***Entering Education on NREMT Website***

Go to: [www.nremt.org](http://www.nremt.org)
 - *Log In*
 - Change *My Current Role: My Certification*
 - Then *Add A Course*

**NATIONAL (30 Hours/ Max 10 Online)** – BcoFD ALS Refresher

***Course Details***

* + **Course Type:** Continuing Education
	+ **Course Name:** BCoFD ALS Refresher
	+ **Course Approved By:** State EMS Office: Maryland
	+ **Course Completion Date:** Date of final lecture
	+ **Course Duration:** 30 Hours: 00 Minutes
	+ **Did you teach this course?** No
	+ **Was an instructor present at this course?** No

***Course Location***

* **Country:** United States
* **Enter a State or City, or Postal Code:** State and City
* **State:** Maryland
* **City:** Appropriate for your location

***Additional Course Information***

* **Lead Instructor Name:** Fill in if desired
* **Course Description:** Fill in if desired
* **Sponsor:** Baltimore County Fire Department
* **Save & View Transcript/ Save & Upload Attachments\*/ Save & Add Another Course**
	+ \*Can upload course completion certificate or transcript with course if desired, keep for personal records

**NATIONAL (24 Hours)** – MFRI ALS Refresher

***Course Details***

* + **Course Type:** National Component (NCCR)
	+ **Course Name:** National Continued Competency Requirements (NCCR) – ALS Refresher Part 1
	+ **Course Approved By:** State EMS Office: Maryland
	+ **Course Completion Date:** Date of final lecture
	+ **Course Duration:** 24 Hours: 00 Minutes
	+ **Did you teach this course?** No
	+ **Was an instructor present at this course?** Yes

***Course Location***

* **Country:** United States
* **Enter a State or City, or Postal Code:** State and City
* **State:** Maryland
* **City:** Appropriate for your location

***Additional Course Information***

* **Lead Instructor Name:** Fill in if desired
* **Course Description:** Fill in if desired
* **Sponsor:** Baltimore County Fire Department/ Maryland Fire Rescue Institute
* **Save & View Transcript/ Save & Upload Attachments\*/ Save & Add Another Course**
	+ \*Can upload course completion certificate or transcript with course if desired, keep for personal records

**NCCR – Online Course** – MFRI ALS Refresher

***Course Details***

* + **Course Type:** National Component (NCCR)
	+ **Course Name:** National Continued Competency Requirements (NCCR) – ALS Refresher Part 2
	+ **Course Approved By:** State EMS Office: Maryland
	+ **Course Completion Date:** Date of final lecture
	+ **Course Duration:** 6 Hours: 00 Minutes
	+ **Did you teach this course?** No
	+ **Was an instructor present at this course?** No

***Course Location***

* **Country:** United States
* **Enter a State or City, or Postal Code:** State and City
* **State:** Maryland
* **City:** Appropriate for your location

***Additional Course Information***

* **Lead Instructor Name:** Fill in if desired
* **Course Description:** Fill in if desired
* **Sponsor:** Baltimore County Fire Department
* **Save & View Transcript/ Save & Upload Attachments\*/ Save & Add Another Course**
	+ \*Can upload course completion certificate or transcript with course if desired, keep for personal records

**LOCAL (15 Hours/ Max 10 Hours Online)**

***Course Details***

* + **Course Type:** Continuing Education Course
	+ **Course Name:** Maryland ALS Protocol Update 2020
	+ **Course Approved By:** State EMS Office: Maryland
	+ **Course Completion Date:** Date on MIEMSS Certificate
	+ **Course Duration:** 2 Hours: 00 Minutes
	+ **Did you teach this course?** No
	+ **Was an instructor present at this course?** No

***Course Location***

* **Country:** United States
* **Enter a State or City, or Postal Code:** State and City
* **State:** Maryland
* **City:** City where you completed majority of the online portion

***Additional Course Information***

* **Lead Instructor Name:** none
* **Course Description:** Fill in if desired
* **Sponsor:** MIEMSS Institute of Emergency Medical Services System
* **Save & View Transcript/ Save & Upload Attachments\*/ Save & Add Another Course**
	+ \*Can upload course completion certificate or transcript with course if desired, keep for personal records

