

EMS Education Approval Policy and Procedures

PURPOSE:

To establish standards for the submission and approval of Emergency Medical Services (EMS) education courses to the West Virginia Office of Emergency Medical Services (WVOEMS) in conjunction with Legislative Rule §64-48-8.

DEFINITIONS:

Professional competence is most commonly defined as “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served.”

Professional competence is multidimensional. The dimensions of competence evolve as an EMS provider’s career evolves. Achieving competence, as demonstrated in knowledge, skills, abilities, attitudes and behaviors, is a lifelong process, motivated by both self-interest and a commitment to providing the highest quality care. The initial educational programs lay the foundation for application of the competencies in clinical care. Upon entering the field, it is the responsibility of the EMS provider to continue their life-long learning. EMS providers must engage in continuing professional development, using a variety of modalities to continuously assess and improve their knowledge, skills and attitudes with the goal of improving patient care outcomes.

POLICY:

EMS courses instructed by WVOEMS approved training agencies shall be submitted and approved by WVOEMS per §64-48-8. Initial certification courses shall follow the National curriculum and recertification courses shall utilize the WVOEMS approved curriculum. These courses shall be reviewed by WVOEMS to ensure they are being taught consistent with WVOEMS educational requirements, standards, protocols, scope of practice, and code/rule.

- A. **Initial Certification Courses:** shall be taught to the National standard curriculum.
- B. **Recertification Courses:** shall be taught to the NCCP standard as outlined by National Registry. Recertification can be obtained utilizing the National Registry NCCP model **or** by completing a refresher course approved by WVOEMS.

Both options require completing the WVOEMS State and Federal requirements per respective policy. Application of hours to meet the National Registry NCCP model in another state **SHALL NOT** constitute meeting the requirement for State certification in West Virginia.

Skills are required for each discipline and will be validated through Medical Director acknowledgement in the National Registry System. Skills at the ALS level may be completed through the required alphabet courses. BLS skills can be documented through alphabet courses or through a WVOEMS approved training skills module.

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1. National Registry NCCP Option:

- Applicant completes all requirements per National Registry policy to include the National Component, Local or State Component, and Individual Component.
This can be completed in any method approved by National Registry.
- Applicant completes the WVOEMS State and Federal Mandated courses. These courses can be applied to the National Registry NCCP Local or State Component:
 - ❖ CPR (4 hours biennially)
 - ❖ Protocol Update (2 hours annually)
 - ❖ Mass Casualty Incident Training (2 biennially)
 - ❖ Hazardous Materials Awareness (3 hours annually)
 - ❖ ACLS, ITLS/PHTLS, PEPP/PALS or WVOEMS approved equivalents for ALS providers

2. WVOEMS Approved Refresher Course Option:

- Applicant completes a WVOEMS approved NCCP refresher course meeting the National Registry National Component. WVOEMS shall approve this course annually and assure course material is standardized throughout the State. Only one singular course shall be approved for each provider level respectively and course education material shall be distributed by WVOEMS.
- Applicant completes the WVOEMS State and Federal Mandated courses. These courses can be applied to the National Registry NCCP Local or State Component:
 - ❖ CPR (4 hours biennially)
 - ❖ Protocol Update (2 hours annually)
 - ❖ Mass Casualty Incident Training (2 biennially)
 - ❖ Hazardous Materials Awareness (3 hours annually)
 - ❖ ACLS, ITLS/PHTLS, PEPP/PALS or WVOEMS approved equivalents for ALS providers

C. Individuals who do not complete the West Virginia specific components will not be certified or recertified.

D. **Continuing Education (CE) courses:** shall be accepted per National Registry Policy with approval by WVOEMS.

1. WVOEMS will define a list of Pre-Approved CE courses that do not require submission for pre-approval (**Appendix E**). Any course not listed shall require submission and approval by WVOEMS. This list shall be evaluated annually to remain consistent with National Registry.

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E. National Registry auditing shall be conducted per National Registry policy.

PROCEDURE/REQUIREMENTS:

INITIAL CERTIFICATION, RECERTIFICATION, and CONTINUING EDUCATION Courses:

- A. Courses shall be submitted in a manner prescribed by the Commissioner.
- B. Courses shall be entered for approval purposes **ONLY** and do not require submission of attendees. Tracking of course participants and completion status shall be the responsibility of the training agency and will be evaluated through training agency recertification and random auditing by WVOEMS. Training agencies are required per accreditation requirements to issue certificates for successful course completion. The course instructor name, WVOEMS approved course number, training agency name, date of course completion, attendee name, course title, course location, and course hours shall be indicated on the certificate.
- C. Shall be submitted to WVOEMS at least five (5) working days prior to the course start date.
- D. Courses submitted after the class has taken place will be denied per §64-48-8.1g.
- E. If a course is submitted in a time period shorter than the specified five (5) working days, WVOEMS will review the course per policy, however, there may be up to a fifteen (15) working day delay in the approval process. Should the class be denied with legitimate reason, students who participated in the program will not receive credit for taking the class.
- F. Students who complete an unapproved course will be ineligible to test for certification nor will they will receive credit for taking the class and no hours will be awarded for certification.

APPLICABLE HOURS:

Some programs have requirements that meet a specific code. These courses often are taught in many ways and may fluctuate in hours. WVOEMS will approve class hours in this category based on the average contact hours of available courses. These courses are as follows:

- | | |
|--|---------|
| • Hazardous Materials Awareness | 3 Hours |
| • CPR | 4 Hours |
| • First Aid | 3 Hours |
| • ACLS or WVOEMS approved equivalent refresher | 8 Hours |
| • PALS, PEPP, or WVOEMS approved equivalent refresher | 8 Hours |
| • ITLS, PHTLS, or WVOEMS approved equivalent refresher | 8 Hours |

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SKILL SHEETS:

Initial and recertification courses require the use of skill sheets to evaluate the ability of students to perform EMS tasks essential to the profession. EMR and EMT courses will require a final psychomotor exam at the completion of initial courses. Instructors are responsible to assure that all students have a mastery of all skill sheet content. Skill Sheets identified as “VERIFIED” shall be signed off by the course instructor once they feel the candidate has mastered that specific skill. Skill Sheets identified as “TESTED” shall be incorporated as part of the final psychomotor exam. EMR skill sheets can be found in [Appendix A](#) and EMT skill sheets are available in [Appendix B](#).

A. Emergency Medical Responder “TESTED” Skills

- Patient Assessment – Medical (Skill Sheet 1)
- Patient Assessment – Trauma (Skill Sheet 2)
- Bleeding Control / Shock Management (Skill Sheet 3)
- Oxygen Administration by Non–Rebreather Mask (Skill Sheet 4)
- BVM Ventilation of an Apneic Patient (Skill Sheet 5)

B. Emergency Medical Responder “VERIFIED” Skills

- Cardiac Arrest Management / AED (Skill Sheet 6)
- Spinal Immobilization – Seated Patient (Skill Sheet 7)
- Spinal Immobilization – Supine Patient (Skill Sheet 8)
- Long Bone Immobilization (Skill Sheet 9)
- Joint Immobilization (Skill Sheet 10)
- Naloxone Administration (Skill Sheet 11)
- Baseline Vital Signs (Skill Sheet 12)

C. Emergency Medical Technician “TESTED” Skills

- Patient Assessment – Medical (with one incorporated medication) (Skill Sheet 1)
 - ❖ Oral Glucose Administration (Skill Supplement 1)
 - ❖ Nitroglycerin Administration (Skill Supplement 2)
 - ❖ Nebulized Medication Administration (Skill Supplement 3)
 - ❖ Epinephrine Auto-Injector Administration (Skill Supplement 4)
 - ❖ Epinephrine 1:1000 Ampule Administration (Skill Supplement 5)
- Patient Assessment – Trauma (Skill Sheet 2)
- Bleeding Control / Shock Management (Skill Sheet 3)
- Airway Management – King Airway (Skill Sheet 4)

