



## Loyola EMS System ♦ EMT ♦ System Entry Requirements

Thank you for your interest in the Loyola Emergency Medical Services System. Prior to functioning as a licensed EMT-B in the Loyola System, the following documentation is required for your provider file:

- \_\_\_\_\_ Photocopy of Current Illinois EMT License
- \_\_\_\_\_ Photocopy of Current Illinois Driver's License
- \_\_\_\_\_ Photocopy of Current **Healthcare Provider** CPR Card
- \_\_\_\_\_ Completed *Personnel Data* Form
- \_\_\_\_\_ Completed *Background Check Verification* Form signed by EMS Chief or Coordinator
- \_\_\_\_\_ System Entry Application Fee of \$30.00  
(cash, credit card, cashier's check or money order payable to Loyola EMS – personal checks are not accepted)

The EMT system entry written exam consists of 50 questions concerning issues that are specific to the Loyola EMS System. After successfully completing the written exam with a score of 80% or better, applicants will undergo an oral exam that will test their knowledge of appropriate BLS patient care based on Region VIII SOPs.

The following *System Entry Study Guide* should be utilized to help you prepare for the written exam. It is recommended that you print the guide and refer to it as you read through the "**Standard Operating Procedures**" and the "**Loyola Policies and Procedures**" on line. All exam questions are based on these two documents.

System Entry testing is offered in our EMS office several times a month. You must schedule an appointment to take the exam. Failure to notify our office that you are unable to keep your appointment will be recorded as a system entry failure.

Should your first attempt at system entry be unsuccessful, you may schedule one retest. **A second fee of \$30.00 will be required.** A second unsuccessful system entry testing session will result in a mandatory waiting period of three months before a third test may be scheduled.

Please call the EMS office at **708-327-2547** to schedule an appointment or if you have any questions or concerns.

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**\*\* Please note:** If your Loyola System employer is not able to sign your background check verification form, or you wish to enter the system as an independent, you must first undergo a fingerprint background check through the Loyola Human Resources Department. Please call the EMS office at **708-327-2547** to make the arrangements. After your background check is completed you may call the EMS office to schedule your system entry exam.



## Loyola EMS System ♦ EMT ♦ System Entry Study Guide

**Standard Operating Procedures (SOPs)** located on [www.loyolaems.com](http://www.loyolaems.com)

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| Outline for Radio Report                            | 1           |
| Adult General Patient Assessment                    | 2           |
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| Initiation of ALS Care                              | 7           |
| Withholding/Withdrawing Resuscitative Efforts       | 9-10        |
| Living Wills / Surrogates                           |             |
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| Emergency Childbirth                                | 73-76       |
| Delivery Complications                              | 78          |
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| Pediatric Heat Emergencies                          | 101         |
| Narcan  | 122         |

**Loyola System Specific Policies**

located on [www.loyolaems.com](http://www.loyolaems.com)

| <u>Policy</u>  | <u>Number</u> |
|--|---------------|
| Behavioral Emergency: Judgment of Uncooperative / Impaired Patient | 200.7         |
| Use of Restraints  | 200.8         |
| Consent / Refusal of Treatment / Non-Impaired Person               | 200.10        |
| Release of Uninjured Students from School Bus Scenes               | 200.10a       |
| Transport to Other than the Closest, Most Appropriate Hospital     | 200.12        |
| Do Not Resuscitate (DNR) Order                                     | 200.14        |
| Victims of Abuse   | 200.18        |
| Run Reports  | 200.19        |
| Illinois Abandoned Newborn Infant Protection Act                   | 200.21        |
| Medication Exchange  | 300.3         |
| Prehospital Provider Relicensure Requirements                      | 400.7         |
| Provider Continuing Education Requirement / Modular Exams          | 400.10        |
| Exposure Notification Plan   | 700.2         |
| System Participation Suspension                                    | 900.1         |