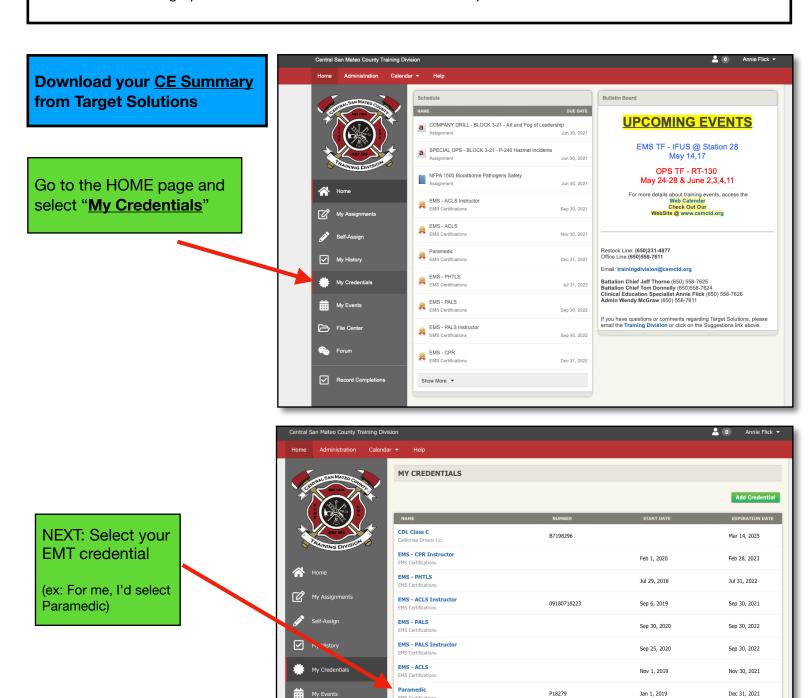
IMAGE TREND - EMT RENEWAL INSTRUCTIONS

BEFORE you begin:

DOWNLOAD all of your documents from Target Solutions. Follow the directions below to download the following:

- Drivers License
- · BLS/CPR card
- CE Summary Form (contains summary of training hour completions should total 24hrs or more)
- CE certificate for: EpiPen, Glucometer and Narcan Training (1 Certificate to include all courses named later)

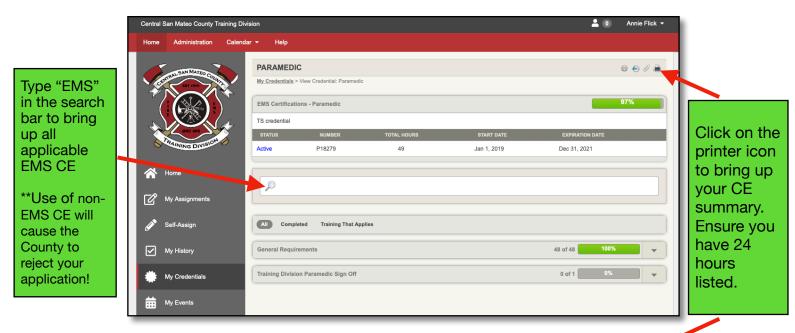
<u>UPLOAD</u> your completed <u>EMT Skills Form</u> by either using a scanner or a free scanning app on your phone like "Turbo Scan". Photographs are not sufficient unless converted to a pdf file first.