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D. Emergency Medical Technician “VERIFIED” Skills

- Cardiac Arrest Management / AED (Skill Sheet 5)
- Baseline Vital Signs (Skill Sheet 6)
- Spinal Immobilization – Seated Patient (Skill Sheet 7)
- Spinal Immobilization – Supine Patient (Skill Sheet 8)
- Long Bone Immobilization (Skill Sheet 9)
- Joint Immobilization (Skill Sheet 10)
- 12 Lead EKG Acquisition (Skill Sheet 11)
- Continuous Positive Airway Pressure – CPAP (Skill Sheet 12)
- Naloxone Administration (Skill Sheet 13)
- Tetracaine Ophthalmic Administration / Morgan Lens (Skill Sheet 14)
- Oxygen Administration by Non-Rebreather Mask (Skill Sheet 15)
- BVM Ventilation of an Apneic Patient (Skill Sheet 16)

E. Advanced Emergency Medical Technician – AEMT will be tested per NREMT policy in conjunction with a CAAHEP accredited educational program.

F. Paramedic – Paramedics will be tested per NREMT policy in conjunction with a CAAHEP accredited educational program.

SUMMARY SHEETS:

Summary sheets are to be utilized to track skill performance. Summary sheets shall be completed for all students in initial courses. If a student fails a particular skill, a copy of that skill sheet with appropriate documentation shall be attached to the summary sheet. Summary sheets are available in [Appendix C](#).

This Education Approval Policy replaces all previous Education Approval Policies.

APPENDIX A



Emergency Medical Responder Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL

**Skill Sheet 1
TESTED**

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | | | |
|---|-------|----|-------------------------|
| Takes or verbalizes appropriate PPE precautions | 1 | | |
| SCENE SIZE-UP | | | |
| Determines the scene/situation is safe | 1 | | |
| Determines the mechanism of injury/nature of illness | 1 | | |
| Determines the number of patients | 1 | | |
| Requests additional EMS assistance if necessary | 1 | | |
| Considers stabilization of the spine | 1 | | |
| PRIMARY SURVEY/RESUSCITATION | | | |
| Verbalizes the general impression of the patient | 1 | | |
| Determines responsiveness/level of consciousness (AVPU) | 1 | | |
| Determines chief complaint/apparent life-threats | 1 | | |
| Assesses airway and breathing | 3 | | |
| -Assessment (1 point) -Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) | | | |
| Assesses circulation | 3 | | |
| -Assesses/controls major bleeding (1 point) | | | -Checks pulse (1 point) |
| -Assesses skin [either skin color, temperature or condition] (1 point) | | | |
| Identifies patient priority and makes treatment/transport decision | 1 | | |
| HISTORY TAKING | | | |
| History of the present illness | 8 | | |
| -Onset (1 point) -Quality (1 point) -Severity (1 point) | | | |
| -Provocation (1 point) -Radiation (1 point) -Time (1 point) | | | |
| -Clarifying questions of associated signs and symptoms related to OPQRST (2 points) | | | |
| Past medical history | 5 | | |
| -Allergies (1 point) -Past pertinent history (1 point) -Events leading to present illness (1 point) | | | |
| -Medications (1 point) -Last oral intake (1 point) | | | |
| SECONDARY ASSESSMENT | | | |
| Assesses affected body part/system | 5 | | |
| -Cardiovascular -Neurological -Integumentary -Reproductive | | | |
| -Pulmonary -Musculoskeletal -GI/GU -Psychological/Social | | | |
| VITAL SIGNS | | | |
| -Blood pressure (1 point) -Pulse (1 point) -Respiratory rate and quality (1 point each) | 4 | | |
| States field impression of patient | 1 | | |
| Interventions [verbalizes proper interventions/treatment] | 1 | | |
| REASSESSMENT | | | |
| Demonstrates how and when to reassess the patient to determine changes in condition | 1 | | |
| Provides accurate verbal report to arriving EMS unit | 1 | | |
| Actual Time Ended: _____ | TOTAL | 42 | |

CRITICAL CRITERIA

- ____ Failure to initiate or call for transport of the patient within 15 minute time limit
- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to determine scene safety before approaching patient
- ____ Failure to voice and ultimately provide appropriate oxygen therapy
- ____ Failure to assess/provide adequate ventilation
- ____ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ____ Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the scene
- ____ Performs secondary examination before assessing and treating threats to airway, breathing and circulation
- ____ Orders a dangerous or inappropriate intervention
- ____ Failure to provide accurate report to arriving EMS unit
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – TRAUMA

**Skill Sheet 2
TESTED**

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____ Note: Areas denoted by “***” may be integrated within sequence of Primary Survey/Resuscitation

Possible Points Points Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| SCENE SIZE-UP | | |
| Determines the scene/situation is safe | 1 | |
| Determines the mechanism of injury/nature of illness | 1 | |
| Determines the number of patients | 1 | |
| Requests additional EMS assistance if necessary | 1 | |
| Considers stabilization of the spine | 1 | |
| PRIMARY SURVEY/RESUSCITATION | | |
| Verbalizes general impression of the patient | 1 | |
| Determines responsiveness/level of consciousness | 1 | |
| Determines chief complaint/apparent life-threats | 1 | |
| Airway -Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point) | 2 | |
| Breathing -Assess breathing (1 point) -Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) -Manages any injury which may compromise breathing/ventilation (1 point) | 4 | |
| Circulation -Checks pulse (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assesses for and controls major bleeding if present (1 point) -Initiates shock management [positions patient properly, conserves body heat] (1 point) | 4 | |
| Identifies patient priority and makes treatment/transport decision (based upon calculated GCS) | 1 | |
| HISTORY TAKING | | |
| Obtains baseline vital signs [must include BP, P and R] (1 point) | 1 | |
| Attempts to obtain SAMPLE history | 1 | |
| SECONDARY ASSESSMENT | | |
| Head -Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point) | 3 | |
| Neck** -Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point) | 3 | |
| Chest** -Inspects chest (1 point) -Palpates chest (1 point) -Auscultates chest (1 point) | 3 | |
| Abdomen/pelvis** -Inspects and palpates abdomen (1 point) -Assesses pelvis (1 point) -Verbalizes assessment of genitalia/perineum as needed (1 point) | 3 | |
| Lower extremities** -Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg) | 2 | |
| Upper extremities -Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/arm) | 2 | |
| Posterior thorax, lumbar and buttocks** -Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar and buttocks areas (1 point) | 2 | |
| Manages secondary injuries and wounds appropriately | 1 | |
| REASSESSMENT | | |
| Demonstrates how and when to reassess the patient | 1 | |
| Actual Time Ended: _____ | TOTAL | 42 |

CRITICAL CRITERIA

- ____ Failure to initiate or call for transport of the patient within 10 minute time limit
- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to determine scene safety
- ____ Failure to assess for and provide spinal protection when indicated
- ____ Failure to voice and ultimately provide high concentration oxygen
- ____ Failure to assess/provide adequate ventilation
- ____ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ____ Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene
- ____ Performs other assessment before assessing/treating threats to airway, breathing and circulation
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

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Emergency Medical Responder Psychomotor Examination

Skill Sheet 3
TESTED

BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| Possible Points | Points Awarded |
|--------------------|-------------------|
|--------------------|-------------------|

| | | |
|---|--------------|---|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Applies direct pressure to the wound | 1 | |
| NOTE: The examiner must now inform candidate that the wound continues to bleed. | | |
| Applies tourniquet | 1 | |
| NOTE: The examiner must now inform candidate that the patient is exhibiting signs and symptoms of hypoperfusion. | | |
| Properly positions the patient | 1 | |
| Administers high concentration oxygen | 1 | |
| Initiates steps to prevent heat loss from the patient | 1 | |
| Indicates the need for immediate transportation | 1 | |
| Actual Time Ended: _____ | TOTAL | 7 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to administer high concentration oxygen
- ____ Failure to control hemorrhage using correct procedures in a timely manner
- ____ Failure to indicate the need for immediate transportation
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

