

Emergency Medical Services (EMS) 3

Activity Code 5533

DIRECTIONS: Evaluate the student using the applicable rating scales below and check the appropriate box to indicate the degree of competency. The ratings 3, 2, 1, and N are not intended to represent the traditional school grading system of A, B, C, and D. The description associated with each of the ratings focuses on the level of student performance or cognition for each of the competencies listed below.

PERFORMANCE RATING

- 3 - Skilled--can perform task independently with no supervision
 2 - Moderately skilled--can perform task completely with limited supervision
 1 - Limitedly skilled--requires instruction and close supervision
 N - No exposure--has no experience or knowledge of this task

COGNITIVE RATING

- 3 - Knowledgeable--can apply the concept to solve problems
 2 - Moderately knowledgeable--understands the concept
 1 - Limited knowledge--requires additional instruction
 N - No exposure--has not received instruction in this area

UNIT A: PREPARATORY

Introduction to Emergency Medical Care

3 2 1 N

- | | | | | |
|-----|-----|-----|-----|--|
| ___ | ___ | ___ | ___ | 1. Define emergency medical services (EMS) systems. |
| ___ | ___ | ___ | ___ | 2. Differentiate the roles and responsibilities of the EMT-Basic from other prehospital care providers. |
| ___ | ___ | ___ | ___ | 3. Describe the roles and responsibilities related to personal safety. |
| ___ | ___ | ___ | ___ | 4. Discuss the roles and responsibilities of the EMT-Basic toward the safety of the crew, the patient, and bystanders. |
| ___ | ___ | ___ | ___ | 5. Define quality improvement, and discuss the EMT-Basic's role in the process. |
| ___ | ___ | ___ | ___ | 6. Define medical direction, and discuss the EMT-Basic's role in the process. |
| ___ | ___ | ___ | ___ | 7. State the specific statutes and regulations in South Carolina regarding the EMS system. |
| ___ | ___ | ___ | ___ | 8. Assess areas of personal attitude and conduct of the EMT-Basic. |
| ___ | ___ | ___ | ___ | 9. Characterize the various methods used to access the EMS system in your community. |

Well-Being of the EMT-Basic

3 2 1 N

- | | | | | |
|-----|-----|-----|-----|---|
| ___ | ___ | ___ | ___ | 1. List possible emotional reactions that the EMT-Basic may experience when faced with trauma, illness, death, and dying. |
| ___ | ___ | ___ | ___ | 2. Discuss the possible reactions that a family member may exhibit when confronted with death and dying. |
| ___ | ___ | ___ | ___ | 3. State the steps in the EMT-Basic's approach to the family confronted with death and dying. |
| ___ | ___ | ___ | ___ | 4. State the possible reactions that the family of the EMT-Basic may exhibit due to their outside involvement in EMS. |
| ___ | ___ | ___ | ___ | 5. Recognize the signs and symptoms of critical incident stress. |
| ___ | ___ | ___ | ___ | 6. State possible steps that the EMT-Basic may take to help reduce/alleviate stress. |
| ___ | ___ | ___ | ___ | 7. Explain the need to determine scene safety. |
| ___ | ___ | ___ | ___ | 8. Discuss the importance of body substance isolation (BSI). |
| ___ | ___ | ___ | ___ | 9. Describe the steps the EMT-Basic should take for personal protection from airborne and blood-borne pathogens. |
| ___ | ___ | ___ | ___ | 10. List the personal protective equipment necessary for each of the following situations: hazardous materials, rescue operations, violent scenes, crime scenes, exposure to blood-borne pathogens, and exposure to airborne pathogens. |

- | | | | | |
|-----|-----|-----|-----|---|
| ___ | ___ | ___ | ___ | 11. Explain the rationale for serving as an advocate for the use of appropriate protective equipment. |
| ___ | ___ | ___ | ___ | 12. Use appropriate personal protective equipment given a scenario with potential infectious exposure. |
| ___ | ___ | ___ | ___ | 13. Remove and discard the protective garments at the completion of the scenario. |
| ___ | ___ | ___ | ___ | 14. Complete disinfection/cleaning and all reporting documentation given a scenario with potential infectious exposure. |

Medical Legal and Ethical Issues

3 2 1 N

- | | | | | |
|-----|-----|-----|-----|---|
| ___ | ___ | ___ | ___ | 1. Define the EMT-Basic scope of practice. |
| ___ | ___ | ___ | ___ | 2. Discuss the importance of Do Not Resuscitate (DNR) (advance directives) and local or state provisions regarding EMS application. |
| ___ | ___ | ___ | ___ | 3. Define consent and discuss the methods of obtaining consent. |
| ___ | ___ | ___ | ___ | 4. Differentiate between expressed and implied consent. |
| ___ | ___ | ___ | ___ | 5. Explain the role of consent of minors in providing care. |
| ___ | ___ | ___ | ___ | 6. Discuss the implications for the EMT-Basic in patient refusal of transport. |
| ___ | ___ | ___ | ___ | 7. Discuss the issues of abandonment, negligence, and battery and their implications for the EMT-Basic. |
| ___ | ___ | ___ | ___ | 8. State the conditions necessary for the EMT-Basic to have a duty to act. |

9. Explain the importance, necessity, and legality of patient confidentiality.
10. Discuss the considerations of the EMT-Basic in issues of organ retrieval.
11. Differentiate the actions that an EMT-Basic should take to assist in the preservation of a crime scene.
12. State the conditions that require an EMT-Basic to notify local law enforcement officials.
13. Explain the role of EMS and the EMT-Basic regarding patients with DNR orders.
14. Explain the rationale for the needs, benefits, and usage of advance directives.
15. Explain the rationale for the concept of varying degrees of DNR.

The Human Body

- 3 2 1 N
1. Identify the following topographic terms: medial, lateral, proximal, distal, superior, inferior, anterior, posterior, midline, right and left, mid-clavicular, bilateral, and mid-axillary.
2. Describe the anatomy and function of the following major body systems: respiratory, circulatory, musculoskeletal, nervous, and endocrine.

