

Creating an Administrator account for non EMS certified person(s) needing to be added to an EMS Agency or Sponsor application

1. On a Computer (Phones and Tablets are not recommended) browse to the PA EMS Registry at: <https://ems.health.state.pa.us/registry/logon.aspx>

Important: Internet Explorer or Edge are the recommended web browser with popups permitted.

2. On the left hand side of the page, click on “New Provider Application”

Forgotten User Name?
Change/Reset Password
New Provider Application
Registry Help
Public Search
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Emergency Medical Services

Login below to access the PA EMS Registry.

ALL PROVIDERS WITH AN EMSVO CERTIFICATION ARE NOW REQUIRED TO HAVE EMSVO CON ED RECORDED ON THEIR REGISTRY RECORD TO BE ELIGIBLE TO REREGISTER THEIR EMSVO CERTIFICATION.

A VALID EMSVO CERTIFICATION IS REQUIRED TO OPERATE A DOH LICENSED VEHICLE OR AMBULANCE

To log in, please enter your User Name (PA#####) and your most recently used password.

User Name:
[Forgotten User Name?](#)

Password:
[Change/Reset Password?](#)

Login

3. Answer “Yes” or “No” to the questions
 - a. If you answer “Yes” **Word Smith** Important if you are already in the system your regional council must make
 - b. If you answer “No” you will see another window, select “Administrative Access (Admin Access)” from the drop down box.

User Type:

Select User Type

Administrative Access (Admin Access)

Emergency Medical Services Vehicle Operator QRS Only (EMSVO QRS)

Emergency Medical Services Vehicle Operator (EMSVO)

Emergency Medical Responder (EMR)

Emergency Medical Technician (EMT)

Advanced Emergency Medical Technician (AEMT)

Paramedic (Paramedic)

Pre-Hospital Registered Nurse (PHRN)

Pre-Hospital Physician Extender (PHPE)

Medical Command Physician (MC Physician)

Pre-Hospital EMS Physician (PHP)

Agency Medical Director (Agency Med Dir)

Facility Medical Director (MC Facility Med Dir)

Regional Medical Director (Regional Med Dir)

User ID: Login User Name: Login Region: Login Role:
Region: Registry Role:

- On the following screen read the job description and check the I have read box. Once you check the box a continue button will appear

RESPONSIBILITIES

A person granted Administrative Access and conducting activity within the EMS Registry system shall be a responsible persons.

A responsible person is a person who:

- Has not engaged in an act contrary to justice, honesty or good morals which indicates that the person is likely to betray the public trust in carrying out the activities of the EMS agency

or

- Has engaged in this type of conduct but has been rehabilitated and is not likely to again betray the public trust

1st

I have read and understand the Functional Position Description (FPD);

You must check the I have read box in order to have access to "Continue to EMS Application"

I have read and understand the Functional Position Description (FPD) for the level of certification selected above. I meet all the competencies listed on the FPD that would preclude me from safely and effectively performing all the skills and tasks of which I am applying for as indicated above.

If an accommodation is required, I understand that I must complete the accommodation section on the application to be sent to the Bureau of Emergency Medical Services for consideration.

Continue to EMS Application

2nd

EMS Registry v4.7.3

- Complete both the "General Information" and "Release and Consent" tabs in full. Check the box for Release and Consent, Finally click on "Submit"

Applicant Data

General Information Release and Consent

Student Release and Consent

Click [here](#) to print a copy of this tab.

I hereby certify that the information provided is true and correct to the best of my knowledge and belief. I further acknowledge that I am on notice of the fact that I have read the above Notice and am authorizing and hold harmless the Pennsylvania Department of Transportation, the Pennsylvania State Police, the Pennsylvania State Crime Laboratory, the Pennsylvania State Crime Code, I and past employers, and anyone specifically named herein, from being held liable for any information released to my conviction(s) or authorizations from these entities to release information related to my convictions if they require I do so. I understand that if I am denied certification or have disciplinary sanctions imposed against me by the Department it may publish information of its action and reasons for its decision on its web page and to the federal government. I further understand that completion of an EMS course does not guarantee issuance of certification.

Submit

1. complete both the "General Information" and Release and Consent" tabs

2. check the box that you release and consent

3. Click Submit

EMS Registry v4.7.3

- If you do not get a pop up window your application was NOT submitted (check to see if you are blocking popups)
- Click "Yes" to submit your application.

Submit Confirmation

Are you sure you want to submit a new EMS Application?

Yes no