STUDENT/APPLICANT NAME (Print) _____ **EMS NUMBER** _____

PARAMEDIC RECERTIFICATION REPORT

Specific categories of education are not required. Two (2) hours of training will be added by submitting a current, valid BLS card. Six (6) hours of training will be added by submitting a current, valid ACLS card. Six (6) hours of training will be added by submitting a current, valid PALS or PEPP card. The provider card shall not expire the same month your Clark County certificate expires. Recertification for Paramedic status requires completion of 60 hours of CME's biennially as outlined in the "**District Procedure for Paramedic Recertification.**" A certificate of completion must be submitted for all approved refresher courses. All additional CMEs must be notated below, along with supporting documentation.

SECTION I: REQUIRED CONTINUING MEDICAL EDUCATION (CME)

CATEGORIES (Preparatory, Airway, Trauma, Patient Assessment, Medical/Behavioral, OB, Infants, Children, Pt. Assessment, Trauma, Miscellaneous)	HOURS COMPLETED	DATE COMPLETED

CATEGORIES (Preparatory, Airway, Trauma, Patient Assessment, Medical/Behavioral, OB, Infants, Children, Pt. Assessment, Trauma, Miscellaneous)	HOURS COMPLETED	DATE COMPLETED

CATEGORIES (Preparatory, Airway, Trauma, Patient Assessment, Medical/Behavioral, OB, Infants, Children, Pt. Assessment, Trauma, Miscellaneous)	HOURS COMPLETED	DATE COMPLETED