

Paramedic National Registry Practical Exam

LaGuardia Community College will be hosting a National Registry Practical Exam open for all current EMT-P's to become certified on the National Level.

Testing Date

Saturday February 9, 2008 9:00AM



Sign up Deadline
January 10, 2008



Location

**LaGuardia Community College
31-10 Thomson Avenue Room C-339
Long Island City, NY 11101
(718) 482-5321 for more information,**

or to sign up go to:

www.nremt.org

Dear Applicant,

Welcome to the National Registry of EMTs ALS examination process at LaGuardia Community College. This letter will provide you with the necessary information and forms in order to register for the examination. **Please read everything carefully to avoid delays in processing your application.** You will find the following information below:

1. Exam schedule including dates, times, location and **Directions** to the exam site.
2. Paramedic practical exam information
3. A registration form for the LaGuardia Community College National Registry of EMTs ALS Practical Skills Exam.

*(The registration form must be returned with fee before **January 10, 2008** to LaGuardia Community College.)*

4. All written exams are now done through the NREMT with Pearson VUE Testing Centers. Go to the NREMT Website (www.nremt.org), Log In, and Create an Account. The program will guide you through the written testing process.

National Registry Skill sheets, application and info can be downloaded from their website: www.nremt.org We encourage you to do this!!!

5. You are being tested on your knowledge of your “scope of practice” as it pertains to the standard DOT Curriculum, not local protocols. Please stick to the material in a current paramedic textbook!!

Every effort is made to make the exam process as painless and stress free as possible. I hope you find the enclosed information clear, concise and helpful.

We also suggest that bring your 20 gauge IV catheters and/or set up. We always have a selection, but it may make you more comfortable if you have your own. *(If you are traveling by air, do NOT bring IV supplies!)* If you have any questions or if I can be of further assistance, please do not hesitate to contact me either by phone (718-482-5327) or e-mail (jspencer@lagcc.cuny.edu).

PLEASE BRING A COPY OF YOUR PARAMEDIC CERTIFICATION AND ANY NATIONAL REGISTRY TEST RESULTS PAPERWORK WITH YOU IF YOU HAVE NOT TESTED WITH US BEFORE! (This helps us understand who you are and where you have been.)

Sincerely,

Jeffery Spencer, BS, EMT-P
Director of Paramedic Education
National Registry Exam Coordinator

ALL SKILLS ARE TESTED AT THE CURRENT ACLS GUIDELINES!!!!

NREMT ALS PRACTICAL EXAMS

1. Practical Skills Exam registration forms are accepted on a first-served basis. Forms must be completely filled out and include a Money Order/Department or bank Check or Visa/Master Card information for the appropriate exam fee amount.

(NO PERSONAL CHECKS, PLEASE!) *Visa/MC payments info and the form may be faxed to 718-609-2028. Please call my office after sending the documents by fax to confirm that the information was received as sent.*

ALL FEES MUST BE PAID ON OR BEFORE JANUARY 10, 2008!

The exam fee will be forfeited if you do not show up on the exam day. An administration fee of \$25 will be charged if you cancel less than 3 days prior.

Please do NOT request a return receipt when you mail your registered to us. This can hold up your paperwork.

2. All Written Exams are being scheduled through the NREMT and Pearson Vue Testing Centers. All Written Exams are Computer Based as of 1/1/07. Go to the NREMT website: www.nremt.org "Log On, "Create an Account" and follow the Instructions.

3. Practical exam registration is 9:30 a.m. You will be sent a confirmation letter prior to the exam
Please be prompt! If you are late, you may not be admitted to the exam.

4. **If you do not receive a confirmation letter, you may NOT be registered for the exam.** Either your application was late in arriving or the exam is full. We must receive your application and payment prior to the exam date to assure that you are included. If you have preliminarily registered by phone, you may have been included on the official NR roster. HOWEVER, Receipts of your ALS EXAM registration and payment place you on the final roster. If you have a question, contact us at 718-482-5327 or e-mail for clarification.

We do not cancel due to bad weather!!

5. All candidates must bring positive proof of identification in the form of a **PHOTO ID (Drivers License or Passport).**

6. A variety of UP-TO-DATE equipment is provided in each station, but we cannot guarantee it is what you are used to using. You may bring and utilize equipment of your own, such as **IV catheters, 20 gauge or smaller!** Spider straps, strapping materials or short boards. (*We have Select-a-size Collars, KEDs, and 6 Quick Clip Straps in each station.*)

7. Every effort will be made to send you **UNOFFICIAL Practical Skills Exam** results within one week of the exam. **The OFFICIAL Practical Exam** results will be mailed to you directly from the National Registry in approximately 4-6 weeks after the exam.