**Ideas for Local/ State Hours**

|  |  |  |
| --- | --- | --- |
| **Course Name** | **Course Sponsor** | **Course Description** |
| Maryland BLS Protocol Update 19’ | Maryland Institute Emergency Medical Services System | 1.0 Hour |
| Maryland BLS Protocol Update 20’ | Maryland Institute Emergency Medical Services System | 1.0 Hour |
| Maryland ALS Protocol Update 19’ | Maryland Institute Emergency Medical Services System | 1.0 Hour  |
| Maryland ALS Protocol Update 20’ | Maryland Institute Emergency Medical Services System | 1.0 Hours |
| Ketamine | Baltimore County Fire Department | 0.5 Hour |
| Verapamil | Baltimore County Fire Department | 0.5 Hour |
| Topics in EMS (Spring/ Fall Sessions) | Johns Hopkins Bayview | 7.0 Hours |
| ACLS Initial | Maryland Fire Rescue Institute or BCoFD | 16 Hours |
| AMLS | Maryland Fire Rescue Institute | 16 Hours |
| Shock Trauma Lecture Series | R. Adams Cowley Shock Trauma Center | 1.5 Hours |
| GEMS | Maryland Fire Rescue Institute | 8.0 Hours |
| TECC | Baltimore County Fire Department | 4.0 Hours |
| Obtaining Swab Specimen for COVID | Maryland Institute Emergency Medical Services System | 0.5 Hours |
| Ped TOR | Maryland Institute Emergency Medical Services System | 1.0 Hours |
| Ketorolac | Baltimore County Fire Department | 0.5 Hours |
| Epi Infusion | Baltimore County Fire Department | 0.5 Hours |
| Advanced Airway Training  | Baltimore County Fire Department | 2.0 Hours |
| Bougie Training  | Baltimore County Fire Department | 0.5 Hours |

**INDIVIDUAL (15 Hours/ Max 15 Hours Online)**

***Course Details***

* + **Course Type:** Continuing Education Course
	+ **Course Name:** CPR
	+ **Course Approved By:** State EMS Office: Maryland
	+ **Course Completion Date:** Date completed on duty
	+ **Course Duration:** 2 Hours: 00 Minutes
	+ **Did you teach this course?** No
	+ **Was an instructor present at this course?** No

***Course Location***

* **Country:** United States
* **Enter a State or City, or Postal Code:** State and City
* **State:** Maryland
* **City:** City where you completed majority of the online portion

***Additional Course Information***

* **Lead Instructor Name:** none
* **Course Description:** Fill in if desired
* **Sponsor:** Baltimore County Fire Department
* **Save & View Transcript/ Save & Upload Attachments\*/ Save & Add Another Course**
	+ \*Can upload course completion certificate or transcript with course if desired, keep for personal records

**Ideas for Individual Hours**

|  |  |  |
| --- | --- | --- |
| **Course Name** | **Course Sponsor** | **Course Description** |
| 2020 Hazardous Materials Refresher | Baltimore County Fire Department | 1.0 Hour |
| 2019 Hazardous Materials Refresher | Baltimore County Fire Department | 1.0 Hour |
| BLS CPR Renewal | Baltimore County Fire Department | 2.0 Hours |
| T-Pod Pelvic Stabilization Device | Baltimore County Fire Department | 0.5 Hours |
| 10% Dextrose | Baltimore County Fire Department | 1.0 Hour |
| Epinephrine Preparation | Baltimore County Fire Department | 1.0 Hour |
| Stress First Aid for Fire & EMS | Baltimore County Fire Department | 4.0 Hours |
| Medsource Thermometer Training | Baltimore County Fire Department | 0.5 Hour |
| 2019 Bloodborne Pathogens | Baltimore County Fire Department | 1.0 Hour |
| EMS Documentation Review  | Baltimore County Fire Department | 2.0 Hours |
| COVID 19 Terbutaline Update | Baltimore County Fire Department | 0.5 Hours |