EMS Provider Manual

This walkthrough is designed to allow you to be able to, as a provider, get started using Licensure. It is designed as a step by step instructional guide to help you perform the basic steps necessary to complete the certification process for renewal. This guide will have pictures and step by step information to help you through this process.

First thing you will need to do is follow this link:

Licensure Portal

Once there you will see this screen

Sta	te of Nevada Emergency Medical Systems
Account Login	Welcome to the Nevada EMS State Online Application Portal (EMS SOAP)
) Lookup	Please read each of the three options carefully before continuing:
Lookup	If you do not have a current & valid email address <u>DO NOT CONTINUE</u> . You are required to have a valid email address to process and complete applications. Please contact our office (775.687.7590 or email HealthEMS@health.nv.gov) for further information on how to apply for licensing. If you have a current & valid email address, follow the instructions below;
	OPTION 1: CLAIMING YOUR ACCOUNT: If you currently hold a State of Nevada EMS license, but you have not yet claimed your account in our new on- line system, select "Forgot Username" below and follow the instructions.
	OPTION 2: CREATE AN ACCOUNT: If you do not have a State of Nevada EMS license, you can create an account by selecting the "Create Account" button below.
	OPTION 3: RETURNING USERS: Please enter your name and password below.
	If you have any questions, we are here to help. Please contact our office at (775) 687-7590 or email HealthEMS@health.nv.gov
	You can also visit the Nevada Division of Public and Behavioral Health (DPBH) EMS http://dpbh.nv.gov/Reg/EMS/EMS-home/
	Login
	stbradford
	Forgot Username or Forgot Password?
	Login Create Account
	State of Nevada Office of EMS
	state of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706

At this point you will not have logged in to this system before.

If you have a certification then you probably have an account already setup in our system.

Please follow the instructions onscreen to claim your account. Click the Forgot Username link under the password field in the Login section.

Username		
Password		
	Forgot Password?	

Once you click that link you will come to this screen

Sta	te of Nevada Emergency Medical Systems
Account Login	Forgot Username
🗢 Training	Search for your username by entering the following information:
Q Lookup	*Home Phone:
	State of Nevada Offrice of EMS 4150 Technology Way, STE 101, Carson City, NV 89706 (775) 687-7590

This screen requires you to enter 3 pieces of information to log in.

Your Home Phone number, Last Name and SSN. These fields are Required.

If any of this information has changed please contact EMS Staff to change this information.

Once you fill out these fields and click lookup an email will be sent to the email address on file that will give you a link to allow you to see your username and set your password.

Once you set your new password, The system will log you in automatically but please memorize your username and password and then go to this <u>link</u> and login to the portal.

You will now be redirected to this My Account screen

Note: This screen will look differently for you based on the information on file and the level you hold

		Welcome Technel Technel Linear
My Account		Welcome, Tester1 Testing Logout
Profile	My Account	
Issued Application	For more detail about any item, click the links on this page or in the left me	enu.
Documents	Tester1 Testing 🔚 Generate Card	
Applications	EMT Number: 11000	Forms pending completion
	Issued: 12/27/2018 Expiration: 03/26/2020	1 Item waiting in checkout
🗢 Training		
* Service	0 New training added	I am looking for Personnel
	Upcoming training this week	License Number Name Certification Number

Please click the applications link on the left and you will go to this screen

State of Nevada Emergency Medical Systems

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If you have already completed an initial application before you will need to start the Renewal Application link on this page.