CERTIFICATION AS AN NREMT PARAMEDIC MAY NOT MEAN YOU ARE AUTOMATICALLY CERTIFIED TO PRACTICE YOUR STATE! CHECK WITH YOUR STATE EMS OFFICE.

If you have questions or need to contact the National Registry of EMTs directly, their address is:

National Registry of EMTs,

PO Box 29233

Columbus, OH 43229

Phone: 614-888-4484 Fax: 624-888-8920

YOUR PAYMENT MUST BE RECEIVED ON OR BEFORE JANUARY 10, 2008 TO HOLD YOUR SPACE!!

Check-in/Registration: 9:30 am

PRACTICAL EXAMS ARE HELD AT:

******29-10 Thomson Ave, Room C330, Long Island City, NY 11101******

Please dress professionally, but appropriately. Tank tops, short shorts, tight clothing, shirts and pants that don't meet, high heels, logo/department wear are not acceptable!

**DO NOT DEPEND ON A LAST MINUTE ROOM IN ONE OF THE HOTELS IN THE AREA.
THERE IS NO SLEEPING IN YOUR CAR AT THE COLLEGE OVERNIGHT!!**

ALS PRACTICAL SKILLS EXAM REGISTRATION

***LEGAL NAME _____ SOC. SEC. # _____

ADDRESS _____ HOME PHONE _____

CITY/STATE/ZIP _____ WORK PHONE _____

SCHOOL/INSTRUCTOR _____ YOUR E-MAIL _____

D.O.B ____ / ____ / ____ **REQUESTED EXAM DATE: 2/09/2008**

Testing level: **NREMT-PARAMEDIC** _____

RETESTING THE FOLLOWING STATIONS: 1st Retest _____ 2nd Retest _____

1. _____ 2. _____ 3. _____ 4. _____ 5. _____ LAST TEST DATE (If Retest) _____

RETEST: PLEASE BRING A COPY ANY NATIONAL REGISTRY RESULTS! (It helps us understand who you are or where you have been!)

EXAMINATION FEES

- These fees are payable *in addition* to fees paid to National Registry of EMTs.
- Only **MONEY ORDERS, OFFICIAL/DEPARTMENT/BANK CHECKS OR VISA/MC** will be accepted.
 - **Personal checks will be returned** The fee *must* accompany this form!
- Payment **MUST** be received **ON OR BEFORE JANUARY 10, 2008** to *“hold” your space!*

Paramedic Candidates:	\$215.00 for the practical exam*	Amount: _____
Retest for individual stations: (Up to 5 station)	\$25.00 for each practical station _____ X \$25.00= \$25 Late Fee if less than 7 days to exam	_____
	<i>Total Enclosed or to be charged</i>	_____

“NO SHOWS” ON EXAM DATE WILL FORFEIT REGISTRATION FEE!!!

Send form and make payable to: **LaGuardia Community College** Fax: **718-609-2051**
31-10 Thomson Ave Fax Visa/MC info below!
Long Island City, NY 1101

Amount: _____ Date Rec: _____ Check/Approval # _____ Confirm _____ Visa/Master Card (circle)
_____ Exp. Date _____ Name on Card _____

WE ACCEPT VISA OR MASTER CARD

FAX YOUR REGISTRATION: 718-609-2028

IF YOU CHARGE YOUR TESTING FEE ON VISA OR MASTER CARD AND DO NOT SHOW, OR CANCEL LESS THAN THREE (3) DAYS PRIOR TO THE EXAM DATE, YOU WILL NOT RECEIVE A REFUND! IF YOU CANCEL MORE THAN THREE DAYS PRIOR TO THE EXAM DATE, YOU WILL BE SUBJECT TO A \$25 ADMINISTRATION FEE.

IF YOU POSTPONE OR CHANGE YOUR EXAM DATE AND ASKED TO BE MOVED TO ANOTHER DATE, THERE IS NO CHARGE. **ONLY THREE MOVES PERMITTED WITHOUT AN ADMINISTRATION FEE OF \$50!!**

BY FAXING OR SENDING THE FOLLOWING INFORMATION, YOU AGREE TO THE FOLLOWING:

You will forfeit your full fee if you do not show or cancel less than three (3) days prior to the exam date. If you cancel more than three days prior to the exam date, you WILL be subject to a \$25 administration fee or less of your fee. If you postpone or move forward your exam date more than three times, you will be subject to a \$50 administration fee.

Signature: _____ Date _____