| *   | SOUTHERN FOX VALLEY<br>Emergency medical services system<br>Policy & procedures |                       |                     |  |  |  |
|---|---|-----------------------|---------------------|--|--|--|
| TITLE: VIDEOCONFERENCING                            |   |                       |                     |  |  |  |
| SECTION: EDUCA                                      | ATION AND LICENSURE   | POLICY NUMBER: C-31.0 |                     |  |  |  |
| APPROVED BY: DR. ARTHUR PROUST EMS MEDICAL DIRECTOR |   |                       |                     |  |  |  |
| EFFECTIVE DATE: 5/21/2009                           |   |                       | PAGE NUMBER: 1 OF 1 |  |  |  |

## PURPOSE:

- 1. To identify the procedures relating to teleconferencing continuing education session
- 2. To ensure that proper credit is awarded for students that attend classes at departments that are remote from the classroom where the continuing education session is being presented.

## POLICY:

- 1. There will be one sign-in sheet that will be filled out at the station where the continuing education session is being presented.
- A person at that location will take responsibility for the verification of the people that attend the outside stations and will sign the roster and signify that these people are in attendance. (An officer or other senior department member)
- 3. All applicable handout materials will be e-mailed to the EMS coordinator no less than 2 weeks prior to the continuing education session date.
- 4. Completed quizzes may be faxed to the session location while the instructor is still present or may be collected and sent to the EMS office in a timely fashion to ensure proper credit is awarded.

| Effective Date:   | 5/21/2009 |  |  |  |  |  |  |
|-------------------|-----------|--|--|--|--|--|--|
| Review Date(s):   | 10/4/2010 |  |  |  |  |  |  |
| Revision Date(S): |           |  |  |  |  |  |  |