

TENNESSEE MILITARY MEDIC TO CIVILIAN AEMT TRANSITION



GAP ANALYSIS

SPECIAL THANKS TO



Eric McCullough, Sergeant, 68W2F, Tennessee Army National Guard

David Belvins, 1 Lt., 14N1, Intelligence Officer, Tennessee Air National Guard

Jimmy Contreras, Civilian, Training Officer- First Call, NAEMT Instructor (All courses)

Tracey Banta, Sergeant First Class, 1-169th Medevac Aviation Detachment First Sergeant, Tennessee Army National Guard (Consultant)

GOAL

- Allow military medics to use their military training and experience for civilian Advanced EMT licensure.
- Providing a pathway to civilian medical licensure
- Employing veteran medics into the civilian workforce preserves fighting strength and clinical competence since they are able to use their military-acquired skills on a regular basis

FINDINGS

- Military medics who currently serve or have served in the Army and the Air Force best fit the Tennessee AEMT licensure mold.
- Army 68W healthcare specialist, or “combat medic,” and the Air Force medical specialist occupations are certified as emergency medical technicians under the current DOT National EMS Education Standards
- Attend advanced training classes where they are taught advanced procedures consistent with the AEMT and paramedic scope of practice.

GAPS IDENTIFIED



- Between a military medic and their civilian counterpart is based on patient population exposure.
- Trauma and limited provider care for basic injuries and illness is the main focus of military medic training and experience.
- Little to no experience assessing and treating the pediatric, geriatric, medically complex, or chronically-ill populations.

CONCLUSION

- Gap analysis is sufficient to bridge these military medics to Tennessee AEMT licensure but not paramedic because the theory, practical, and clinical gap is too wide.
- Training is needed in assessing and treating the pediatric, geriatric, medically complex, or chronically-ill populations for successful transition to AEMT.

RECOMMENDED GUIDELINES FOR ELIGIBILITY

- Must have held the army healthcare specialist (68W) or air force medical specialist designation within the past 2 years.
- If discharged, the discharge must be characterized as honorable.
- Submit documentation of training from accrediting/certifying military body to the state.

RECOMMENDED PROCESS FOR TRANSITION

COMPLETION OF:

- State approved AEMT transition course
 - ▣ Attention on assessing and treating the pediatric, geriatric, medically complex, or chronically-ill populations. (didactic, lab and clinical)
- State approved AEMT Program Final Cognitive and Psychomotor exam.
- State-approved AEMT written and psychomotor exam (NREMT AEMT Exam)

Note on Navy Corpsmen and Special Forces Medics:

- More research on how Navy corpsmen/ women can transition to a Tennessee EMT or Advanced EMT licensure is needed because these military medics do not earn their basic NREMT certificate.
- Army Special Forces medics (18D) and Air Force Para rescue Jumpers (PJs) are excluded from this document and transition because they are already eligible for paramedic testing

NEXT STEP FOR TN

- Identify the standards
- Develop the curriculum
- Present to Colleges for review and acceptance for advanced placement in AEMT.