# **Tip Sheet: Scheduling a Psychomotor Exam**

- **1.** Log into NREMT.org and select the "Exam Coordinator" role.
- **2.** From your Exam Coordinator Dashboard, click to expand the "EXAMS" option. Select the option to "Request Exam."



#### 3. START THE EXAMINATION WIZARD

You will then be presented with the following screen, on which you may download the <u>Advanced Level</u> <u>Exam Coordinator Manual.</u> Be sure to read all information available on the screen. You may access the list of available NREMT Representatives from this screen by clicking "NREMT REPS." Click "Start Examination Wizard" to begin scheduling your exam.

My Current Role	
Exam Coordinator	Thank you for your interest in hosting an Advanced Level Psychomotor Examination. As an Examination Coordinator, you assume many responsibilities that are vital to the success of the psychomotor examination. Please take the time to review the Advanced Level Examination Coordinator Manual rest. This comprehensive manual details all aspects of coordinating an Advanced Level Psychomotor Examination and is designed to assist you in planning for all related aspects of the examination. The quality of your experience with this certification process is directly dependent upon your thorough familiarization with all of the material.
View Requested Exams View Approved Exams Locate An Exam C Request Exam Host	ATTENTION A The NREMT Representative must be contacted before requesting an Advanced Level Psychomotor Examination.Clicking on the NREMT Reps button will provide you with a list of NREMT Representatives to contact. NREMT REPS
<ul> <li>RESERVATION LISTS &gt;</li> <li>NREMT REPS</li> <li>C REMEDIAL TRAINING</li> </ul>	Click on the Start Examination Wizard button below to begin the process of requesting a new Advanced Level Psychomotor examination. The wizard will lead you through a series of steps that will assist you in properly requesting an NREMT Advanced Level Psychomotor Examination.

# 4. EXAM LEVEL

Select all examination levels that will be administered at the examination site. Then click "Next."



# 5. EXAM DETAILS

On the Examination Details page, you will select your examination host from your preferred examination hosts, or you will choose another by clicking "Choose Another Examination Host."

If you are not able to find the host for your examination by clicking "Choose Another Examination Host," please request a new examination host by clicking" Request New Host".

Details					
Examination Host					
Your preferred examination hosts are listed. Please select the correct host. If the host for this examination is not in the list, click <b>Choose Another Examination Host</b> to select another host. If you are <u>not</u> able to find the host for this examination by clicking Choose Another Examination Host, please <b>Request New Host</b> .					
	Site Name	Location			
You do not have any preferred examination hosts.					
	Other: Choose Another Examination Host Request New Host				

On the Examination Details page, you will also indicate the state of your examination and the representative you've selected. <u>Remember to not select a representative unless you have already contacted them; this can cause your exam request to be delayed or declined.</u>

Lastly, you must indicate whether your examination will be open or closed. Then click "Next".

NREMT Representative	Examination Schedule Type
All advanced exams must have an authorized NREMT	Select the schedule type for the exam:
you have already made arrangements to work at your exam.	Open     Closed
<b>DO NOT</b> select a representative unless you have already contacted them; this can cause your exam request to be delayed or declined.	
State	
Select State 🔻	
Representative	
Select Representative •	
PREV	NEXT

### 6. EXAMINATION LOGISTICS

#### On the Logistics page, you will enter the location and the date and time of your examination.

This is the address that candidates looking at exams will see for the exam site. It should be an address that MapQuest will recognize, so the candidate can get a map to the site.				
Note It is the responsibility of the exam requester to ensure the	hat this information is accurate.			
Examination Location Same as Exam Host	Examination Date and Time			
Location Description	Date			
Location Description	Examination Date			
Street Address	Please enter the examination date.			
Street Address	Time			
Please enter the street address.	Examination Time			
City	Please enter the examination time.			
City				
Please enter the city.				
State				
Select State 🔻				
Please select a state.				
Zip				
Zip				
Please enter the zip code.				

On the Logistics page, you will also indicate your maximum exam size (Only visible to NREMT) and any optional notes you wish to enter.

NEW: You may now enter a website URL, which will be visible to exam candidates. You must also indicate if lunch is will be provided

Maximum Exam Siz	e (Only visible to NREMT) we only allow a maximum of 40 candidates to test
0	
Please enter a num	per between 1 and 40.
Notes (Only visible	o NREMT)
Notes	
Website URL	
Examination regi	tration or information URL

Lastly, on the Logistics page, you must enter all examination fees for all examination levels. Then click "Next".

AEMT	Paramedic
Exam Fees (Enter 0 if no fee)	Exam Fees (Enter 0 if no fee)
Does this exam fee include a refest?	Does this exam fee include a retest?
Yes	Yes
No	No No
Retest Fees Per Skill (Enter 0 if no fee)	Retest Fees Per Skill (Enter 0 if no fee)
PREV	NEXT

## 7. PERSONNEL

On the personnel page, you are required to indicate the physician medical director. You are also required to enter the names and contact information for the exam site coordinator and the reservation coordinator.

Physician Medical Director	Reservation Coordinator
First Namo	Is there a congrate Reconvision Coordinator for this exam? Answer
	"no" if the reservations will be handled by the Exam Site
Please enter the first name	Coordinator.
l act Name	Yes
	○ No
Please enter the last name	First Name
Turne of Dector	
Type of Doctor	Please enter the first name.
• M.D.	Last Name
<ul> <li>D.O.</li> <li>Please indicate the type of doctor</li> </ul>	
Please indicate the type of doctor.	Please enter the last name.
Exam Site Coordinator Same as Re	equester Phone
First Name	Please enter the phone number.
First Name	Secondary Phone
Please enter the first name.	
Middle Initial	Email
Middle Initial	
Last Name	Please enter the email.
Last Name	
Please enter the last name.	
Phone	
Phone	
Please enter the phone number.	
Secondary Phone	
Secondary Phone	
Email	

#### 8. VERIFICATION

On the Verification Page, you will verify all information you've entered. You can go back and make any changes you feel necessary prior to submitting. Once you've verified that all information is correct, click "Submit." (On the verification screen, you will see all information you've entered.)

Exam Details
Level(s)
Exam Host
NREMT Representative
Exam Schedule Type
Exam Logistics
Exam Date
Exam Location
Maximum Exam Size
Notes
Lunch Provided
Exam Website URL
Exam Fees
Retest Included
Retest Fees Per Skill
Personnel Details
Physician Medical Director
Exam Site Coordinator
Reservation Coordinator

### 9. EXAM REQUEST SUBMITTED

After you've successfully submitted your examination request, you will be presented with the screen below. You have the option to request another examination.