Baseline Vital Signs and Sample History

- 3 2 1 N
1. Identify the components of vital signs.
2. Describe the methods to obtain a breathing rate.
3. Identify the attributes that should be obtained when assessing breathing.
4. Differentiate between shallow, labored, and noisy breathing.
5. Describe the methods to obtain a pulse rate.
6. Identify the information obtained when assessing a patient's pulse.
7. Differentiate between a strong, weak, regular, and irregular pulse.
8. Describe the methods to assess the skin color, temperature, and condition (capillary refill in infants and children).
9. Identify normal and abnormal skin

10. Differentiate between pale, blue, red, and yellow skin color.
11. Identify normal and abnormal skin temperatures.
12. Differentiate between hot, cool, and cold skin temperatures.
13. Identify normal and abnormal skin conditions.
14. Identify normal and abnormal capillary refill in infants and children.
15. Describe the methods to assess the pupils.
16. Identify normal and abnormal pupil size.
17. Differentiate between dilated (big) and constricted (small) pupil size.
18. Differentiate between reactive and nonreactive pupils and equal and unequal pupils.
19. Describe the methods to assess blood pressure.
20. Define systolic pressure.
21. Define diastolic pressure.
22. Explain the difference between auscultation and palpation for obtaining a blood pressure.
23. Identify the components of the SAMPLE history.
24. Differentiate between a sign and a symptom.
25. State the importance of accurately reporting and recording the baseline vital signs.
26. Discuss the need to search for additional medical identification.
27. Explain the value of performing the baseline vital signs.
28. Recognize and respond to the feelings patients experience during assessment.
29. Defend the need for obtaining and recording an accurate set of vital signs.
30. Explain the rationale for recording additional sets of vital signs.
31. Explain the importance of obtaining a SAMPLE history.
32. Demonstrate the skills involved in assessment of breathing.
33. Demonstrate the skills associated with obtaining a pulse.
34. Demonstrate the skills associated with assessing the skin color, temperature, condition, and capillary refill in infants and children.
35. Demonstrate the skills associated

- with assessing the pupils.
36. Demonstrate the skills associated With obtaining blood pressure.
37. Demonstrate the skills that should be used to obtain information from the patient, family, or bystanders at the scene.

Lifting and Moving Patients

- 3 2 1 N
1. Define body mechanics.
2. Discuss the guidelines and safety precautions that need to be followed when lifting a patient.
3. Describe the safe lifting of cots and stretchers.
4. Describe the guidelines and safety precautions for carrying patients and/or equipment.
5. Discuss one-handed carrying techniques.
6. Describe correct and safe carrying procedures on stairs.
7. State the guidelines for reaching and their application.
8. Describe correct reaching for log rolls.
9. State the guidelines for pushing and pulling.
10. Discuss the general considerations of moving patients.
11. State three situations that may require the use of an emergency move.
12. Identify the following patient carrying devices: wheeled ambulance stretcher, portable ambulance stretcher, stair chair, scoop stretcher, long spine board, basket stretcher, and flexible stretcher.
13. Explain the rationale for properly lifting and moving patients.
14. Prepare each of the following devices for use, transfer a patient to the device, properly position the patient on the device, move the device to the ambulance, and load the patient into the ambulance, all while working with a partner: wheeled ambulance stretcher, portable ambulance stretcher, stair chair, scoop stretcher, long spine board, basket stretcher, and flexible stretcher.
15. Demonstrate techniques for the transfer of a patient from an ambulance stretcher to a hospital

stretcher while working with a partner.

UNIT B: AIRWAY

3 2 1 N

1. Name and label the major structures of the respiratory system on a diagram.
2. List the signs of adequate breathing.
3. List the signs of inadequate breathing.
4. Describe the steps in performing the head-tilt chin-lift.
5. Relate mechanism of injury to opening the airway.
6. Describe the steps in performing the jaw thrust.
7. State the importance of having a suction unit ready for immediate use when providing emergency care.
8. Describe the techniques of suctioning.
9. Describe how to artificially ventilate a patient with a pocket mask.
10. Describe the steps in performing the skill of artificially ventilating a patient with a bag valve-mask while using the jaw thrust.
11. List the parts of a bag-valve-mask system.
12. Describe the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask for one and two rescuers.
13. Describe the signs of adequate artificial ventilation using the bag-valve-mask.
14. Describe the signs of inadequate artificial ventilation using the bag-valve-mask.
15. Describe the steps in artificially ventilating a patient with a flow restricted, oxygen-powered ventilation device.
16. List the steps in performing the actions taken when providing mouth-to-mouth and mouth-to-stoma artificial ventilation.
17. Describe how to measure and insert an oropharyngeal (oral) airway.
18. Describe how to measure and insert a nasopharyngeal (nasal) airway.
19. Define the components of an oxygen delivery system.

20. Identify a nonrebreather facemask and state the oxygen flow requirements needed for its use.
21. Describe the indications for using a nasal cannula versus a nonrebreather facemask.
22. Identify a nasal cannula and state the flow requirements needed for its use.
23. Explain the rationale for basic life support artificial ventilation and airway protective skills taking priority over most other basic life support skills.
24. Explain the rationale for providing adequate oxygenation through high-inspired oxygen concentrations to patients who, in the past, may have received low concentrations.
25. Demonstrate the steps in performing the head-tilt chin-lift.
26. Demonstrate the steps in performing the jaw thrust.
27. Demonstrate the techniques of suctioning.
28. Demonstrate the steps in providing mouth-to-mouth artificial ventilation with body substance isolation (barrier shields).
29. Demonstrate how to use a pocket mask to artificially ventilate a patient.
30. Demonstrate the assembly of a bag-valve-mask unit.
31. Demonstrate the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask for one and two rescuers.
32. Demonstrate the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask while using the jaw thrust.
33. Demonstrate artificial ventilation of a patient with a flow restricted, oxygen-powered ventilation device.
34. Demonstrate how to artificially ventilate a patient with a stoma.
35. Demonstrate how to insert an oropharyngeal (oral) airway.
36. Demonstrate how to insert a nasopharyngeal (nasal) airway.
37. Demonstrate the correct operation of oxygen tanks and regulators.
38. Demonstrate the use of a nonrebreather facemask, and state the oxygen flow requirements needed for its use.

39. Demonstrate the use of a nasal cannula, and state the flow requirements needed for its use.
40. Demonstrate how to artificially ventilate the infant and child patient.
41. Demonstrate oxygen administration for the infant and child patient.

