or 80% on second</b> -----	<input type="checkbox"/>
<b>No final exams will be administered passed date assigned by instructor.</b>	<input type="checkbox"/>
If passed- badge made, polo shirt given, background/drug screen -----	<input type="checkbox"/>
^process varies depending on location^	
*TRAD-must take final exam on date listed on syllabus.*	
*HYBRID- must take final exam in person at RCHS with their traditional class or within one week of date listed on syllabus*	
*ONLINE- must schedule final exam in person at RCHS.*	

**8) CLINICAL ORIENTATION - MANDATORY**

Mandatory in-class Clinical Orientation (traditional/virtual only)-----	<input type="checkbox"/>
<b>OR</b>	
Online Clinical Orientation for Online students only-----	<input type="checkbox"/>
<b>v ALL STUDENTS v</b>	
Signed Clinical Guidelines Acknowledgement Forms-----	<input type="checkbox"/>
HIPAA Exam - 100% required- -----	<input type="checkbox"/>
Universal Precautions Exam - 100% required-----	<input type="checkbox"/>
Clinical Guidelines Exam -90% required-----	<input type="checkbox"/>
<b>Clinical Site Forms</b> -----	<input type="checkbox"/>

required from each clinical site student wants to attend, found on <https://www.instructor.rhealthservices.com>  
fill out forms and return to lead instructor, required to attend clinicals

**9) ORAL BOARD**

**Two attempts only, pass/fail** -----

- \*TRAD-must take oral board on date listed on syllabus.\*
- \*HYBRID-must take oral board in person at RCHS with their traditional class or within one week of date listed on syllabus
- \*ONLINE- must schedule oral board in person at RCHS.\*

**Sign up for Clinical Rotations** on [instructor.rchealthservices.com](http://instructor.rchealthservices.com) -----

Take Clinical Guidelines Manual to rotations

There is a mandatory two-week waiting period between signing up for clinical rotation and starting the first one due to scheduling with our affiliates

**\*CLINICALS WILL NOT BEGIN UNTIL STEPS 1-9 ARE COMPLETE\***

**10) CLINICAL ROTATIONS & MINIMUM REQUIRED PAPERWORK**

Forms found on <http://www.instructor.rchealthservices.com>, clinical section

**LISTED BELOW ARE THE MINIMUM PAPERWORK REQUIREMENTS**

**Students without minimum acceptable paperwork will not graduate.**

48 hours EMS rotations (4 EMS Shifts)-----	<input type="checkbox"/>
10 Patient Care Reports -----	<input type="checkbox"/>
*any EMS shifts w/o transports must have PCR documentation of hours*	<input type="checkbox"/>
<b>*If you need more patient contacts, you must email Clinical Coordinator more shifts*</b>	<input type="checkbox"/>
Evaluation of Clinical site form (one for EACH ROTATION!)-----	<input type="checkbox"/>
Evaluation of Preceptor forms (EACH PRECEPTOR, EVERY ROTATION)-----	<input type="checkbox"/>
Student Evaluations FOR EACH ROTATION-----	<input type="checkbox"/>
1 Competency Checklist (Must be 100% completed)-----	<input type="checkbox"/>
Schedule appt to return Clinical Paperwork to a lead instructor -----	<input type="checkbox"/>
Return badge with Clinical Paperwork -----	<input type="checkbox"/>

Attend NREMT Psychomotor Skills Testing at RCHS campus -----

\*Three attempts to pass each skill per NREMT\*

\* Student and Instructor will sign the File Review Form\*

Lead Instructor has advised the student to create the following:

Create NREMT.org profile -----	<input type="checkbox"/>
*Create Account-----	<input type="checkbox"/>
*Log into Account-----	<input type="checkbox"/>
*Create Profile-----	<input type="checkbox"/>
*Create Application (4 Step Process)-----	<input type="checkbox"/>
Receive Course Completion Certificate! -----	<input type="checkbox"/>



Course Number: \_\_\_\_\_

Course Completion Date: \_\_\_\_\_

NREMT Psychomotor Skills Date: \_\_\_\_\_

Student Full Name (PRINTED): \_\_\_\_\_

Student Email Address for CCC: \_\_\_\_\_

Student Mailing Address:

\_\_\_\_\_

\_\_\_\_\_

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

Lead Instructor Name (PRINTED): \_\_\_\_\_

Lead Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coordinator Name: (Printed): \_\_\_\_\_

Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This completed form is to be signed by the student and Lead Instructor. The Lead Instructor is to email it to the EMS Coordinator for a course completion certificate to be issued.**