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Emergency Medical Responder Psychomotor Examination

OXYGEN ADMINISTRATION BY NON-REBREATHHER MASK

Skill Sheet 4
TESTED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible
Points Points
Awarded

| | | |
|--|---|--|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Gathers appropriate equipment | 1 | |
| Cracks valve on the oxygen tank | 1 | |
| Assembles the regulator to the oxygen tank | 1 | |
| Opens the oxygen tank valve | 1 | |
| Checks oxygen tank pressure | 1 | |
| Checks for leaks | 1 | |
| Attaches non-rebreather mask to correct port of regulator | 1 | |
| Turns on oxygen flow to prefill reservoir bag | 1 | |
| Adjusts regulator to assure oxygen flow rate of at least 10 L/minute | 1 | |
| Attaches mask to patient's face and adjusts to fit snugly | 1 | |

Actual Time Ended: _____

TOTAL 11

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to assemble the oxygen tank and regulator without leaks
- ____ Failure to prefill the reservoir bag
- ____ Failure to adjust the oxygen flow rate to the non-rebreather mask of at least 10 L/minute
- ____ Failure to ensure a tight mask seal to patient's face
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention



Emergency Medical Responder Psychomotor Examination

BVM VENTILATION OF AN APNEIC ADULT PATIENT

Skill Sheet 5
TESTED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

| | | |
|--|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Checks responsiveness | 1 | |
| Requests additional EMS assistance | 1 | |
| Checks breathing and pulse simultaneously | 1 | |
| NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seconds, examiner informs candidate, "The patient is unresponsive, apneic and has a weak pulse of 60." | | |
| Opens airway properly | 1 | |
| NOTE: The examiner must now inform the candidate, "The mouth is full of secretions and vomitus." | | |
| Prepares rigid suction catheter | 1 | |
| Turns on power to suction device or retrieves manual suction device | 1 | |
| Inserts rigid suction catheter without applying suction | 1 | |
| Suctions the mouth and oropharynx | 1 | |
| NOTE: The examiner must now inform the candidate, "The mouth and oropharynx are clear." | | |
| Opens the airway manually | 1 | |
| Inserts oropharyngeal airway | 1 | |
| NOTE: The examiner must now inform the candidate, "No gag reflex is present and the patient accepts the airway adjunct." | | |
| **Ventilates the patient immediately using a BVM device unattached to oxygen [**Award this point if candidate elects to ventilate initially with BVM attached to reservoir and oxygen so long as first ventilation is delivered within 30 seconds.] | 1 | |
| NOTE: The examiner must now inform the candidate that ventilation is being properly performed without difficulty. | | |
| Re-checks pulse for no more than 10 seconds | 1 | |
| Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/minute] | 1 | |
| Ventilates the patient adequately -Proper volume to cause visible chest rise (1 point) -Proper rate [10 – 12/minute (1 ventilation every 5 – 6 seconds)] (1 point) | 2 | |
| Note: The examiner must now ask the candidate, "How would you know if you are delivering appropriate volumes with each ventilation?" | | |
| Actual Time Ended: _____ | TOTAL | 16 |

CRITICAL CRITERIA

- _____ After suctioning the patient, failure to initiate ventilations within 30 seconds or interrupts ventilations for greater than 30 seconds at any time
- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to suction airway **before** ventilating the patient
- _____ Suctions the patient for an excessive and prolonged time
- _____ Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds
- _____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- _____ Failure to ventilate the patient at a rate of 10 – 12/minute (1 ventilation every 5 – 6 seconds)
- _____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- _____ Insertion or use of any adjunct in a manner dangerous to the patient
- _____ Failure to manage the patient as a competent EMR
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

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Emergency Medical Responder Psychomotor Examination

Skill Sheet 6
VERIFIED

CARDIAC ARREST MANAGEMENT / AED

Candidate: _____

Examiner: _____

Date: _____

Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|--|-----------------|----------------|
|--|-----------------|----------------|

| | | |
|--|---|-----------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Determines the scene/situation is safe | 1 | |
| Attempts to question bystanders about arrest events | 1 | |
| Checks patient responsiveness | 1 | |
| Requests additional EMS assistance | 1 | |
| Checks breathing and pulse simultaneously | 1 | |
| NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seconds, examiner informs candidate, "The patient is unresponsive, apneic and pulseless." | | |
| Immediately begins chest compressions [adequate depth and rate; allows the chest to recoil completely] | 1 | |
| Performs 2 minutes of high-quality, 1-rescuer adult CPR <ul style="list-style-type: none"> -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds throughout (1 point) | 5 | |
| NOTE: After 2 minutes (5 cycles), candidate assesses patient and second rescuer resumes compressions while candidate operates AED. | | |
| Turns on power to AED | 1 | |
| Follows prompts and correctly attaches AED to patient | 1 | |
| Stops CPR and ensures all individuals are clear of the patient during rhythm analysis | 1 | |
| Ensures that all individuals are clear of the patient and delivers shock from AED | 1 | |
| Immediately directs rescuer to resume chest compressions | 1 | |
| Actual Time Ended: _____ | | |
| TOTAL | | 17 |

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds
- ___ Failure to immediately begin chest compressions as soon as pulselessness is confirmed
- ___ Failure to demonstrate acceptable high-quality, 1-rescuer adult CPR
- ___ Interrupts CPR for more than 10 seconds at any point
- ___ Failure to correctly attach the AED to the patient
- ___ Failure to operate the AED properly
- ___ Failure to deliver shock in a timely manner
- ___ Failure to ensure that all individuals are clear of patient during rhythm analysis and before delivering shock [verbalizes "All clear" and observes]
- ___ Failure to immediately resume compressions after shock delivered
- ___ Failure to manage the patient as a competent EMR
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 7
VERIFIED

SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible
Points

Points
Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs assistant to place/maintain head in the neutral, in-line position | 1 | |
| Directs assistant to maintain manual stabilization of the head | 1 | |
| Reassesses motor, sensory and circulatory functions in each extremity | 1 | |
| Applies appropriately sized extrication collar | 1 | |
| Positions the immobilization device behind the patient | 1 | |
| Secures the device to the patient's torso | 1 | |
| Evaluates torso fixation and adjusts as necessary | 1 | |
| Evaluates and pads behind the patient's head as necessary | 1 | |
| Secures the patient's head to the device | 1 | |
| Verbalizes moving the patient to a long backboard | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Actual Time Ended: _____ | TOTAL | 12 |

CRITICAL CRITERIA

- ____ Failure to immediately direct or take manual stabilization of the head
- ____ Failure to properly apply appropriately sized cervical collar before ordering release of manual stabilization
- ____ Released or ordered release of manual stabilization before it was maintained mechanically
- ____ Manipulated or moved patient excessively causing potential spinal compromise
- ____ Head immobilized to the device **before** device sufficiently secured to the torso
- ____ Device moves excessively up, down, left or right on the patient's torso
- ____ Head immobilization allows for excessive movement
- ____ Torso fixation inhibits chest rise, resulting in respiratory compromise
- ____ Upon completion of immobilization, head is not in a neutral, in-line position
- ____ Failure to reassess motor, sensory and circulatory functions in all extremities after voicing immobilization to the long backboard
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 8
VERIFIED