UNIT C: PATIENT ASSESSMENT

Scene Size-Up

3 2 1 N

1. Recognize hazards/potential hazards.
2. Describe common hazards found at the scene of a trauma where a medical patient is present.
3. Determine whether or not the scene safe to enter.
4. Discuss common mechanisms of injury/nature of illness.
5. Discuss the reason for identifying the total number of patients at the scene.
6. Explain the reason for identifying a need for additional help or assistance.
7. Explain the rationale for crew members to evaluate scene safety prior to entering.
8. Serve as a model for others explaining how patient situations affect one's evaluation of mechanism of injury or illness.
9. Observe various scenarios and identify potential hazards.

Initial Assessment

3 2 1 N

1. Summarize the reasons for forming a general impression of the patient.
2. Discuss methods of assessing altered mental status.
3. Differentiate between assessing the altered mental status in the adult, child, and infant patient.
4. Discuss methods of assessing the airway in the adult, child, and infant patient.
5. State reasons for management of the cervical spine once the patient has been determined to be a trauma patient.
6. Describe methods used for assessing whether or not a patient is breathing.

__ __ __ __	7. State what care should be provided to the adult, child, and infant patient who demonstrate adequate breathing.	__ __ __ __	temperature, condition, and capillary refill (infants and children only).	is	that should be used to assist with a patient with no known history who
__ __ __ __	8. State what care should be provided to the adult, child, and infant patient who do not demonstrate adequate breathing.	__ __ __ __	28.Demonstrate the ability to prioritize patients.	__ __ __ __	responsive.
__ __ __ __	9. Differentiate between a patient who demonstrates adequate breathing and one who demonstrates inadequate breathing.	Focused History and Physical Exam - Trauma Patients			7. Demonstrate the patient care skills that should be used to assist with a patient who is unresponsive or who has an altered mental status.
__ __ __ __	10.Distinguish between methods of assessing breathing in the adult, child, and infant patient.	3 2 1 N	1. Discuss the reasons for reconsideration concerning the mechanism of injury.	Detailed Physical Exam	
__ __ __ __	11.Compare the methods of providing airway care to the adult, child, and infant patient.	__ __ __ __	2. State the reasons for performing a rapid trauma assessment.	3 2 1 N	1. Discuss the components of the detailed physical exam.
__ __ __ __	12.Describe the methods used to obtain a pulse.	__ __ __ __	3. Recite examples and explain why patients should receive a rapid trauma assessment.	__ __ __ __	2. State the areas of the body that are evaluated during the detailed physical exam.
__ __ __ __	13.Differentiate between obtaining a pulse in an adult, child, and infant patient.	__ __ __ __	4. Describe the areas included in the rapid trauma assessment, and discuss what should be evaluated.	__ __ __ __	3. Explain what additional care should be provided while performing the detailed physical exam.
__ __ __ __	14.Discuss the need for assessing the patient for external bleeding.	__ __ __ __	5. Differentiate when the rapid assessment may be altered in order to provide patient care.	__ __ __ __	4. Distinguish between the detailed physical exam that is performed on a trauma patient and that of the medical patient.
__ __ __ __	15.Describe normal and abnormal findings when assessing skin color.	__ __ __ __	6. Discuss the reason for performing a focused history and physical exam.	__ __ __ __	5. Explain the rationale for the feelings that these patients might be experiencing.
__ __ __ __	16.Describe normal and abnormal findings when assessing skin temperature.	__ __ __ __	7. Recognize and respect the feelings that patients might experience during assessment.	__ __ __ __	6. Demonstrate the skills involved in performing the detailed physical exam.
__ __ __ __	17.Describe normal and abnormal findings when assessing skin condition.	Focused History and Physical Exam - Medical Patients			Ongoing Assessment
__ __ __ __	18.Describe normal and abnormal findings when assessing skin capillary refill in the infant and child patient.	3 2 1 N	1. Describe the unique needs for assessing an individual with a specific chief complaint with no known prior history.	3 2 1 N	1. Discuss the reasons for repeating the initial assessment as part of the ongoing assessment.
__ __ __ __	19.Explain the reason for prioritizing a patient for care and transport.	__ __ __ __	2. Differentiate between the history and physical exam that is performed for responsive patients with no known prior histories and responsive patients responsive with known prior histories.	__ __ __ __	2. Describe the components of the ongoing assessment.
__ __ __ __	20.Explain the importance of forming a general impression of the patient.	__ __ __ __	3. Describe the unique needs for assessing an individual who is unresponsive or who has an altered mental status.	__ __ __ __	3. Describe trending of assessment components.
__ __ __ __	21.Explain the value of performing an initial assessment.	__ __ __ __	4. Differentiate between the assessment that is performed for a patient who is unresponsive or who has an altered mental status and other medical patients requiring assessment.	__ __ __ __	4. Explain the value of performing an ongoing assessment.
__ __ __ __	22.Demonstrate the techniques for assessing mental status.	__ __ __ __	5. Attend to the feelings that these patients might be experiencing.	__ __ __ __	5. Recognize and respect the feelings that patients might experience during assessment.
__ __ __ __	23.Demonstrate the techniques for assessing the airway.	__ __ __ __	6. Demonstrate the patient care skills	__ __ __ __	6. Explain the value of trending assessment components to other health professionals who assume care of the patient.
__ __ __ __	24.Demonstrate the techniques for assessing whether or not the patient is breathing.	Communications			7. Demonstrate the skills involved in performing the ongoing assessment.
__ __ __ __	25.Demonstrate the techniques for assessing whether or not the patient has a pulse.	3 2 1 N		3 2 1 N	
__ __ __ __	26.Demonstrate the techniques for assessing the patient for external bleeding.	__ __ __ __		__ __ __ __	1. List the proper methods of initiating and terminating a radio call.
__ __ __ __	27.Demonstrate the techniques for assessing the patient's skin color,	__ __ __ __			