Image: Service Control Image: Service Control Image: Control Control <t< th=""><th>💐 Sta</th><th>ate of Nevada Emergency Medical Systems</th></t<>	💐 Sta	ate of Nevada Emergency Medical Systems
 My Account Applications Continue Checkout 1 Trainsing Service Dokup Mignature 10 (100 (100 (100 (100 (100 (100 (100		Welcome Testert Testing I Logaut
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Applications Action Q. Lookup Emergency Medical Services Initial Application Complete this application for an initial EMS certification. Apply Nov Emergency Medical Services Renewal Application Please complete this renewal application for the following: Certification and License Certification and License, to include instructor endorsement renewal A \$50 late fee will apply to all applications submitted after March 31, 2019 Apply Nov Records 1-2 of 2	-	EMT Issue Date: 12/27/2018
• Complete this application for an initial EMS certification. Apply Now Complete this application for an initial EMS certification. Apply Now Energency Medical Services Renewal Application Apply Now Please complete this renewal application for the following: Certification and License Certification and License, to include Apply Now Please complete this renewal application for the following: Certification submitted after March 31, 2019 Apply Now Please complete this renewal application for the following: Certification submitted after March 31, 2019 Records 1-2 of 2 • 2018 ImageTrend, Inc. State of Nevado Office of EMS 450 Technology Way, STE 101, Carson City, NV 89706	* Service	Applications Action
Please complete this renewal application for the following: Certification and License Certification and License, to include instructor endorsement renewal A \$50 late fee will apply to all applications submitted after March 31, 2019 Records 1-2 of 2 © 2018 ImageTrend, Inc. State of Nevada Office of ENS 4150 Technology Way, STE 101, Carson City, NV 89706	Q Lookup	Apply Now
© 2018 ImageTrend, Inc. State of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706		Please complete this renewal application for the following: Certification Only Certification and License Certification and License, to include Apply Now
State of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706		Records 1-2 of 2
4150 Technology Way, STE 101, Carson City, NV 89706		
(11) 001-100		

The Renewal Application link Looks like this



You will follow the instructions on the application to Renew.

All items marked with a red * are required any items that need to be uploaded should be uploaded while going through the application.

To upload a document such as your drivers license copy please click the upload file link

Note: Name is not required on this field as it automatically fills the field

Upload File	
"Name	
Document Type	
Drivers License	*

If you have the training set through a Nevada Agency, then you will NOT be required to upload documentation as it will be provided through the training module. If you are NOT getting the training through a Nevada Agency then you will be required to upload documentation as follows.

Yes	tion needed to uplo	ad for the Supplemer	tal Education?		
No					
ease add your CEU's and AC	CLS, PALS and ITLS (Cards here.			
Supplemental Training					
Training History:					
Trainings from 3/25/19 to 3/2	25/20 are valid toward	s the above requireme	nts.		
Course Name	Date	Location	Certificate	Topic Hours	
No Records					
				(+ Add Training

Click the add training button and this window will popup

Training:		
*Name		
*Date	mm/dd/yyyy 🗰 Today	
Certificate:	Choose File No file chosen	
Topics:	Max File Size: 30000KB	
Save Cancel		
*Did you do yo	our training through a Nevada Agency?	

Fill in the information about your training and add the topics, make sure you upload the file associated with this education.

Then click Save and Continue

→ Save and C	ontinue
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On the next screen make sure to upload any documentation required, Physician Statement etc.

Select your Service affiliation. You are able to add as many as you want just make sure your primary is selected.

Select if the primary service will be paying for this Certification/License.

Then Click Save and Continue

→ Save and Continue

The waiver and Affidavits must be signed and dated, dates are todays date only.

Signature		
Username:	TTesting	
Password:		
Date		

Save and Continue

After you sign and date please Click the Save and Continue button on each one

The last page is the Certification of applicant and is the final page.

After Signing and dating Click the submit button.

EMS Renewal /	Application Form						
Demographics	Certification level an	d supporting cards	Attendant License	Fingerprint Waiver	Child Abuse Affidavit	Signature	
Certification Of An Applicant This application must be signed and dated within the last 6 months I hereby certify that all statements made in this application are true and I agree and understand that any misstatements or ommision of material facts herein may cause forfeiture on my part of all rights to certification and/or licensure by the State of Nevada as an Emergency Medical Technician and/or Licensed Attendant.							
*Applicant's es	Signature						
	Username: TTesting Password:						
Fe	1550010.						
*Date of Applic	cant's Submission (m	uust be today's date)				
mm/dd/yyyy		loday					
	ou DO NOT wish to s es. If you do not, we			mation and updates f	rom the Health Division	's Office of Emergency	
No							

Submit

This concludes the walkthrough for the EMS Renewal Form