SPINAL IMMOBILIZATION (SUPINE PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs assistant to place/maintain head in the neutral, in-line position | 1 | |
| Directs assistant to maintain manual stabilization of the head | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Applies appropriately sized extrication collar | 1 | |
| Positions the immobilization device appropriately | 1 | |
| Directs movement of the patient onto the device without compromising the integrity of the spine | 1 | |
| Applies padding to void between the torso and the device as necessary | 1 | |
| Immobilizes the patient's torso to the device | 1 | |
| Evaluates and pads behind the patient's head as necessary | 1 | |
| Immobilizes the patient's head to the device | 1 | |
| Secures the patient's legs to the device | 1 | |
| Secures the patient's arms to the device | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Actual Time Ended: _____ | TOTAL | 14 |

CRITICAL CRITERIA

- ____ Failure to immediately direct or take manual stabilization of the head
- ____ Failure to properly apply appropriately sized cervical collar before ordering release of manual stabilization Released or ordered release of manual stabilization before it was maintained mechanically
- ____ Manipulated or moved the patient excessively causing potential spinal compromise
- ____ Head immobilized to the device **before** device sufficiently secured to the torso
- ____ Patient moves excessively up, down, left or right on the device
- ____ Head immobilization allows for excessive movement
- ____ Upon completion of immobilization, head is not in a neutral, in-line position
- ____ Failure to reassess motor, sensory and circulatory functions in each extremity after immobilizing patient to the device
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 9
VERIFIED

LONG BONE IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

| | | |
|--|---|--|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs application of manual stabilization of the injury | 1 | |
| Assesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Measures the splint | 1 | |
| Applies the splint | 1 | |
| Immobilizes the joint above the injury site | 1 | |
| Immobilizes the joint below the injury site | 1 | |
| Secures the entire injured extremity | 1 | |
| Immobilizes the hand/foot in the position of function | 1 | |
| Reassesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |

Actual Time Ended: _____

TOTAL 10

Critical Criteria

- ____ Failure to immediately stabilize the extremity manually
- ____ Grossly moves the injured extremity
- ____ Failure to immobilize the joint above and the joint below the injury site
- ____ Failure to immobilize the hand or foot in a position of function
- ____ Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 10
VERIFIED

JOINT IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible
Points Points
Awarded

| | | |
|--|--------------|---|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs application of manual stabilization of the injury | 1 | |
| Assesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Selects the proper splinting material | 1 | |
| Immobilizes the site of the injury | 1 | |
| Immobilizes the bone above the injury site | 1 | |
| Immobilizes the bone below the injury site | 1 | |
| Secures the entire injured extremity | 1 | |
| Reassesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Actual Time Ended: _____ | TOTAL | 9 |

Critical Criteria

- ____ Failure to immediately stabilize the extremity manually
- ____ Grossly moves the injured extremity
- ____ Failure to immobilize the bone above and below the injury site
- ____ Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ____ Failure to manage the patient as a competent EMR
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 11

VERIFIED

NALOXONE ADMINISTRATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Identify the need for administration of Naloxone based on PPMH, vital, signs and symptoms, and presentation | 1 | |
| Support respirations as needed | 1 | |
| Assess blood glucose level | 1 | |
| Verbalize signs of opioid use | 1 | |
| Select the proper medication and check concentration, color, and clarity | 1 | |
| Selects the appropriate syringe and draw up medication if not prefilled | 1 | |
| Confirm expiration date of medication | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Place a nebulizer on the end of the syringe | 1 | |
| Place atomizer against nostril and administer 1mg (0.5 dose) of medication | 1 | |
| Repeat the procedure delivering the remainder of the medication in the opposite nostril | 1 | |
| Reassess patient | 1 | |
| If no improvement, contact medical command and request ALS back up | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 19 |

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to confirm at least three of the "Rights" of medication administration
- _____ Failure to select appropriate medication or concentration of medication
- _____ Failure to support respirations as needed
- _____ Failure to manage the patient as a competent EMR
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Responder Psychomotor Examination

Skill Sheet 12
VERIFIED

BASELINE VITAL SIGNS

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points
 Points Awarded

| | | |
|--|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Blood Pressure (Palpation) | | |
| Apply BP cuff approximately 1" above the antecubital space <ul style="list-style-type: none"> Not over clothing Snug fit Center bladder over artery | 1 | |
| Palpate radial and brachial artery | 1 | |
| Inflate cuff to a minimum of 20 mmHg above the point that the palpable pulse was lost | 1 | |
| Slowly deflate the cuff | 1 | |
| Record/report the palpable systolic blood pressure when the pulse returns (margin +/- 4mmHg) | 1 | |
| Blood Pressure (Auscultation) | | |
| Apply BP cuff approximately 1" above the antecubital space <ul style="list-style-type: none"> Not over clothing Snug fit Center bladder over artery | 1 | |
| Palpate brachial artery | 1 | |
| Place diaphragm of stethoscope over brachial artery | 1 | |
| Inflate cuff to a minimum of 20 mmHg above the point that the palpable pulse was lost | 1 | |
| Slowly deflate the cuff | 1 | |
| Record/report the palpable blood pressure (margin +/- 4mmHg) | 1 | |
| Pulse | | |
| Palpate with two (2) fingers (index and middle) over the radial artery | 1 | |
| Count the palpated pulse for 30 seconds and multiply X 2 | 1 | |
| Asses the following: <ul style="list-style-type: none"> Rate Rhythm (Regular/Irregular) Quality (Strong/Weak) | 1 point each | |
| Record/Report pulse findings (margin +/- 4 bpm) | 1 | |
| Respirations | | |
| Observe rise and fall of the chest or abdomen | 1 | |
| Count respirations for 30 seconds and X 2 | 1 | |
| Asses the following: <ul style="list-style-type: none"> Rate Rhythm (Regular/Irregular) Quality (Strong/Weak) | 1 point each | |
| Record/Report pulse findings (margin +/- 4 bpm) | 1 | |
| Skin | | |
| Skin Color: Normal, Cyanotic, Jaundice, Ashen, Pale, Flushed | 1 | |
| Skin Temperature: Normal, warm, cool, hot | 1 | |
| Skin Condition: Normal, moist, diaphoretic | 1 | |
| Actual Time Ended: _____ | TOTAL | 27 |

CRITICAL CRITERIA

- ☐ Failure to take or verbalize appropriate PPE precautions
- ☐ Failure to manage the patient as a competent EMR
- ☐ Exhibits unacceptable affect with patient or other
- ☐ personnel Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

APPENDIX B



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL

**Skill Sheet 1
TESTED**

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____ Possible Points Points Awarded

| | | |
|---|-----------|--|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| SCENE SIZE-UP | | |
| Determines the scene/situation is safe | 1 | |
| Determines the mechanism of injury/nature of illness | 1 | |
| Determines the number of patients | 1 | |
| Requests additional EMS assistance if necessary | 1 | |
| Considers stabilization of the spine | 1 | |
| PRIMARY SURVEY/RESUSCITATION | | |
| Verbalizes the general impression of the patient | 1 | |
| Determines responsiveness/level of consciousness (AVPU) | 1 | |
| Determines chief complaint/apparent life-threats | 1 | |
| Assesses airway and breathing -Assessment (1 point) -Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) | 3 | |
| Assesses circulation -Assesses/controls major bleeding (1 point) -Checks pulse (1 point) -Assesses skin [either skin color, temperature or condition] (1 point) | 3 | |
| Identifies patient priority and makes treatment/transport decision | 1 | |
| HISTORY TAKING | | |
| History of the present illness -Onset (1 point) -Quality (1 point) -Severity (1 point) -Provocation (1 point) -Radiation (1 point) -Time (1 point) -Clarifying questions of associated signs and symptoms related to OPQRST (2 points) | 8 | |
| Past medical history -Allergies (1 point) -Past pertinent history (1 point) -Events leading to present illness (1 point) -Medications (1 point) -Last oral intake (1 point) | 5 | |
| SECONDARY ASSESSMENT | | |
| Assesses affected body part/system -Cardiovascular -Neurological -Integumentary -Reproductive -Pulmonary -Musculoskeletal -GI/GU -Psychological/Social | 5 | |
| VITAL SIGNS | | |
| -Blood pressure (1 point) -Pulse (1 point) -Respiratory rate and quality (1 point each) | 4 | |
| States field impression of patient | 1 | |
| Interventions [verbalizes proper interventions/treatment] | 1 | |
| REASSESSMENT | | |
| Demonstrates how and when to reassess the patient to determine changes in condition | 1 | |
| Provides accurate verbal report to arriving EMS unit | 1 | |
| Actual Time Ended: _____ TOTAL | 42 | |