- ___ ___ ___ 2. State the proper sequence for delivery of patient information.
- ___ ___ ___ 3. Explain the importance of effective communication of patient information in the verbal report.
- ___ ___ ___ 4. Identify the essential components of the verbal report.
- ___ ___ ___ 5. Describe the attributes for increasing effectiveness and efficiency of verbal communications.
- ___ ___ ___ 6. State legal aspects to consider in verbal communication.
- ___ ___ ___ 7. Discuss the communication skills that should be used to interact with the patient.
- ___ ___ ___ 8. Discuss the communication skills that should be used to interact with the family, bystanders, and individuals from other agencies while providing patient care and the difference between skills used to interact with the patient and those used to interact with others.
- ___ ___ ___ 9. List the correct radio procedures in the following phases of a typical call: to the scene, at the scene, to the facility, at the facility, to the station, and at the station.
- ___ ___ ___ 10. Explain the rationale for providing efficient and effective radio communications and patient reports.
- ___ ___ ___ 11. Perform a simulated organized, concise radio transmission.
- ___ ___ ___ 12. Perform an organized, concise patient report that would be given to the staff at a receiving facility.
- ___ ___ ___ 13. Perform a brief, organized report that would be given to an ALS provider arriving at an incident scene at which the EMT-Basic was already providing care.

Documentation

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
- 1. Explain the components of the written report and list the information that should be included on the written report.
 - ___ ___ ___ 2. Identify the various sections of the written report.
 - ___ ___ ___ 3. Describe what information is required in each section of the prehospital care report and how it should be entered.
 - ___ ___ ___ 4. Define the special considerations concerning patient refusal.

- ___ ___ ___ 5. Describe the legal implications associated with the written report.
- ___ ___ ___ 6. Discuss all state and/or local record and reporting requirements.
- ___ ___ ___ 7. Explain the rationale for patient care documentation.
- ___ ___ ___ 8. Explain the rationale for the EMS system gathering data.
- ___ ___ ___ 9. Explain the rationale for using medical terminology correctly.
- ___ ___ ___ 10. Explain the rationale for using an accurate and synchronous clock so that information can be used in trending.
- ___ ___ ___ 11. Complete a prehospital care report.

UNIT D: MEDICAL

General Pharmacology

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
- 1. Identify which medications will be carried on the unit.
 - ___ ___ ___ 2. State the medications (generic names) carried on the unit.
 - ___ ___ ___ 3. Identify the medications that the EMT-B may assist the patient in administering.
 - ___ ___ ___ 4. State the medications (generic names) that the EMT-B can assist the patient with.
 - ___ ___ ___ 5. Discuss the forms in which the medications may be found.
 - ___ ___ ___ 6. Explain the rationale for the administration of medications.
 - ___ ___ ___ 7. Demonstrate general steps for assisting patient with self-administration of medications.
 - ___ ___ ___ 8. Read the labels and inspect each type of medication.

Respiratory Emergencies

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
- 1. List the structure and function of the respiratory system.
 - ___ ___ ___ 2. State the signs and symptoms of a patient with breathing difficulty.
 - ___ ___ ___ 3. Describe the emergency medical care of the patient with breathing difficulty.
 - ___ ___ ___ 4. Recognize the need for medical direction to assist in the emergency medical care of the patient with breathing difficulty.
 - ___ ___ ___ 5. Describe the emergency medical care of the patient with breathing distress.
 - ___ ___ ___ 6. Establish the relationship between

- | | |
|-----------|---|
| patient | airway management and the |
| ___ | with breathing difficulty. |
| ___ | 7. List signs of adequate air |
| exchange. | 8. State the generic name, medication |
| ___ | forms, dose, administration, action, |
| ___ | indications, and contraindications |
| ___ | for the prescribed inhaler. |
| ___ | 9. Distinguish between the emergency |
| ___ | medical care of the infant, child, |
| ___ | and adult patient with breathing |
| ___ | difficulty. |
| ___ | 10. Differentiate between upper airway |
| ___ | obstruction and lower airway |
| ___ | disease in the infant and child |
| ___ | patient. |
| ___ | 11. Defend EMT-Basic treatment |
| ___ | regimens for various respiratory |
| ___ | emergencies. |
| ___ | 12. Explain the rationale for |
| ___ | administering an inhaler. |
| ___ | 13. Demonstrate the emergency |
| ___ | medical care for breathing |
| ___ | difficulty. |
| ___ | 14. Perform the steps in facilitating the |
| ___ | use of an inhaler. |

Cardiovascular Emergencies

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
- 1. Describe the structure and function of the cardiovascular system.
 - ___ ___ ___ 2. Describe the emergency medical care of the patient experiencing chest pain/discomfort.
 - ___ ___ ___ 3. List the indications for automated external defibrillation (AED).
 - ___ ___ ___ 4. List the contraindications for automated external defibrillation.
 - ___ ___ ___ 5. Define the role of EMT-B in the emergency cardiac care system.
 - ___ ___ ___ 6. Explain the impact of age and weight on defibrillation.
 - ___ ___ ___ 7. Discuss the position of comfort for patients with various cardiac emergencies.
 - ___ ___ ___ 8. Establish the relationship between airway management and the patient with cardiovascular compromise.
 - ___ ___ ___ 9. Predict the relationship between the patient experiencing cardiovascular compromise and basic life support.
 - ___ ___ ___ 10. Discuss the fundamentals of early defibrillation.
 - ___ ___ ___ 11. Explain the rationale for early defibrillation.