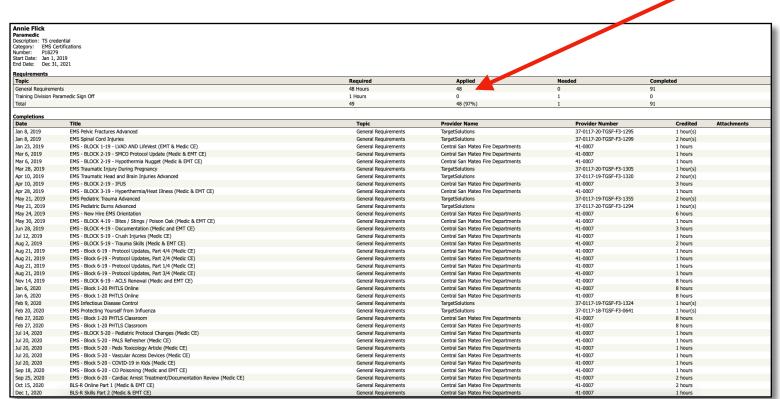


Dec 1, 2020

Dec 31, 2022

File Center



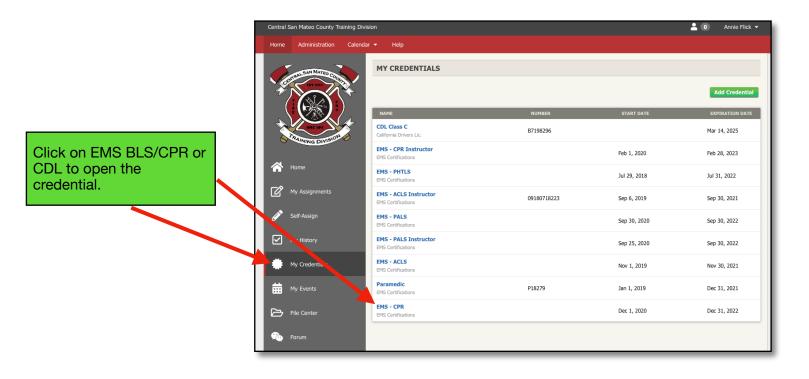


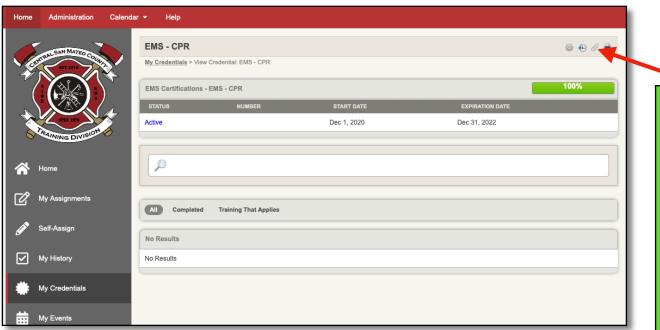
Right click on the page to "Save As" (or "download") to your desktop for upload into the application later.

NEXT: Download your CDL (driver's license) and BLS/CPR card:

Go back to the My Credentials page and click on the BLS credential or CDL.

Downloading CDL and BLS/CPR





Click on the paperclip icon to open the credential and then right click to "open in preview". From there you can "save as" or "download" to your desktop.

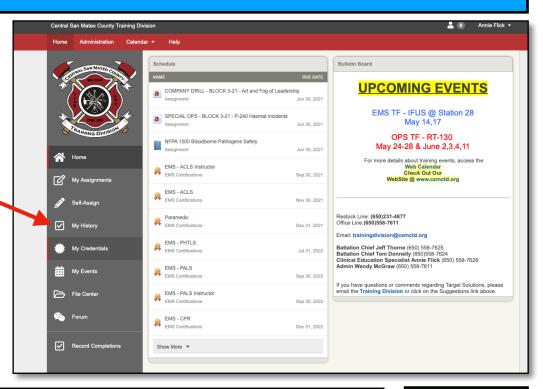
After you have saved BOTH the BLS/CPR card and your CDL, you will need to download your CE certificate for you annual Narcan, EpiPen and Glucometer Training.