CRITICAL CRITERIA

- ____ Failure to initiate or call for transport of the patient within 15 minute time limit
- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to determine scene safety before approaching patient
- ____ Failure to voice and ultimately provide appropriate oxygen therapy
- ____ Failure to assess/provide adequate ventilation
- ____ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ____ Failure to differentiate patient's need for immediate transportation versus continued assessment or treatment at the scene
- ____ Performs secondary examination before assessing and treating threats to airway, breathing and circulation
- ____ Orders a dangerous or inappropriate intervention
- ____ Failure to provide accurate report to arriving EMS unit
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL Oral Glucose Administration

Skill Sheet
 Supplement 1
TESTED/VERIFIED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Perform blood glucose check | | |
| Prepare glucometer and supplies | 1 | |
| Cleanse site | 1 | |
| Lance site | 1 | |
| Apply blood test strip | 1 | |
| Apply direct pressure to site | 1 | |
| Read and interpret results | 1 | |
| Determine appropriate indications for glucose administration | | |
| Level of consciousness | 1 | |
| Pertinent past medical history | 1 | |
| Contact Medical Command if patient condition indicates | 1 | |
| Confirm expiration date of oral glucose | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Explain the procedure to the patient | 1 | |
| Place oral glucose between cheek and gum | 1 | |
| Recheck patient's blood glucose level within 5 minutes of administration | 1 | |
| If no improvement contact medical command and request ALS back up | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 21 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to consult medical command at appropriate times
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to determine blood glucose level prior to, or following, oral glucose administration
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL Nitroglycerin Administration

Skill Sheet
 Supplement 2
TESTED/VERIFIED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Determine appropriate indications for glucose administration | | |
| Confirm patient allergies | 1 | |
| Determine if the patient has self-administered nitroglycerine prior to EMS arrival | 1 | |
| Confirm patient's blood pressure is ≥ 100 systolic | 1 | |
| Contact Medical Command | 1 | |
| Confirm expiration date of nitroglycerine | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Explain the procedure and possible side effects to the patient | 1 | |
| Place the patient in a comfortable position | 1 | |
| Place one nitroglycerine tablet or administer one pump of liquid nitroglycerine under the tongue | 1 | |
| Instruct the patient to allow the medication to absorb | 1 | |
| Recheck the patients blood pressure within 3 – 5 minutes of administration | 1 | |
| If no improvement contact medical command and repeat procedure as directed | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 18 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to consult medical command at appropriate times
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to determine patient's blood pressure prior to, or following, oral glucose administration
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL Nebulized Medication Administration

Skill Sheet
 Supplement 3
TESTED/VERIFIED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Properly determines the need for nebulized medications | 1 | |
| Assess the patient's ability to utilize a nebulizer | 1 | |
| Confirm patient allergies | 1 | |
| Confirm patient's heart rate is ≤ 130 for adults and ≤ 150 in pediatrics | 1 | |
| Confirm expiration date of medication | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Prepare the Nebulizer | | |
| Assemble Nebulizer | 1 | |
| Add appropriate medication | 1 | |
| Connect the mouthpiece | 1 | |
| Attach oxygen to the nebulizer flowing at 8 – 10 liters per minute | 1 | |
| Explain the procedure and possible side effects to the patient | 1 | |
| Place the patient in a sitting up position | 1 | |
| Administer Medication | | |
| Instruct the patient to hold the nebulizer with lips sealed around the mouthpiece | 1 | |
| Instruct the patient to breath as deeply as possible at a normal rate | 1 | |
| Continue administration until all medication has been utilized | 1 | |
| Monitor patient's condition and vital signs after administration | 1 | |
| If no improvement contact medical command for additional treatment as directed | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 23 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to consult medical command at appropriate times
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to administer all medication
- ____ Failure to monitor the patient's condition and vital signs
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL Epinephrine Auto-Injector Administration

Skill Sheet
 Supplement 4
TESTED/VERIFIED

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Properly determines the need for medication | 1 | |
| Consults with Medical Command | 1 | |
| Confirm patient allergies | 1 | |
| Confirm expiration date of medication | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Explain the procedure and possible side effects to the patient | 1 | |
| Remove the cap from the Auto-Injector | 1 | |
| Expose the thigh area (may verbalize) | 1 | |
| Cleanse the area | 1 | |
| In a smooth, firm fashion push the auto injector into the thigh until a click is heard | 1 | |
| Hold the auto injector against the thigh for 10 seconds | 1 | |
| Properly dispose of the auto injector in a sharps container | 1 | |
| Monitor patient's condition and vital signs after administration | 1 | |
| If no improvement, contact medical command for additional treatment as directed | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 20 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to consult medical command at appropriate times
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to monitor the patient's condition and vital signs
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – MEDICAL Epinephrine 1:1000 Ampule Administration

Skill Sheet
Supplement 5
TESTED/VERIFIED

Candidate: _____

Examiner: _____

Date: _____

Signature: _____

Actual Time Started: _____

Possible
Points

Points
Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Properly determines the need for medication | 1 | |
| Consults with Medical Command for orders | 1 | |
| Confirm patient allergies | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Explain the procedure and possible side effects to the patient | 1 | |
| Selects proper medication and concentration | 1 | |
| Checks medication for cloudiness or discoloration | 1 | |
| Selects proper needle and syringe | 1 | |
| Confirm expiration date of medication | 1 | |
| Cleans the neck of the ampule | 1 | |
| Opens ampule properly snapping it at the break line while directing the action away from the patient and others | 1 | |
| Withdraw the medication utilizing the prepared syringe and needle | 1 | |
| Verify the correct dosage of medication once its withdrawn from the ampule | 1 | |
| Tap the barrel of the syringe to remove excess air bubbles | 1 | |
| Select and cleanse the appropriate administration site | 1 | |
| Penetrates the muscle at a 90° angle | 1 | |
| Aspirated for blood return prior to injection | 1 | |
| Injects medication and removes needle in the same 90° motion | 1 | |
| Properly disposes of needle in a sharps container | 1 | |
| Monitor patient's condition and vital signs after administration | 1 | |
| If no improvement contact medical command for additional treatment as directed | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 27 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to consult medical command at appropriate times
- ____ Failure to appropriate medication and concentration
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to select appropriate needle and syringe
- ____ Failure to properly cleanse injection site
- ____ Failure to aspirate for blood return prior to medication administration
- ____ Failure to monitor the patient's condition and vital signs
- ____ Failure to properly dispose of needle
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

PATIENT ASSESSMENT/MANAGEMENT – TRAUMA

**Skill Sheet 2
TESTED**

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____ Note: Areas denoted by “***” may be integrated within sequence of Primary Survey/Resuscitation