__ __ __ __	12. Explain that not all chest pain complaints result in cardiac arrest and that each patient with a chest pain complaint does not need to be attached to an automated external defibrillator.	__ __ __ __	28. Differentiate between the single rescuer and multi-rescuer care with an automated external defibrillator.	__ __ __ __	47. Demonstrate the assessment and emergency medical care of a patient			
__ __ __ __	13. Explain the importance of prehospital advanced cardiac life support (ACLS) intervention if it is available.	__ __ __ __	29. Explain the reason for pulses not being checked between shocks with an automated external defibrillator.	__ __ __ __	48. Demonstrate the application and operation of the automated external defibrillator.			
__ __ __ __	14. Explain the importance of urgent transport to a facility with advanced cardiac life support (ACLS) if it is not available in the prehospital setting.	__ __ __ __	30. Discuss the importance of coordinating advanced cardiac life support (ACLS) trained providers with personnel using automated external defibrillators.	__ __ __ __	49. Demonstrate the maintenance of an automated external defibrillator.			
__ __ __ __	15. Discuss the various types of automated external defibrillators.	__ __ __ __	31. Discuss the importance of post-resuscitation care.	__ __ __ __	50. Demonstrate the assessment and documentation of patient response to the automated external defibrillator.			
__ __ __ __	16. Differentiate between the fully automated and the semiautomated defibrillator.	__ __ __ __	32. List the components of post-resuscitation care.	__ __ __ __	51. Demonstrate the skills necessary to complete the Automated Defibrillator: Operator's Shift Checklist.			
__ __ __ __	17. Discuss the procedures that must be taken into consideration for standard operations of the various types of automated external defibrillators.	__ __ __ __	33. Explain the importance of frequent practice with the automated external defibrillator.	__ __ __ __	52. Perform the steps in facilitating the use of nitroglycerin for chest pain or discomfort.			
__ __ __ __	18. State the reasons for assuring that the patient is pulseless and apneic when using the automated external defibrillator.	__ __ __ __	34. Discuss the need to complete the Automated Defibrillator: Operator's Shift Checklist.	__ __ __ __	53. Demonstrate the assessment and documentation of patient response to nitroglycerin.			
__ __ __ __	19. Discuss the circumstances that can result in inappropriate shocks.	__ __ __ __	35. Discuss the role of the American Heart Association (AHA) in the use of automated external defibrillation.	__ __ __ __	54. Practice completing a prehospital care report for patients with cardiac emergencies.			
__ __ __ __	20. Explain the considerations for interruption of CPR when using the automated external defibrillator.	__ __ __ __	36. Explain the role medical direction plays in the use of automated external defibrillation.	Diabetes/Altered Mental Status				
__ __ __ __	21. Discuss the advantages and disadvantages of automated external defibrillators.	__ __ __ __	37. State the reasons why a case review should be completed following the use of the automated external defibrillator.	3	2	1	N	
__ __ __ __	22. Summarize the speed of operation of automated external defibrillation.	__ __ __ __	38. Discuss the components that should be included in a case review.	__	__	__	__	1. Identify the patient with altered mental status taking diabetic medications and the implications of a diabetes history.
__ __ __ __	23. Discuss the use of remote defibrillation through adhesive pads.	__ __ __ __	39. Discuss the goal of quality improvement in automated external defibrillation.	__	__	__	__	2. State the steps in the emergency medical care of the patient with an altered mental status and a history of diabetes taking diabetic medicine.
__ __ __ __	24. Discuss the special considerations for rhythm monitoring.	__ __ __ __	40. Recognize the need for medical direction of protocols to assist in the emergency medical care of the patient with chest pain.	__	__	__	__	3. Establish the relationship between airway management and the patient with altered mental status.
__ __ __ __	25. List the steps in the operation of the automated external defibrillator.	__ __ __ __	41. List the indications for the use of nitroglycerin.	__	__	__	__	4. State the generic and trade names, medication forms, dose, administration, action, and contraindications for oral glucose.
__ __ __ __	26. Discuss the standard of care that should be used to provide care to a patient with persistent ventricular fibrillation and no available advanced cardiac life support (ACLS).	__ __ __ __	42. State the contraindications and side effects in the use of nitroglycerin.	__	__	__	__	5. Evaluate the need for medical direction in the emergency medical care of the diabetic patient.
__ __ __ __	27. Discuss the standard of care that should be used to provide care to a patient with recurrent ventricular fibrillation and no available advanced cardiac life support (ACLS).	__ __ __ __	43. Define the functions of all controls on an automated external defibrillator, and describe event documentation and battery defibrillator maintenance.	__	__	__	__	6. Explain the rationale for administering oral glucose.
		__ __ __ __	44. Defend the reasons for obtaining initial training in automated external defibrillation and the importance of continuing education.	__	__	__	__	7. Demonstrate the steps in the emergency medical care for the patient with an altered mental status and a history of diabetes taking diabetic medicine.
		__ __ __ __	45. Defend the reason for maintenance of automated external defibrillators.	__	__	__	__	8. Demonstrate the steps in the
		__ __ __ __	46. Explain the rationale for administering nitroglycerin to a patient with chest pain or discomfort.					

- administration of oral glucose.
- ___ ___ ___ ___ 9. Demonstrate the assessment and documentation of patient response to oral glucose.
- ___ ___ ___ ___ 10. Demonstrate how to complete prehospital care reports for patients with diabetic emergencies.

Allergies

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
1. Recognize the patient experiencing an allergic reaction.
- ___ ___ ___ ___ 2. Describe the emergency medical care of the patient with an allergic reaction.
- ___ ___ ___ ___ 3. Establish the relationship between the patient with an allergic reaction and airway management.
- ___ ___ ___ ___ 4. Describe the mechanisms of allergic response and the implications for airway management.
- ___ ___ ___ ___ 5. State the generic and trade names, medication forms, dose, administration, action, and contraindications for the epinephrine auto-injector.
- ___ ___ ___ ___ 6. Evaluate the need for medical direction in the emergency medical care of the patient with an allergic reaction.
- ___ ___ ___ ___ 7. Differentiate between the general category of those patients having an allergic reaction and those patients having an allergic reaction and requiring immediate medical care, including immediate use of epinephrine auto-injector.
- ___ ___ ___ ___ 8. Explain the rationale for administering epinephrine using an auto-injector.
- ___ ___ ___ ___ 9. Demonstrate the emergency medical care of the patient experiencing an allergic reaction.
- ___ ___ ___ ___ 10. Demonstrate the use of epinephrine auto-injector.
- ___ ___ ___ ___ 11. Demonstrate the assessment and documentation of patient response to an epinephrine injection.
- ___ ___ ___ ___ 12. Demonstrate proper disposal of equipment.
- ___ ___ ___ ___ 13. Demonstrate completing prehospital care reports for patients with allergic emergencies.

