Idaho AEMT Transition Course
Individual Continuing Education Tracking

Licensed providers who attend a transition course can count each hour in the transition course for continuing education if signed and verified by the course instructor. It is therefore strongly encouraged for students to track their transition course hours and associated categories and venues of the hours*. Make sure to have your instructor sign and verify your attendance. *Your instructor may track these hours for you, please verify with your instructor. Remember, meeting personnel license renewal requirements is your responsibility, not your instructor's.*

*Students who complete 75% of their required continuing education hours in an Idaho approved transition course are exempt from venue requirements outlined in by IDAPA 16.01.07 EMS Personnel Licensing Requirements.

Continuing Education Categories for Personnel Licensure Renewal

1. Pediatric Assessment and Management
2. Anatomy and Physiology
3. Medical Terminology
4. Pathophysiology
5. Life Span Development
6. Public Health
7. Pharmacology
8. Airway Management, Ventilation, and Oxygenation
9. Patient Assessment
10. Medical Conditions
11. Shock and Resuscitation
12. Trauma
13. Special Patient Populations (Such as bariatric, geriatric, obstetrics, pregnancy, etc.)
14. EMS Systems and Operations

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Preparatory • EMS Systems	I. Standard IDAPA 16.01.07.075 Standards of Professional Conduct for EMS Personnel II. Patient Safety				
Preparatory • Research	I. Evidence-Based Decision-Making				
Preparatory • Workforce Safety and Wellness	I. (Selected Topics in) Lifting and Moving Patients				
Preparatory • Therapeutic Communications	I. Principles of Communicating With Patients in a Manner That Achieves a Positive Relationship				
Preparatory • Medical/Legal Ethics	I. Confidentiality II. Advanced Directives III. Tort and Criminal Actions				
Anatomy and Physiology	I. Anatomy and Body Functions II. Life Support Chain III. Age-Related Variations for Pediatrics and Geriatrics				

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Pathophysiology	I. Alteration in Cells and Tissues II. Cellular Injury III. Hypoperfusion				
Life Span Development	I. Infancy II. Toddler and Preschool Age III. School-Age Children IV. Adolescence V. Early Adulthood VI. Middle Adulthood VII. Late Adulthood				
Pharmacology • Principles of Pharmacology	I. Medication Safety II. Medication Legislation III. Naming IV. Classifications V. Storage and Security VI. Drug Terminology VII. Pharmacological Concepts				
Pharmacology • Medication Administration	I. Administration of Medication to a Patient				
Pharmacology • Emergency Medications	I. Specific Medications II. Special Considerations in Pediatrics and Geriatrics				
Airway Management, Respiration, and Artificial Ventilation • Airway Management	I. Airway Anatomy II. Airway Assessment III. Techniques of Assuring a Patent Airway IV. Consider Age-Related Variations in Pediatric and Geriatric Patients				
Airway Management, Respiration, and Artificial Ventilation • Respiration	I. Anatomy of the Respiratory System II. Physiology of Respiration III. Pathophysiology of Respiration IV. Assessment of Adequate and Inadequate Ventilation V. Management of Adequate and Inadequate Respiration VI. Supplemental Oxygen Therapy VII. Consider Age-Related Variations in Pediatric and Geriatric Patients				
Airway Management, Respiration, and Artificial Ventilation • Artificial Ventilation	I. Comprehensive Ventilation Assessment II. The Management of Inadequate Ventilation III. The Differences Between Normal and Positive Pressure Ventilation IV. Consider Age-Related Variations in Pediatric and Geriatric Patients				
Patient Assessment • Scene Size Up	I. Scene Safety				
Patient Assessment • Primary Assessment	I. Primary Survey / Primary Assessment II. Integration of Treatment / Procedures Needed to Preserve Life III. Evaluating Priority of Patient Care and Transport				
Patient Assessment • History-Taking	I. Investigation of the Chief Complaint II. History of Present Illness III. Standardized Approach to History Taking				

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Patient Assessment • Secondary Assessment	I. Techniques of Physical Examination II. Assessment of Lung Sounds III. Special Considerations for Pediatric and Geriatric Patients				
Patient Assessment • Monitoring Devices	I. Blood Glucose Determination II. Other Monitoring Devices				
Patient Assessment • Reassessment	I. How and When to Reassess II. A Reassessment Includes III. Vital Signs IV. Age-Related Considerations for Pediatric and Geriatric Assessment				
Medicine • Abdominal and Gastrointestinal Disorders	I. Define Acute Abdomen II. Anatomy of the Organs of the Abdominopelvic Cavity III. Assessment of Symptoms IV. General Management for Patients With an Acute Abdomen V. Specific Acute Abdominal Conditions VI. Consider Age-Related Variations for Pediatric and Geriatric Assessment and Management VII. Pediatrics VIII. Communication and Documentation for Patients with an Abdominal or Gastrointestinal Condition or Emergency IX. Transport Decisions				
Medicine • Neurology	I. Stroke/TIA				
Medicine • Immunology	I. Introduction II. Basic Immune System's Response to Allergens III. Pathophysiology IV. Assessment V. Managing Anaphylaxis VI. Age Related				
Medicine • Infectious Diseases	I. Standard Precautions, Personal Protective Equipment, and Cleaning and Disposing of Equipment and Supplies II. Specific Diseases and Conditions				
Medicine • Endocrine Disorders	I. Pathophysiology II. Increased Prevalence of Diabetes				
Medicine • Psychiatric	I. Psychiatric Emergencies – Agitated Delirium				
Medicine • Cardiovascular	I. Anatomy of the Cardiovascular System II. Physiology III. Angina Pectoris / Acute Coronary Syndrome IV. Acute Myocardial Infarction				
Medicine • Toxicology	I. Toxic Syndromes				
Medicine • Respiratory	I. Anatomy and Physiology II. Pathophysiology III. Assessment IV. Treatment				
Medicine • Hematology	I. Sickle Cell Disease				
Medicine • Genitourinary/Renal	I. Anatomy and Physiology				