Possible Points Points Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| SCENE SIZE-UP | | |
| Determines the scene/situation is safe | 1 | |
| Determines the mechanism of injury/nature of illness | 1 | |
| Determines the number of patients | 1 | |
| Requests additional EMS assistance if necessary | 1 | |
| Considers stabilization of the spine | 1 | |
| PRIMARY SURVEY/RESUSCITATION | | |
| Verbalizes general impression of the patient | 1 | |
| Determines responsiveness/level of consciousness | 1 | |
| Determines chief complaint/apparent life-threats | 1 | |
| Airway -Opens and assesses airway (1 point) -Inserts adjunct as indicated (1 point) | 2 | |
| Breathing -Assess breathing (1 point) -Assures adequate ventilation (1 point) -Initiates appropriate oxygen therapy (1 point) -Manages any injury which may compromise breathing/ventilation (1 point) | 4 | |
| Circulation -Checks pulse (1 point) -Assess skin [either skin color, temperature or condition] (1 point) -Assesses for and controls major bleeding if present (1 point) -Initiates shock management [positions patient properly, conserves body heat] (1 point) | 4 | |
| Identifies patient priority and makes treatment/transport decision (based upon calculated GCS) | 1 | |
| HISTORY TAKING | | |
| Obtains baseline vital signs [must include BP, P and R] (1 point) | 1 | |
| Attempts to obtain SAMPLE history | 1 | |
| SECONDARY ASSESSMENT | | |
| Head -Inspects and palpates scalp and ears (1 point) ** -Assesses eyes (1 point) -Inspects mouth**, nose** and assesses facial area (1 point) | 3 | |
| Neck** -Checks position of trachea (1 point) -Checks jugular veins (1 point) -Palpates cervical spine (1 point) | 3 | |
| Chest** -Inspects chest (1 point) -Palpates chest (1 point) -Auscultates chest (1 point) | 3 | |
| Abdomen/pelvis** -Inspects and palpates abdomen (1 point) -Assesses pelvis (1 point) -Verbalizes assessment of genitalia/perineum as needed (1 point) | 3 | |
| Lower extremities** -Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/leg) | 2 | |
| Upper extremities -Inspects, palpates and assesses motor, sensory and distal circulatory functions (1 point/arm) | 2 | |
| Posterior thorax, lumbar and buttocks** -Inspects and palpates posterior thorax (1 point) -Inspects and palpates lumbar and buttocks areas (1 point) | 2 | |
| Manages secondary injuries and wounds appropriately | 1 | |
| REASSESSMENT | | |
| Demonstrates how and when to reassess the patient | 1 | |
| Actual Time Ended: _____ | TOTAL | 42 |

CRITICAL CRITERIA

- ____ Failure to initiate or call for transport of the patient within 10 minute time limit
- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to determine scene safety
- ____ Failure to assess for and provide spinal protection when indicated
- ____ Failure to voice and ultimately provide high concentration oxygen
- ____ Failure to assess/provide adequate ventilation
- ____ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ____ Failure to differentiate patient's need for immediate transportation versus continued assessment/treatment at the scene
- ____ Performs other assessment before assessing/treating threats to airway, breathing and circulation
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 3
TESTED

BLEEDING CONTROL/SHOCK MANAGEMENT

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| Possible Points | Points Awarded |
|--------------------|-------------------|
|--------------------|-------------------|

| | | |
|---|--------------|---|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Applies direct pressure to the wound | 1 | |
| NOTE: The examiner must now inform candidate that the wound continues to bleed. | | |
| Applies tourniquet | 1 | |
| NOTE: The examiner must now inform candidate that the patient is exhibiting signs and symptoms of hypoperfusion. | | |
| Properly positions the patient | 1 | |
| Administers high concentration oxygen | 1 | |
| Initiates steps to prevent heat loss from the patient | 1 | |
| Indicates the need for immediate transportation | 1 | |
| Actual Time Ended: _____ | TOTAL | 7 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to administer high concentration oxygen
- ____ Failure to control hemorrhage using correct procedures in a timely manner
- ____ Failure to indicate the need for immediate transportation
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

AIRWAY MANAGEMENT – KING AIRWAY

**Skill Sheet 4
TESTED**

Candidate: _____ Examiner: _____
Date: _____ Signature: _____

Actual Time Started: _____

Possible
Points Points
Awarded

| | | |
|--|--------------|-----------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Checks responsiveness | 1 | |
| Requests additional EMS assistance | 1 | |
| Checks breathing and pulse simultaneously | 1 | |
| NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seconds, examiner informs candidate, "The patient is unresponsive, apneic and has a weak pulse of 60." | | |
| Opens airway properly | 1 | |
| Ventilates the patient at a proper volume and rate via BVM | 1 | |
| Directs assistant to take over BVM ventilation and pre-oxygenate patient | 1 | |
| Selects appropriate size King Airway | 1 | |
| Inspects and prepares King Airway for insertion | 1 | |
| Positions head properly | 1 | |
| Displace the tongue and jaw | 1 | |
| Advance the King Airway until the base of the connector aligns with the teeth and gums | 1 | |
| Inflate the cuff using manufacture's specified amount of air | 1 | |
| Secure tube in place | 1 | |
| Confirm placement via auscultation and secondary detection method | 1 | |
| Reassess patient | 1 | |
| Document procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 17 |

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds
- _____ Failure to ventilate the patient at the rate
- _____ Failure to select proper size King Airway
- _____ Failure to inflate cuff
- _____ Failure to secure tube
- _____ Failure to confirm placement
- _____ Failure to manage the patient as a competent EMT
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 5
VERIFIED

CARDIAC ARREST MANAGEMENT / AED

Candidate: _____

Examiner: _____

Date: _____

Signature: _____

Actual Time Started: _____ Possible Points Points Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Determines the scene/situation is safe | 1 | |
| Attempts to question bystanders about arrest events | 1 | |
| Checks patient responsiveness | 1 | |
| Requests additional EMS assistance | 1 | |
| Checks breathing and pulse simultaneously | 1 | |
| NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seconds, examiner informs candidate, "The patient is unresponsive, apneic and pulseless." | | |
| Immediately begins chest compressions [adequate depth and rate; allows the chest to recoil completely] | 1 | |
| Performs 2 minutes of high-quality, 1-rescuer adult CPR -Adequate depth and rate (1 point) -Correct compression-to-ventilation ratio (1 point) -Allows the chest to recoil completely (1 point) -Adequate volumes for each breath (1 point) -Minimal interruptions of no more than 10 seconds throughout (1 point) | 5 | |
| NOTE: After 2 minutes (5 cycles), candidate assesses patient and second rescuer resumes compressions while candidate operates AED. | | |
| Turns on power to AED | 1 | |
| Follows prompts and correctly attaches AED to patient | 1 | |
| Stops CPR and ensures all individuals are clear of the patient during rhythm analysis | 1 | |
| Ensures that all individuals are clear of the patient and delivers shock from AED | 1 | |
| Immediately directs rescuer to resume chest compressions | 1 | |
| Actual Time Ended: _____ | TOTAL | 17 |

Critical Criteria

- ___ Failure to take or verbalize appropriate PPE precautions
- ___ Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds
- ___ Failure to immediately begin chest compressions as soon as pulselessness is confirmed
- ___ Failure to demonstrate acceptable high-quality, 1-rescuer adult CPR
- ___ Interrupts CPR for more than 10 seconds at any point
- ___ Failure to correctly attach the AED to the patient
- ___ Failure to operate the AED properly
- ___ Failure to deliver shock in a timely manner
- ___ Failure to ensure that all individuals are clear of patient during rhythm analysis and before delivering shock [verbalizes "All clear" and observes]
- ___ Failure to immediately resume compressions after shock delivered
- ___ Failure to manage the patient as a competent EMT
- ___ Exhibits unacceptable affect with patient or other personnel
- ___ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 6
VERIFIED