Poisoning/Overdose

3	2	1	N
---	---	---	---

- ___ ___ ___ ___ 1. List various ways that poisons enter the body.
- ___ ___ ___ ___ 2. List signs/symptoms associated with poisoning.
- ___ ___ ___ ___ 3. Discuss the emergency medical care for the patient with possible overdose.
- ___ ___ ___ ___ 4. Describe the steps in the emergency medical care for the patient with suspected poisoning.
- ___ ___ ___ ___ 5. Establish the relationship between the patient suffering from poisoning or overdose and airway management.
- ___ ___ ___ ___ 6. State the generic and trade names, indications, contraindications, medication form, dose, administration, actions, side effects, and re-assessment strategies for activated charcoal.
- ___ ___ ___ ___ 7. Recognize the need for medical direction in caring for the patient with poisoning or overdose.
- ___ ___ ___ ___ 8. Explain the rationale for administering activated charcoal.
- ___ ___ ___ ___ 9. Explain the rationale for contacting medical direction early in the prehospital management of the poisoning or overdose patient.
- ___ ___ ___ ___ 10. Demonstrate the steps in emergency medical care of the patient with possible overdose.
- ___ ___ ___ ___ 11. Demonstrate the steps in emergency medical care of the patient with suspected poisoning.
- ___ ___ ___ ___ 12. Perform the necessary steps required to provide a patient with activated charcoal.
- ___ ___ ___ ___ 13. Demonstrate the assessment and documentation of patient response.
- ___ ___ ___ ___ 14. Demonstrate proper disposal of administration of activated charcoal equipment.
- ___ ___ ___ ___ 15. Demonstrate completing prehospital care reports for patients with poisoning/overdose emergencies.

Environmental Emergencies

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
1. Describe the various ways that the body loses heat.
- ___ ___ ___ ___ 2. List the signs and symptoms of exposure to cold.
- ___ ___ ___ ___ 3. Explain the steps in providing emergency medical care to a patient exposed to cold.
- ___ ___ ___ ___ 4. List the signs and symptoms of exposure to heat.

- ___ ___ ___ ___ 5. Explain the steps in providing emergency care to a patient exposed to heat.
- ___ ___ ___ ___ 6. Recognize the signs and symptoms of water-related emergencies.
- ___ ___ ___ ___ 7. Describe the complications of near drowning.
- ___ ___ ___ ___ 8. Discuss the emergency medical care of bites and stings.
- ___ ___ ___ ___ 9. Demonstrate the assessment and emergency medical care of a patient with exposure to cold.
- ___ ___ ___ ___ 10. Demonstrate the assessment and emergency medical care of a patient with exposure to heat.
- ___ ___ ___ ___ 11. Demonstrate the assessment and emergency medical care of a near drowning patient.
- ___ ___ ___ ___ 12. Demonstrate completing a prehospital care report for patients with environmental emergencies.

Behavioral Emergencies

- | | | | |
|-----|-----|-----|-----|
| 3 | 2 | 1 | N |
| ___ | ___ | ___ | ___ |
1. Define behavioral emergencies.
- ___ ___ ___ ___ 2. Discuss the general factors that may cause an alteration in a patient's behavior.
- ___ ___ ___ ___ 3. State the various reasons for psychological crises.
- ___ ___ ___ ___ 4. Discuss the characteristics of an individual's behavior that suggest that the patient is at risk for suicide.
- ___ ___ ___ ___ 5. Discuss special medical/legal considerations for managing behavioral emergencies.
- ___ ___ ___ ___ 6. Discuss the special considerations for assessing a patient with behavioral problems.
- ___ ___ ___ ___ 7. Discuss the general principles of an individual's behavior that suggest that he or she is at risk for violence.
- ___ ___ ___ ___ 8. Discuss methods to calm behavioral emergency patients.
- ___ ___ ___ ___ 9. Explain the rationale for learning how to modify your behavior toward the patient experiencing a behavioral emergency.
- ___ ___ ___ ___ 10. Demonstrate the assessment and emergency medical care of the patient experiencing a behavioral emergency.
- ___ ___ ___ ___ 11. Demonstrate various techniques to safely restrain a patient with a behavioral problem.

3 2 1 N

23. Demonstrate post delivery care of

- Demonstrate how and when to cut the umbilical cord.

- UNIT E. TRAUMA

3 2 1 N

13. Demonstrate the use of diffuse

medical care for external bleeding.

- ## Soft Tissue Injuries

1. State the major functions of the skin.

- superficial burn.