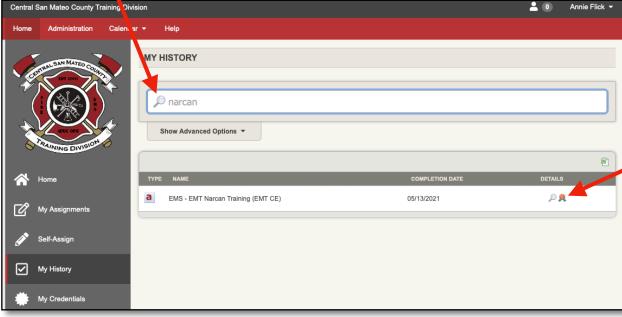
NEXT: Download your Narcan, Glucometer and EpiPen CE Certificate:

Click on **My History** and use the search bar to find the completion:

EMS - EMT Narcan/ Glucometer/EpiPen Completion

This single CE certificate gives you credit for all 3 assignments and is necessary as you can only upload 1 document in the renewal application for this requirement.





Click on the "gold medal" icon to bring up the certificate.

Once the CE certificate opens, right click within the certificate to save it to your desktop.

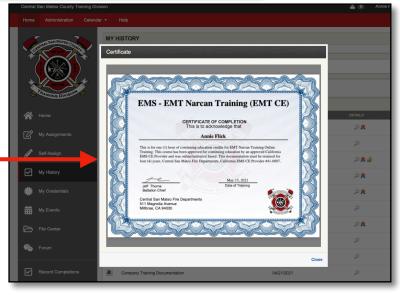


Image Trend Step-By-Step for EMT Renewal

Website: https://smchealth.imagetrendlicense.com/lms/public/portal#/login

Begin by logging into the system:

EMT's who are **NEW** the county, please use "Create New Account" on the home page as you will not be in the system yet.

Username format:

In general, your username is the first letter of your first name followed by your last name: (ex: aflick)

Use "Forgot Password" to log in for the first time OR if you forgot what you changed it to.

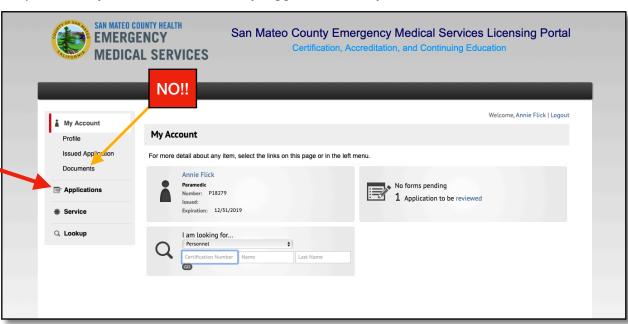
When you click on the "forgot password" link, you will be prompted to enter your name, work email and date of birth.

• This *generates an <u>email</u>* containing a link to change your password AND contains your username. Once you change your password, you will be automatically logged in to the system.

NEXT:

In the menu on the left side of the homepage, choose

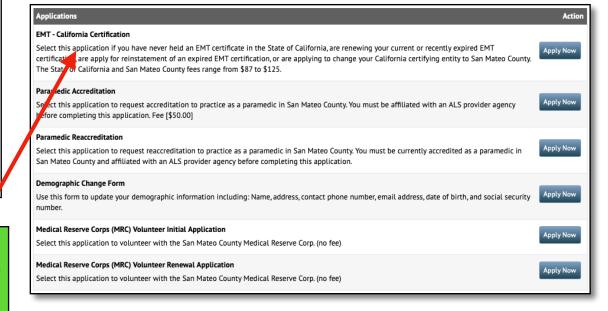
APPLICATIONS



IMPORTANT!!

DO NOT upload any documents <u>until</u> you are <u>within the renewal</u> <u>application</u>. If you upload them into "Documents" on the home page, they will sit there for all of eternity and hold up your renewal!

Choose EMT California
Certification from the list of applications



Section 1: INTSTRUCTIONS

Contains Instructions for the application.

SCROLL to the bottom and select "Save and Continue"

READ through the application Type choices if you are coming from another county or are renewing after a lapse in certification. This table outlines the requirements to renew.

If you are already an EMT in San Mateo County and are a traditional renewal, skip the table and proceed to the bottom of the page summarized in the screen shot below.