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Medicine • Gynecology	I. Specific Gynecological Emergencies—Definition, Causes, Risk Factors, Assessment Findings, Management				
Medicine • Non-traumatic Musculoskeletal Disorders	I. Anatomy and Physiology Review II. Pathophysiology				
Trauma • Trauma Overview	I. Identification and Categorization of Trauma Patients				
Trauma • Bleeding	I. Fluid Resuscitation in Bleeding and Shock II. Special Considerations in Fluid Resuscitation				
Trauma • Chest Trauma	I. Traumatic Aortic Disruption II. Pulmonary Contusion III. Blunt Cardiac Injury IV. Hemothorax V. Pneomothorax VI. Cardiac Tamponade VII. Rib Fractures VIII. Flail Chest IX. Commotio Cordis				
Trauma • Abdominal and Genitourinary Trauma	I. Incidence II. Anatomy III. Physiology IV. Specific Injuries V. General Assessment VI. General Management VII. Age-Related Variations for Pediatric and Geriatric Assessment and Management VIII. Special Considerations of Abdominal Trauma				
Trauma • Head, Facial, Neck and Spine Trauma	I. Facial Fractures II. Laryngeotracheal Injuries				
Trauma • Nervous System Trauma	I. Incidence of Traumatic Brain Injury II. Traumatic Brain Injury				
Trauma • Special Considerations in Trauma	I. Trauma in Pregnancy II. Pediatric Trauma III. Geriatric Trauma IV. Cognitively Impaired Patient Trauma				
Trauma • Environmental Emergencies	I. Submersion Incidents II. Bites and Envenomations III. Diving Emergencies (Dysbarism) IV. Radiation				
Trauma • Multi-System Trauma	I. Kinematics of Trauma II. Specific Injuries Related to Multi-System Trauma Blast Injuries				
Special Patient Populations • Obstetrics	I. Complications of Pregnancy				

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Special Patient Populations • Pediatrics	I. Anatomy and Physiology II. Airway Compared to an Adult's III. Chest and Lungs Compared to an Adult's IV. Abdominal Difference V. Extremities Compared to Adult's VI. Integumentary Differences VII. Respiratory System Compared to an Adult's VIII. Nervous System and Spinal Column Compared to an Adult's IX. Metabolic Differences Compared to an Adult X. Growth and Development XI. Assessment XII. Specific Pathophysiology, Assessment, and Management				
Special Patient Populations • Geriatrics	Anatomical & Physiological Changes, and Pathophysiology of the I. Cardiovascular System II. Respiratory System III. Neurovascular System IV. Gastrointestinal System V. Genitourinary System VI. Endocrine System VII. Musculoskeletal System VIII. Toxicological Emergencies IX. Sensory Changes in the Elderly X. Fluid Resuscitation in the Elderly				
Special Patient Populations • Patients With Special Challenges	I. Abuse and Neglect II. Homelessness/Poverty III. Bariatric Patients IV. Technology Assisted/Dependent V. Hospice Care and Terminally Ill VI. Sensory Deficits VII. Homecare VIII. Patient With Developmental Disability				
EMS Operations • Principles of Safely Operating a Ground Ambulance	I. Risks and Responsibilities of Emergency Response				
EMS Operations • Multiple Casualty Incidents	I. Triage				
EMS Operations • Mass Casualty Incidents Due to Terrorism and Disaster	I. Risks and Responsibilities of Operating on the Scene of a Natural or Man-Made Disaster				

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EMS Operations • Incident Management	I. Establish and Work Within the Incident Management System			This can be done as a Co- or Pre-requisite	Students need ICS -100 and FEMA IS-700 Certificates to meet this requirement.
EMS Operations • Hazardous Materials Awareness	I. Risks and Responsibilities of Operating at a Hazardous Material or Other Special Incident			This can be done as a Co- or Pre-requisite	Students need Hazmat Completion Certificate to meet requirement.
EMS Operations • Extrication Awareness	I. Establish and Work Within State Extrication Awareness Training II. Extrication Awareness Training Must Include the Following:			This can be done as a Co- or Pre-requisite	Students need Extrication Awareness completion certificate to meet requirement
Psychomotor Skills	I. Skills or interventions added to the 2011 IEC or EMSPC Scope of Practice II. Skills or interventions Removed From the EMSPC Scope of Practice				