__ __ __ __	19. Describe the emergency medical care of the patient with a partial thickness burn.	__ __ __ __	40. Demonstrate the steps in the emergency medical care of a patient with a chemical burn.	__ __ __ __	8. Relate the airway emergency medical care techniques to the patient with a suspected spine injury.			
__ __ __ __	20. Describe the emergency medical care of the patient with a full thickness burn.	__ __ __ __	41. Demonstrate completing a prehospital care report for patients with soft tissue injuries.	__ __ __ __	9. Describe how to stabilize the cervical spine.			
__ __ __ __	21. List the functions of dressing and bandaging.	Musculoskeletal Care			__ __ __ __	10. Discuss indications for sizing and using a cervical spine immobilization device.		
__ __ __ __	22. Describe the purpose of a bandage.	3	2	1	N	__ __ __ __	11. Establish the relationship between airway management and the patient with head and spine injuries.	
__ __ __ __	23. Describe the steps in applying a pressure dressing.	__	__	__	__	1. Describe the function of the muscular system.	__ __ __ __	12. Describe a method for sizing a cervical spine immobilization device.
__ __ __ __	24. Establish the relationship between airway management and the patient with chest injury, burns, and blunt and penetrating injuries.	__	__	__	__	2. Describe the function of the skeletal system.	__ __ __ __	13. Describe how to log roll a patient with a suspected spine injury.
__ __ __ __	25. Describe the effects of improperly applied dressings, splints, and tourniquets.	__	__	__	__	3. List the major bones or bone groupings of the spinal column, the thorax, the upper extremities, and the lower extremities.	__ __ __ __	14. Describe how to secure a patient to a long spine board.
__ __ __ __	26. Describe the emergency medical care of a patient with an impaled object.	__	__	__	__	4. Differentiate between an open and a closed painful, swollen, deformed extremity.	__ __ __ __	15. List instances when a short spine board should be used.
__ __ __ __	27. Describe the emergency medical care of a patient with an amputation.	__	__	__	__	5. State the reasons for splinting.	__ __ __ __	16. Describe how to immobilize a patient using a short spine board.
__ __ __ __	28. Describe the emergency care for a chemical burn.	__	__	__	__	6. List the general rules of splinting.	__ __ __ __	17. Describe the indications for the use of rapid extrication.
__ __ __ __	29. Describe the emergency care for an electrical burn.	__	__	__	__	7. List the complications of splinting.	__ __ __ __	18. List steps in performing rapid extrication.
__ __ __ __	30. Demonstrate the steps in the emergency medical care of closed soft tissue injuries.	__	__	__	__	8. List the emergency medical care for a patient with a painful, swollen, deformed extremity.	__ __ __ __	19. State the circumstances when a helmet should be left on the patient.
__ __ __ __	31. Demonstrate the steps in the emergency medical care of open soft tissue injuries.	__	__	__	__	9. Explain the rationale for splinting at the scene versus load and go.	__ __ __ __	20. Discuss the circumstances when a helmet should be removed.
__ __ __ __	32. Demonstrate the steps in the emergency medical care of a patient with an open chest wound.	__	__	__	__	10. Explain the rationale for immobilization of the painful, swollen, deformed extremity.	__ __ __ __	21. Identify different types of helmets.
__ __ __ __	33. Demonstrate the steps in the emergency medical care of a patient with open abdominal wounds.	__	__	__	__	11. Demonstrate the emergency medical care of a patient with a painful, swollen, deformed extremity.	__ __ __ __	22. Describe the unique characteristics of sports helmets.
__ __ __ __	34. Demonstrate the steps in the emergency medical care of a patient with an impaled object.	__	__	__	__	12. Demonstrate completing prehospital care reports for patients with musculoskeletal injuries.	__ __ __ __	23. Explain the preferred methods to remove a helmet.
__ __ __ __	35. Demonstrate the steps in the emergency medical care of a patient with an amputation.	Injuries to the Head And Spine			__ __ __ __	24. Discuss alternative methods for removal of a helmet.	__ __ __ __	25. Describe how the patient's head is stabilized to remove the helmet.
__ __ __ __	36. Demonstrate the steps in the emergency medical care of an amputated part.	3	2	1	N	1. State the components of the nervous system.	__ __ __ __	26. Differentiate how the head is stabilized with a helmet compared to without a helmet.
__ __ __ __	37. Demonstrate the steps in the emergency medical care of a patient with superficial burns.	__	__	__	__	2. List the functions of the central nervous system.	__ __ __ __	27. Explain the rationale for immobilization of the entire spine when a cervical spine injury is suspected.
__ __ __ __	38. Demonstrate the steps in the emergency medical care of a patient with partial thickness burns.	__	__	__	__	3. Define the structure of the skeletal system as it relates to the nervous system.	__ __ __ __	28. Explain the rationale for utilizing immobilization methods apart from the straps on the cots.
__ __ __ __	39. Demonstrate the steps in the emergency medical care of a patient with full thickness burns.	__	__	__	__	4. Relate mechanism of injury to potential injuries of the head and spine.	__ __ __ __	29. Explain the rationale for utilizing a short spine immobilization device when moving a patient from the sitting to the supine position.
						5. Describe the implications of not properly caring for potential spine injuries.	__ __ __ __	30. Explain the rationale for utilizing
						6. State the signs and symptoms of a potential spine injury.		
						7. Describe the method of determining		

- rapid extrication approaches only when they will make the difference between life and death.
31. Defend the reasons for leaving a helmet in place for transport of a patient.
32. Defend the reasons for removal of a helmet prior to transport of a patient.
33. Demonstrate opening the airway in a patient with suspected spinal cord injury.
34. Demonstrate evaluating a responsive patient with a suspected spinal cord injury.
35. Demonstrate stabilization of the cervical spine.
36. Demonstrate the four person log roll for a patient with a suspected spinal cord injury.
37. Demonstrate how to log roll a patient with a suspected spinal cord injury using two people.
38. Demonstrate securing a patient to a long spine board.
39. Demonstrate using the short board immobilization technique.
40. Demonstrate procedure for rapid extrication.
41. Demonstrate preferred methods for stabilization of a helmet.
42. Demonstrate helmet removal techniques.
43. Demonstrate alternative methods for stabilization of a helmet.
44. Demonstrate completing a prehospital care report for patients with head and spinal injuries.

UNIT F: INFANTS AND CHILDREN

Infants and Children

3 2 1 N

1. Identify the developmental considerations for the following age groups: infant, toddler, pre-school, school age, and adolescent.
2. Describe differences in anatomy and physiology of the infant, child, and adult patient.
3. Differentiate the response of the ill or injured infant or child (age specific) from that of an adult.
4. Indicate various causes of respiratory emergencies.
5. Differentiate between respiratory distress and respiratory failure.

6. List the steps in the management of foreign body airway obstruction.
7. Summarize emergency medical care strategies for respiratory distress and respiratory failure.
8. Identify the signs and symptoms of shock (hypoperfusion) in the infant and child patient.
9. Describe the methods of determining organ perfusion in the infant and child patient.
10. State the usual cause of cardiac arrest in infants and children versus adults.
11. List the common causes of seizures in the infant and child patient.
12. Describe the management of seizures in the infant and child patient.
13. Differentiate between the injury patterns in adults, infants, and children.
14. Discuss the field management of the infant and child trauma patient.
15. Summarize the indicators of possible child abuse and neglect.
16. Describe the medical legal responsibilities in suspected child abuse.
17. Recognize need for EMT-Basic debriefing following a difficult infant or child transport.
18. Explain the rationale for having knowledge and skills appropriate for dealing with the infant and child patient.
19. Attend to the feelings of the family when dealing with an ill or injured infant or child.
20. Understand the provider's own response (emotional) to caring for infants or children.
21. Demonstrate the techniques of foreign body airway obstruction removal in the infant.
22. Demonstrate the techniques of foreign body airway obstruction removal in the child.
23. Demonstrate the assessment of the infant and child.
24. Demonstrate bag-valve-mask artificial ventilations for the infant.
25. Demonstrate bag-valve-mask artificial ventilations for the child.
26. Demonstrate oxygen delivery for the infant and child.