Use the table below to determine which application you wish to submit.

Application Type	Initial Certification	Renewal Certification	Reinstatement Short Expired	Reinstatement Long Expired	Change of Certifying Entity
Requirement	Never certified as an EMT in California	Current or expired less than six (6) months	Expired more than six (6) but less than twelve (12) months	Expired more than twelve (12) months	Currently certified as an EMT by another LEMSA or certifying entity
Description	Select this application if you have never held an EMT certificate in the State of California	Select this application if you are currently certified by San Mateo County and: • Your EMT certificate is current, or • Your EMT certificate is less than six (6) months expired	Select this application if you were last certified by San Mateo County and: • Your EMT certificate has been expired more than six (6) but less than twelve (12) months	Select this application if your EMT certificate has been expired more than twelve (12) months with any California certifying entity	Select this application if you are currently certified by another California certifying entity other than San Mateo County and: You wish to change your certifying entity to San Mateo County; and Your EMT certificate is current, or less than twelve (12) months expired* *If your EMT certificate is more than twelve (12) months expired, please complete the Reinstatement application listed in red
Local Fee	\$50.00	\$50.00	\$50.00	\$50.00	\$50.00
State Fee	\$75.00	\$37.00	\$37.00	\$75.00	\$75.00
Total Fee	\$125.00	\$87.00	\$87.00	\$125.00	\$125.00

CHOOSE the application choice that best describes your situation. Whether you are coming from out of county or already certified in San Mateo County, MOST of us will be a "Renewal Certification"

Then,

CHOOSE "EMT-Basic" as your certification level and then hit "Save and Continue".

<u>IF you are unsure</u> of which application to choose, contact Training for help!

Select the type of application you are applying for: Initial Certification Renewal Certification	Unless you have been expired for >6 months, use THIS ONE.			
Reinstatement Short Expired (Expired > 6 months but < 12 months)				
Reinstatement Long Expired (Expired > 12 months)				
Change of Certifying Entity				
*Certification Level				
○ EMT-Basic				
→ Save and Continue				

NOTE:



If you are **new to the county** and your previous EMT cert was issued <u>outside of San Mateo County</u>, you **MUST** do a LiveScan in addition to the EMT Renewal Application. Your application will not be processed until your LiveScan is complete. There is a LiveScan form in section 6 of the application. Contact Annie or Wendy for help or suggestions of locations to complete the scan. It may be helpful to do this first to speed up your renewal.

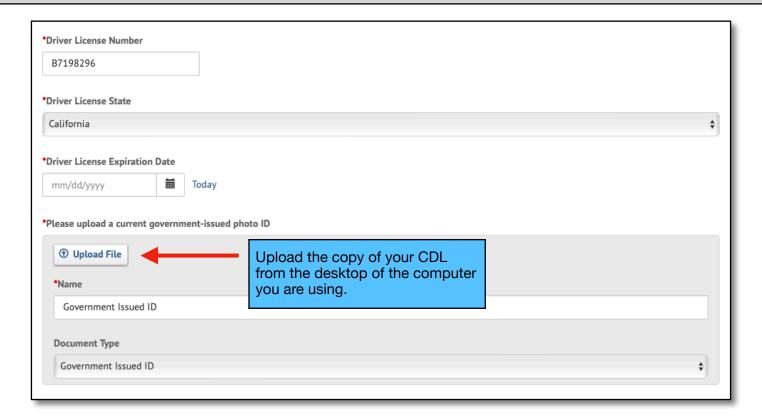
Section 2: APPLICANT INFORMATION

SCROLL through the demographic section and complete any required fields that are blank. If you note any incorrect information, you can email the county to fix it after you apply at:

EMScertifications@smcgov.org

You will need to enter your EMT number and expiration date from your current card.

Scroll to the bottom and select "Save and Continue"



Section 3: INITIAL EMT QUALIFYING CRITERIA

This section requires you to upload your CE Summary, EMT Skills Verification Form, EMT Expanded Scope Certificate, BLS/CPR card and enter your Agency Affiliation.

