## **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:
Cookup	If you do not have a current & valid email address DO NOT CONTINUE. 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
	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		
	Earnal Daanward?	

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

		Wolcome Testari Testing Llagou
My Account		Welcome, rester i resting   Logou
Profile	My Account	
Issued Application	For more detail about any item, click the links on this page or in the left m	ienu.
Documents	Tester1 Testing 🔚 Generate Card	
Provide the second seco	Number: 11000	2 Forms pending completion
-	Expiration: 03/26/2020	T tient waiting in checkout
training :		
* Service	New training added	Personnel
Q Lookup	U 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       Contrul         Image: Service       Contrul         Image: Contrul       Contrul <t< th=""><th>💐 Sta</th><th>ate of Nevada Emergency Medical Systems</th></t<>	💐 Sta	ate of Nevada Emergency Medical Systems
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<ul> <li>Training</li> <li>* Service</li> <li>Cokup</li> <li>A Lookup</li> <li>Application for an initial EMS certification.</li> <li>Complete this application for an initial EMS certification.</li> <li>Apply Nov</li> <li>Description description of the following: Certification only Certification and License, to include instructor endorsement renewal A \$50 late fee will apply to all applications submitted after March 31, 2019</li> <li>Catta de Merada Office of EMS</li> <li>Catta Merada Office of EMS</li> </ul>	Checkout 1 Transaction	My Applications
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Q Lookup       Emergency Medical Services Initial Application Complete this application for an initial EMS certification.       Apply Now         Emergency Medical Services Renewal Application Please complete this renewal application for the following: Certification only Certification and License, to include instructor endorsement renewal A 550 late fee will apply to all applications submitted after March 31, 2019       Apply Now         Records 1-2 of 2	* Service	Applications Action
Emergency Medical Services Renewal Application       Apply Now         Please complete this renewal application for the following: Certification only 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         Calls ImageTrend, Inc.       State of Newada Office of EMS 4150 Technology Way, State JD, Carson City, NV 89706       State of Newada Office of EMS 4150 Technology Way, State S	Q Lookup	Emergency Medical Services Initial Application Apply Now Complete this application for an initial EMS certification.
© 2018 ImageTrend, Inc. State of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706		Emergency Medical Services Renewal Application Please complete this renewal application for the following: Certification Only 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
© 2018 ImageTrend, Inc. State of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706 7775/887 7500		Records 1-2 of 2
State of Nevada Office of EMS 4150 Technology Way, STE 101, Carson City, NV 89706 (775) 897 7500		© 2018 ImageTrend, Inc.
(11) 001-100		State of Nevada Office of EMS 4150 Technology Way, STE 101, Cartson City, NV 89706 (775) 687-7590

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	tation needed to uplo	ad for the Suppleme	ntal Education?		
No					
lease add your CEU's and A	CLS, PALS and ITLS (	Cards here.			
Supplemental Training					
Training History:					
Training History: Trainings from 3/25/19 to 3/	/25/20 are valid toward	s the above requireme	ents		
Training History: Trainings from 3/25/19 to 3/ Course Name	/25/20 are valid toward Date	s the above requireme Location	ents. Certificate	Topic Hours	
Training History: Trainings from 3/25/19 to 3/ Course Name No Records	/25/20 are valid toward Date	s the above requireme Location	ents. Certificate	Topic Hours	
Training History: Trainings from 3/25/19 to 3/ Course Name No Records	/25/20 are valid toward Date	s the above requireme Location	ents. Certificate	Topic Hours	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	Continue
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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.

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
I hereby certi herein may ca	ify that all statements i iuse forfeiture on my p	This application made in this application art of all rights to ceri	Certification Of A n must be signed and o on are true and I agree tification and/or licensu Licensed Atter	An Applicant dated within the last 6 r and understand that a ure by the State of Neva ndant.	nonths iny misstatements or om ada as an Emergency Me	mision of material facts edical Technician and/or
*Applicant's es	Signature					
Username: TTesting						
Fe	1550010.					
*Date of Applic	cant's Submission (m	ust be today's date	)			
mm/dd/yyyy		loday				
Select 'No' if yo Medical Servic Yes	ou DO NOT wish to s es. If you do not, we	ubscribe to our List will add you to our	Serv to recieve infor ListServe.	mation and updates f	rom the Health Division	's Office of Emergency
No						

Submit

This concludes the walkthrough for the EMS Renewal Form