UNIT G: OPERATIONS

Ambulance Operations

3 2 1 N

1. Discuss the medical and nonmedical equipment needed to respond to a call.
2. List the phases of an ambulance call.
3. Describe the general provisions of state laws relating to the operation of the ambulance and privileges in any or all of the following categories: speed, warning lights, sirens, right-of-way, parking, and turning.
4. List contributing factors to unsafe driving conditions.
5. Describe the considerations that should be given to: requesting an escort, following an escort vehicle, and approaching an intersection.
6. Discuss "Due Regard for Safety of All Others" while operating an emergency vehicle.
7. State what information is essential in order to respond to a call.
8. Discuss various situations that may affect response to a call.
9. Differentiate between the various methods of moving a patient to the unit based upon injury or illness.
10. Apply the components of the essential patient information in a written report.
11. Summarize the importance of preparing the unit for the next response.
12. Identify what is essential for completion of a call.
13. Distinguish among the terms cleaning, disinfection, high-level disinfection, and sterilization.
14. Describe how to clean or disinfect items following patient care.
15. Explain the rationale for appropriate report of patient information.
16. Explain the rationale for having the unit prepared to respond.

Gaining Access

3 2 1 N

1. Describe the purpose of extrication.
2. Discuss the role of the EMT-Basic in extrication.
3. Identify what equipment for personal safety is required for the EMT-Basic.

- ___ ___ ___ 4. Define the fundamental components of extrication.
- ___ ___ ___ 5. State the steps that should be taken to protect the patient during extrication.
- ___ ___ ___ 6. Evaluate various methods of gaining access to the patient.
- ___ ___ ___ 7. Distinguish between simple and complex access.

Overviews

3 2 1 N

- ___ ___ ___ 1. Explain the EMT-Basic's role during a call involving hazardous materials.
- ___ ___ ___ 2. Describe what the EMT-Basic should do if there is reason to believe that there is a hazard at the scene.
- ___ ___ ___ 3. Describe the actions that an EMT-Basic should take to ensure bystander safety.
- ___ ___ ___ 4. State the role the EMT-Basic should perform until appropriately trained personnel arrive at the scene of a hazardous materials situation.
- ___ ___ ___ 5. Break down the steps to approaching a hazardous situation.
- ___ ___ ___ 6. Discuss the various environmental hazards that affect EMS.
- ___ ___ ___ 7. Describe the criteria for a multiple-casualty situation.
- ___ ___ ___ 8. Evaluate the role of the EMT-Basic in the multiple-casualty situation.
- ___ ___ ___ 9. Summarize the components of basic triage.
- ___ ___ ___ 10. Define the role of the EMT-Basic in a disaster operation.
- ___ ___ ___ 11. Describe basic concepts of incident management.
- ___ ___ ___ 12. Explain the methods for preventing contamination of self, equipment, and facilities.
- ___ ___ ___ 13. Review the local mass casualty incident plan.
- ___ ___ ___ 14. Given a scenario of a mass casualty incident, perform triage.

UNIT H: ADVANCED AIRWAY (ELECTIVE)

Advanced Airway

3 2 1 N

- ___ ___ ___ 1. Identify and describe the airway anatomy in the infant, child, and adult.
- ___ ___ ___ 2. Differentiate between the airway anatomy in the infant, child, and

- ___ ___ ___ 3. adult.
- ___ ___ ___ 4. Explain the pathophysiology of airway compromise.
- ___ ___ ___ 5. Describe the proper use of airway adjuncts.
- ___ ___ ___ 6. Review the use of oxygen therapy in airway management.
- ___ ___ ___ 7. Describe the indications, contraindications, and technique for insertion of nasal gastric tubes.
- ___ ___ ___ 8. Describe how to perform the Sellick maneuver (cricoid pressure).
- ___ ___ ___ 9. Describe the indications for advanced airway management.
- ___ ___ ___ 10. List the equipment required for orotracheal intubation.
- ___ ___ ___ 11. Describe the proper use of the curved blade for orotracheal intubation.
- ___ ___ ___ 12. Describe the proper use of the straight blade for orotracheal intubation.
- ___ ___ ___ 13. State the reasons for and proper use of the stylet in orotracheal intubation.
- ___ ___ ___ 14. Describe the methods of choosing the appropriate size endotracheal tube in an adult patient.
- ___ ___ ___ 15. State the formula for sizing an infant or child endotracheal tube.
- ___ ___ ___ 16. List complications associated with advanced airway management.
- ___ ___ ___ 17. Define the various alternative methods for sizing the infant and child endotracheal tube.
- ___ ___ ___ 18. Describe the skill of orotracheal intubation in the adult patient.
- ___ ___ ___ 19. Describe the skill of orotracheal intubation in the infant and child patient.
- ___ ___ ___ 20. Describe the skill of confirming endotracheal tube placement in the adult, infant, and child patient.
- ___ ___ ___ 21. State the consequence of and the need to recognize unintentional esophageal intubation.
- ___ ___ ___ 22. Describe the skill of securing the endotracheal tube in the adult, infant, and child patient.
- ___ ___ ___ 23. Recognize and respect the feelings of the patient and family during advanced airway procedures.
- ___ ___ ___ 24. Explain the value of performing advanced airway procedures.
- ___ ___ ___ 25. Defend the need for the EMT-Basic to perform advanced airway procedures.
- ___ ___ ___ 26. Explain the rationale for the use of a stylet.

- ___ ___ ___ 26. Explain the rationale for having a suction unit immediately available during intubation attempts.
- ___ ___ ___ 27. Explain the rationale for confirming breath sounds.
- ___ ___ ___ 28. Explain the rationale for securing the endotracheal tube.
- ___ ___ ___ 29. Demonstrate how to perform the Sellick maneuver (cricoid pressure).
- ___ ___ ___ 30. Demonstrate the skill of orotracheal intubation in the adult patient.
- ___ ___ ___ 31. Demonstrate the skill of orotracheal intubation in the infant and child patient.
- ___ ___ ___ 32. Demonstrate the skill of confirming endotracheal tube placement in the adult patient.
- ___ ___ ___ 33. Demonstrate the skill of confirming endotracheal tube placement in the infant and child patient.
- ___ ___ ___ 34. Demonstrate the skill of securing the endotracheal tube in the adult patient.
- ___ ___ ___ 35. Demonstrate the skill of securing the endotracheal tube in the infant and child patient.