Required documents will be emailed to you - you will need to save them to your desktop so you can upload into the application.

CHOOSE "YES" when asked if you are currently employed as an EMT.

Section 4: CONTINUING EDUCATION/SKILLS COMPETENCY/EMPLOYMENT

This section requires you to upload your CE Summary, EMT Skills Verification Form, EMT Expanded Scope Certificate, BLS/CPR card and enter your Agency Affiliation.

Required documents will be emailed to you - you will need to save them to your desktop so you can upload into the application.

Renewal Certification (*current or expired* < 6 *months*)

By signing below, you are certifying that you have sucessfully completed the required continuing education ("CE"), as specified below:

Continuing Education Requirements **Upload Requirements** (CCR § 100080(a)(2)(A-B), § 100081(a)(1)(A-B), Successful completion of a twenty-Complete a minimum of twenty-four CE certificate(s) four (24) hour EMT refresher course (24) hours of continuing education 0 from an approved EMT Training from an approved CE provider R If uploading multiple CE certificates, please Program within twenty-four (24) within twenty-four (24) months of combine into a single file prior to upload months of application date* application date*

*At least 50 percent of the required CE hours must be in a format that is instructor-based, which means that instructor resources are readily available to the student to answer questions, provide feedback, provide clarification, and address concerns (e.g., online CE courses where an instructor is available to the student) (CCR §100391.1(a)(9)).

Commission on Accreditation for Prehospital Continuing Education ("CAPCE") course code descriptions:

- F1 Live in-person continuing education
- F2 Live in-person continuing education (continuous/cyclical)
- F3 Online distributive continuing education
- F4 Online adaptive/ interactive distributive continuing education
- F5 Virtual instructor-led training continuing education

CAPCE categories F1, F2, and F5 are considered instructor-based continuing education.

It is responsibility of each EMT to verify continuing education course classification (e.g., instructor-based, or non-instructor based) prior to taking a course. The classification of continuing education submitted with an application will be verified to ensure that it meets the 50 percent instructor-based minimum.

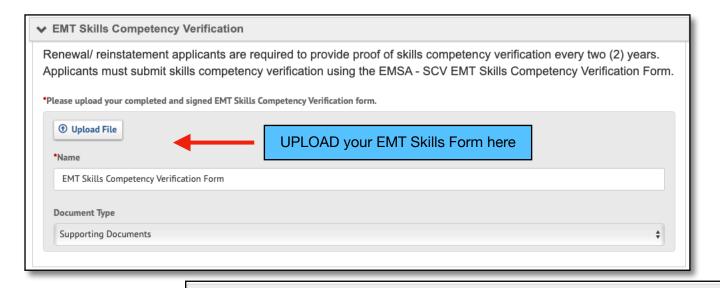
California regulations require you to mainin CE records for a minimum of four (4) years. CE audits may occur at any time during that period, and if requested, original CE records must be produced. Intentional submission of false or altered CE certificates may result in disciplinary action, including denial, suspension, or revocation of your EMT certificate.

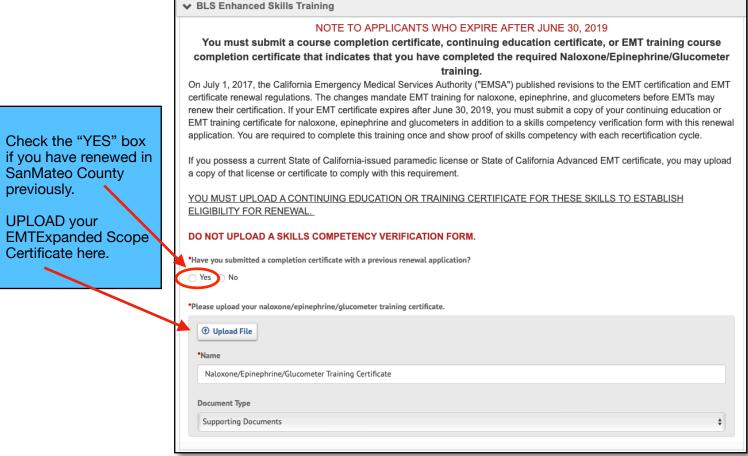
Please enter your initials to acknowledge that you have completed the continuing education requirement for this application.

