



ADMINISTRATIVE RULES OF MONTANA

24.112.503 ECP TRAINING COURSES

- (1) An individual, corporation, partnership, or any other organization may conduct ECP training courses. All ECP training courses or programs must include the following:
 - (a) current USDOT curriculum;
 - (b) Montana ECP Scope of Practice Document and National Model EMS Clinical Guidelines;
 - (c) statutes and rules governing ECPs in Montana;
 - (d) a final competency evaluation including a practical skill evaluation; and
 - (e) certificate of successful completion which states:
 - (i) full name of student;
 - (ii) start and end dates of the course;
 - (iii) course level; and
 - (iv) names of designated lead instructor and/or medical director.
- (2) A clinical component must be included and documented in the following levels of ECP courses:
 - (a) EMT course participants must complete a minimum of ten hours of clinical experience during which the student shall:
 - (i) observe patient care on at least 5 patients; and
 - (ii) perform a patient assessment on at least 5 adult patients.
 - (b) AEMT course participants shall:
 - (i) properly administer medications at least 10 times to live patients;
 - (ii) successfully access the venous circulation at least 15 times on live patients of various age groups;
 - (iii) ventilate at least 15 live patients of various age groups;
 - (iv) perform an advanced patient assessment on at least 15 adult patients, 5 pediatric patients, and 10 trauma patients;
 - (v) perform an advanced patient assessment, formulate and implement a treatment plan on at least 10 patients with chest pain;
 - (vi) perform an advanced patient assessment, formulate and implement a treatment plan on at least 10 adult patients and 3 pediatric patients with dyspnea/respiratory distress;

- (vii) perform an advanced patient assessment, formulate and implement a treatment plan on at least 10 patients with altered mental status; and
 - (viii) serve as the team leader for at least 20 prehospital emergency responses.
- (c) Paramedic course participants shall:
 - (i) properly administer medications at least 15 times to live patients;
 - (ii) successfully intubate at least 5 live patients;
 - (iii) successfully access the venous circulation at least 25 times on live patients of various age groups;
 - (iv) ventilate at least 20 live patients of various age groups;
 - (v) perform a comprehensive patient assessment on at least 50 adult patients, 30 pediatric patients (including newborns, infants, toddlers, and school age), 40 trauma patients, 30 geriatric patients, 10 obstetric patients, and 20 psychiatric patients;
 - (vi) perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 30 patients with chest pain;
 - (vii) perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 20 adult patients and 8 pediatric patients (including infants, toddlers, and school age) with dyspnea/respiratory distress;
 - (viii) perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 10 patients with syncope;
 - (ix) perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 20 patients with abdominal complaints;
 - (x) perform a comprehensive patient assessment, formulate and implement a treatment plan on at least 20 patients with altered mental status; and
 - (xi) serve as the team leader for at least 50 prehospital emergency responses.
- (3) Upon written request from the medical director of an AEMT or paramedic course, the department may approve substitution of patient simulators for up to 50 percent of the live patient requirements specified under (2)(b) and (c).
- (4) All levels of ECP courses must designate a lead instructor and a medical director. The lead instructor is under the supervision of the department and medical director for these courses.
- (5) The medical director of an ECP course shall be responsible for the overall quality, consistency, and management of the ECP course in which they agree to provide medical oversight. The medical director may delegate duties where appropriate.
 - (a) Medical direction of an EMR or EMT level course consists of review of agenda, selection of instructors, review of evaluation tools, and review of clinical offerings and objectives.
 - (b) Medical direction of an AEMT or paramedic level course consists of approval of agenda, approval and selection of instructors, involvement in the development and implementation of evaluation tools, participation as an instructor, approval of clinical offerings and objectives to be met by clinical components, and verification of successful course completion for each student.

- (6) The lead instructor of an EMR course shall:
 - (a) issue a certificate as provided under (1)(e);
 - (b) complete the course within six months of the date the course commences; and
 - (c) provide at least one instructor per six students when practical skills are taught or evaluated.
- (7) The lead instructor of an EMT course shall:
 - (a) issue a certificate as provided under (1)(e);
 - (b) complete the course within 12 months of the date the course commences;
 - (c) provide at least one instructor per six students when practical skills are taught or evaluated; and
 - (d) provide the clinical experience as specified under (2)(a).
- (8) The lead instructor and medical director of an AEMT or paramedic course shall:
 - (a) issue a certificate as provided under (1)(e);
 - (b) provide clinical experience as specified under (2)(b) and (c);
 - (c) complete the course in the following time frames:
 - (i) AEMT course within 18 months from the starting date of the course; and
 - (ii) paramedic course within 24 months from the starting date of the course;
 - (d) provide clinical experiences with no fewer than one clinical preceptor for every two students; and
 - (e) provide sufficient patient accessibility to allow students to complete all clinical experiences within the course dates.
- (9) Requests for extension of required course completion times stated in (8)(c) must be submitted in writing and may be granted by the department.

Authorizing statute(s): 50-6-203, MCA

Implementing statute(s): 50-6-203, MCA

History: NEW, 2019 MAR p. 431, Eff. 4/27/19; AMD, 2020 MAR p. 679, Eff. 4/18/20; AMD, 2020 MAR p. 963, Eff. 5/30/20; TRANS and AMD, from 24.156.2720, 2026 MAR, Notice No. 2025-149, Eff. 1/10/26.