BASELINE VITAL SIGNS

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points
 Points Awarded

| | | |
|--|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Blood Pressure (Palpation) | | |
| Apply BP cuff approximately 1" above the antecubital space <ul style="list-style-type: none"> Not over clothing Snug fit Center bladder over artery | 1 | |
| Palpate radial and brachial artery | 1 | |
| Inflate cuff to a minimum of 20 mmHg above the point that the palpable pulse was lost | 1 | |
| Slowly deflate the cuff | 1 | |
| Record/report the palpable systolic blood pressure when the pulse returns (margin +/- 4mmHg) | 1 | |
| Blood Pressure (Auscultation) | | |
| Apply BP cuff approximately 1" above the antecubital space <ul style="list-style-type: none"> Not over clothing Snug fit Center bladder over artery | 1 | |
| Palpate brachial artery | 1 | |
| Place diaphragm of stethoscope over brachial artery | 1 | |
| Inflate cuff to a minimum of 20 mmHg above the point that the palpable pulse was lost | 1 | |
| Slowly deflate the cuff | 1 | |
| Record/report the palpable blood pressure (margin +/- 4mmHg) | 1 | |
| Pulse | | |
| Palpate with two (2) fingers (index and middle) over the radial artery | 1 | |
| Count the palpated pulse for 30 seconds and multiply X 2 | 1 | |
| Asses the following: <ul style="list-style-type: none"> Rate Rhythm (Regular/Irregular) Quality (Strong/Weak) | 1 point each | |
| Record/Report pulse findings (margin +/- 4 bpm) | 1 | |
| Respirations | | |
| Observe rise and fall of the chest or abdomen | 1 | |
| Count respirations for 30 seconds and X 2 | 1 | |
| Asses the following: <ul style="list-style-type: none"> Rate Rhythm (Regular/Irregular) Quality (Strong/Weak) | 1 point each | |
| Record/Report pulse findings (margin +/- 4 bpm) | 1 | |
| Skin | | |
| Skin Color: Normal, Cyanotic, Jaundice, Ashen, Pale, Flushed | 1 | |
| Skin Temperature: Normal, warm, cool, hot | 1 | |
| Skin Condition: Normal, moist, diaphoretic | 1 | |
| Actual Time Ended: _____ | TOTAL | 27 |

CRITICAL CRITERIA

- ☐ Failure to take or verbalize appropriate PPE precautions
- ☐ Failure to manage the patient as a competent EMT
- ☐ Exhibits unacceptable affect with patient or other personnel
- ☐ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 7
VERIFIED

SPINAL IMMOBILIZATION (SEATED PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs assistant to place/maintain head in the neutral, in-line position | 1 | |
| Directs assistant to maintain manual stabilization of the head | 1 | |
| Reassesses motor, sensory and circulatory functions in each extremity | 1 | |
| Applies appropriately sized extrication collar | 1 | |
| Positions the immobilization device behind the patient | 1 | |
| Secures the device to the patient's torso | 1 | |
| Evaluates torso fixation and adjusts as necessary | 1 | |
| Evaluates and pads behind the patient's head as necessary | 1 | |
| Secures the patient's head to the device | 1 | |
| Verbalizes moving the patient to a long backboard | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Actual Time Ended: _____ | TOTAL | 12 |

CRITICAL CRITERIA

- ____ Failure to immediately direct or take manual stabilization of the head
- ____ Failure to properly apply appropriately sized cervical collar before ordering release of manual stabilization
- ____ Released or ordered release of manual stabilization before it was maintained mechanically
- ____ Manipulated or moved patient excessively causing potential spinal compromise
- ____ Head immobilized to the device **before** device sufficiently secured to the torso
- ____ Device moves excessively up, down, left or right on the patient's torso
- ____ Head immobilization allows for excessive movement
- ____ Torso fixation inhibits chest rise, resulting in respiratory compromise
- ____ Upon completion of immobilization, head is not in a neutral, in-line position
- ____ Failure to reassess motor, sensory and circulatory functions in each extremity after voicing immobilization to the long backboard
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 8
VERIFIED

SPINAL IMMOBILIZATION (SUPINE PATIENT)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs assistant to place/maintain head in the neutral, in-line position | 1 | |
| Directs assistant to maintain manual stabilization of the head | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Applies appropriately sized extrication collar | 1 | |
| Positions the immobilization device appropriately | 1 | |
| Directs movement of the patient onto the device without compromising the integrity of the spine | 1 | |
| Applies padding to void between the torso and the device as necessary | 1 | |
| Immobilizes the patient's torso to the device | 1 | |
| Evaluates and pads behind the patient's head as necessary | 1 | |
| Immobilizes the patient's head to the device | 1 | |
| Secures the patient's legs to the device | 1 | |
| Secures the patient's arms to the device | 1 | |
| Reassesses motor, sensory and circulatory function in each extremity | 1 | |
| Actual Time Ended: _____ | TOTAL | 14 |

CRITICAL CRITERIA

- ____ Failure to immediately direct or take manual stabilization of the head
- ____ Failure to properly apply appropriately sized cervical collar before ordering release of manual stabilization
- ____ Released or ordered release of manual stabilization before it was maintained mechanically
- ____ Manipulated or moved the patient excessively causing potential spinal compromise
- ____ Head immobilized to the device **before** device sufficiently secured to the torso
- ____ Patient moves excessively up, down, left or right on the device
- ____ Head immobilization allows for excessive movement
- ____ Upon completion of immobilization, head is not in a neutral, in-line position
- ____ Failure to reassess motor, sensory and circulatory functions in each extremity after immobilizing patient to the device
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 9
VERIFIED

LONG BONE IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

| | | |
|--|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs application of manual stabilization of the injury | 1 | |
| Assesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Measures the splint | 1 | |
| Applies the splint | 1 | |
| Immobilizes the joint above the injury site | 1 | |
| Immobilizes the joint below the injury site | 1 | |
| Secures the entire injured extremity | 1 | |
| Immobilizes the hand/foot in the position of function | 1 | |
| Reassesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Actual Time Ended: _____ | TOTAL | 10 |

Critical Criteria

- ____ Failure to immediately stabilize the extremity manually
- ____ Grossly moves the injured extremity
- ____ Failure to immobilize the joint above and the joint below the injury site
- ____ Failure to immobilize the hand or foot in a position of function
- ____ Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 10
VERIFIED

JOINT IMMOBILIZATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible
Points Points
Awarded

| | | |
|--|--------------|---|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Directs application of manual stabilization of the injury | 1 | |
| Assesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Selects the proper splinting material | 1 | |
| Immobilizes the site of the injury | 1 | |
| Immobilizes the bone above the injury site | 1 | |
| Immobilizes the bone below the injury site | 1 | |
| Secures the entire injured extremity | 1 | |
| Reassesses distal motor, sensory and circulatory functions in the injured extremity | 1 | |
| NOTE: The examiner acknowledges, "Motor, sensory and circulatory functions are present and normal." | | |
| Actual Time Ended: _____ | TOTAL | 9 |

Critical Criteria

- ____ Failure to immediately stabilize the extremity manually
- ____ Grossly moves the injured extremity
- ____ Failure to immobilize the bone above and below the injury site
- ____ Failure to reassess distal motor, sensory and circulatory functions in the injured extremity before and after splinting
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 11
VERIFIED

12 LEAD EKG ACQUISITION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|--|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Identifies Indications for 12 Lead EKG acquisition | 1 | |
| Prepares monitor and connects electrodes to the patient cable | 1 | |
| Explains procedure to patient | 1 | |
| Exposes patient's chest and preps as necessary | 1 | |
| Properly applies chest leads (V1, V2, V3, V4, V5, V6, and limb leads) V1: Right 4 th intercostal space beside sternum V2: Left 4 th intercostal space beside sternum V4: Left 5 th intercostal space, midclavicular V3: Halfway between V2 and V4 V5: Horizontal to V4, anterior to axillary line V6: Horizontal to V5, Mid-axillary line | 1 point each | |
| Properly applies Limb Leads (RA, LA, LL) | 1 | |
| Instructs patient to remain as still as possible | 1 | |
| Acquires 12 lead EKG per manufacturer's instructions | 1 | |
| Transmits EKG to receiving facility | 1 | |
| Reassess patient | 1 | |
| Confirm transmission of 12 lead has completed | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 18 |