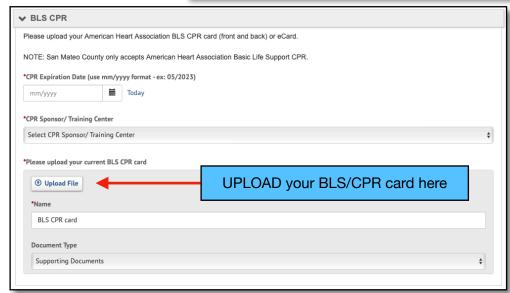
Please upload your continuing educaiton certificates used to establish recertification eligibility.

Please use the following naming convention for the uploaded file(s)

"Class name" - "CE hours issued" "Month/Year" Example: Traumatic Injuries - 2 hours (04/22)				
*Upload your continuing education certificate(s).				
Upload File UPLOAD your CE Summary here *Name				
Name				
Document Type Continuing Education	*			







NEXT:

The final box on the page asks about Agency Affiliation. Check "YES" when asked if you are affiliated with an "EMS Provider Agency"

Section 5: BACKGROUND INFORMATION

CHOOSE the category that applies to you - for most, it will be "Current EMT". If out on prolonged DL, indicate how long your card has been lapsed.

The second question asks how you will be submitting your CE hours. CHOOSE "24 hours of approved CEs".

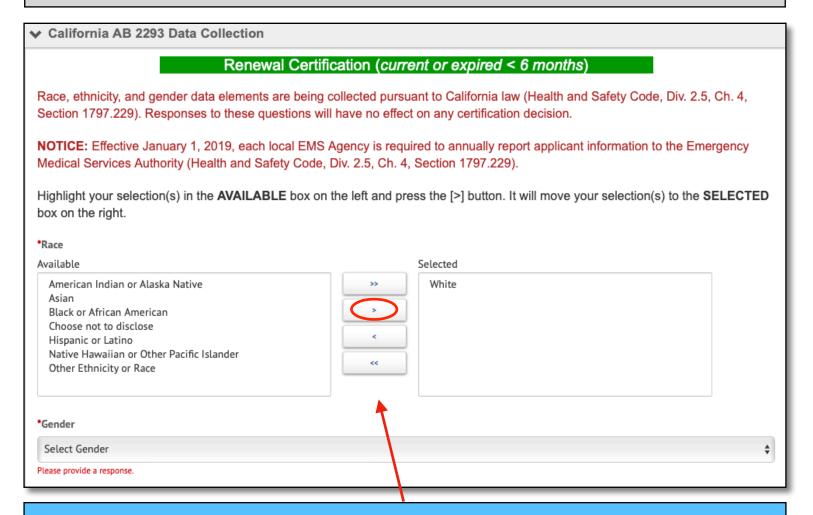
This section asks about conviction history or pending criminal charges. Read the questions carefully and answer honestly.

If you have previously informed the county about previous convictions, you will likely not be asked to provide any further details.

If you have questions about how to fill out this section, contact Training for guidance.

Section 6: MANDATED APPLICANT DATA COLLECTION

This section request that you disclose your race for data collection. You may select "Choose Not To Disclose" if you do not want to participate in data collection.



Click on your race and use the right arrow to select it. It will then be moved to the box on the right. Then select your gender from the dropdown provided. Click "Save and Continue"

Section 8: SIGNATURE PAGE

There is a payment section on this page but your home agency will be automatically invoiced upon completion of the application. There is no need to input any personal financial information.

TYPING you password will be considered your signature to complete the application.