Critical Criteria

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to identify the need for 12 lead EKG acquisition
- ____ Failure to appropriately apply leads
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 12

VERIFIED

CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP)

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Performs initial assessment | 1 | |
| Applies initial high flow oxygen | 1 | |
| Identifies indications for CPAP utilization | 1 | |
| Identifies any contraindications for CPAP | 1 | |
| Explains the procedure to the patient | 1 | |
| Assembles CPAP correctly per manufacturer's directions | 1 | |
| Sets device parameters per protocol | 1 | |
| Applies device to patient obtaining a good face seal | 1 | |
| Adjusts pressure as required | 1 | |
| Comforts/coaches patient through the use of CPAP | 1 | |
| Reassess patient | 1 | |
| If no improvement contact medical command and request ALS back up | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 14 |

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to assemble device appropriately
- _____ Failure to confirm a good face seal
- _____ Failure to manage the patient as a competent EMT
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination

Skill Sheet 13
VERIFIED

NALOXONE ADMINISTRATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

| | | |
|---|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Identify the need for administration of Naloxone based on PPMH, vital, signs and symptoms, and presentation | 1 | |
| Support respirations as needed | 1 | |
| Assess blood glucose level | 1 | |
| Verbalize signs of opioid use | 1 | |
| Select the proper medication and check concentration, color, and clarity | 1 | |
| Selects the appropriate syringe and draw up medication if not prefilled | 1 | |
| Confirm expiration date of medication | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Place a nebulizer on the end of the syringe | 1 | |
| Place atomizer against nostril and administer 1mg (0.5 dose) of medication | 1 | |
| Repeat the procedure delivering the remainder of the medication in the opposite nostril | 1 | |
| Reassess patient | 1 | |
| If no improvement, contact medical command and request ALS back up | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 19 |

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to confirm at least three of the "Rights" of medication administration
- _____ Failure to select appropriate medication or concentration of medication
- _____ Failure to support respirations as needed
- _____ Failure to manage the patient as a competent EMT
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination TETRACAINE

Skill Sheet 14
VERIFIED

OPHTHALMIC ADMINISTRATION / MORGAN LENS IRRIGATION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Actual Time Started: _____

| | Possible Points | Points Awarded |
|---|-----------------|----------------|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Identifies indications for use of Morgan Lens | 1 | |
| Determines no contraindications for use of Morgan Lens | 1 | |
| Confirm patient allergies | 1 | |
| Confirm expiration date of medication | 1 | |
| Confirm the rights of drug administration: Right Patient <input type="checkbox"/> Right Route <input type="checkbox"/> Right Drug <input type="checkbox"/> Right Dose <input type="checkbox"/> Right Time <input type="checkbox"/> | 1 point each | |
| Explains the procedure to patient | 1 | |
| Administers two (2) drops of tetracaine per eye being irrigated | 1 | |
| Attached macro-drop IV tubing to IV Bag | 1 | |
| Attach Morgan Lens delivery set to IV tubing and confirm fluid flowing through device | 1 | |
| With patient looking downward, retract upper eye lid and insert Morgan Lens under upper eye lid | 1 | |
| Have patient look upward, retract lower eye lid and place Morgan Lens | 1 | |
| Adjust flow to irrigate the eye | 1 | |
| Completes irrigations and removes Morgan Lens by retracting lower eye lid and sliding the lens out | 1 | |
| Terminates IV Flow | 1 | |
| Reassess Patient | 1 | |
| Document the procedure | 1 | |
| Actual Time Ended: _____ | TOTAL | 21 |

CRITICAL CRITERIA

- ____ Failure to take or verbalize appropriate PPE precautions
- ____ Failure to confirm expiration date of the medication
- ____ Failure to confirm at least three of the "Rights" of medication administration
- ____ Failure to provide continuous flow while irrigating patient's eye
- ____ Failure to manage the patient as a competent EMT
- ____ Exhibits unacceptable affect with patient or other personnel
- ____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Emergency Medical Technician Psychomotor Examination
OXYGEN ADMINISTRATION BY NON-REBREATHER MASK

Skill Sheet 15
VERIFIED

Candidate: _____ Examiner: _____
Date: _____ Signature: _____

Actual Time Started: _____

Possible Points **Points Awarded**

| | | |
|--|---|--|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Gathers appropriate equipment | 1 | |
| Cracks valve on the oxygen tank | 1 | |
| Assembles the regulator to the oxygen tank | 1 | |
| Opens the oxygen tank valve | 1 | |
| Checks oxygen tank pressure | 1 | |
| Checks for leaks | 1 | |
| Attaches non-rebreather mask to correct port of regulator | 1 | |
| Turns on oxygen flow to prefill reservoir bag | 1 | |
| Adjusts regulator to assure oxygen flow rate of at least 10 L/minute | 1 | |
| Attaches mask to patient's face and adjusts to fit snugly | 1 | |

Actual Time Ended: _____

TOTAL 11

CRITICAL CRITERIA

- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to assemble the oxygen tank and regulator without leaks
- _____ Failure to prefill the reservoir bag
- _____ Failure to adjust the oxygen flow rate to the non-rebreather mask of at least 10 L/minute
- _____ Failure to ensure a tight mask seal to patient's face
- _____ Failure to manage the patient as a competent EMT
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention



Emergency Medical Technician Psychomotor Examination

BVM VENTILATION OF AN APNEIC ADULT PATIENT

Skill Sheet 16
VERIFIED

Candidate: _____ Examiner: _____
Date: _____ Signature: _____

Actual Time Started: _____

Possible Points Points Awarded

| | | |
|--|--------------|----|
| Takes or verbalizes appropriate PPE precautions | 1 | |
| Checks responsiveness | 1 | |
| Requests additional EMS assistance | 1 | |
| Checks breathing and pulse simultaneously | 1 | |
| NOTE: After checking responsiveness, then checking breathing and pulse for no more than 10 seconds, examiner informs candidate, "The patient is unresponsive, apneic and has a weak pulse of 60." | | |
| Opens airway properly | 1 | |
| NOTE: The examiner must now inform the candidate, "The mouth is full of secretions and vomitus." | | |
| Prepares rigid suction catheter | 1 | |
| Turns on power to suction device or retrieves manual suction device | 1 | |
| Inserts rigid suction catheter without applying suction | 1 | |
| Suctions the mouth and oropharynx | 1 | |
| NOTE: The examiner must now inform the candidate, "The mouth and oropharynx are clear." | | |
| Opens the airway manually | 1 | |
| Inserts oropharyngeal airway | 1 | |
| NOTE: The examiner must now inform the candidate, "No gag reflex is present and the patient accepts the airway adjunct." | | |
| **Ventilates the patient immediately using a BVM device unattached to oxygen [**Award this point if candidate elects to ventilate initially with BVM attached to reservoir and oxygen so long as first ventilation is delivered within 30 seconds.] | 1 | |
| NOTE: The examiner must now inform the candidate that ventilation is being properly performed without difficulty. | | |
| Re-checks pulse for no more than 10 seconds | 1 | |
| Attaches the BVM assembly [mask, bag, reservoir] to oxygen [15 L/minute] | 1 | |
| Ventilates the patient adequately -Proper volume to cause visible chest rise (1 point) -Proper rate [10 – 12/minute (1 ventilation every 5 – 6 seconds)] (1 point) | 2 | |
| Note: The examiner must now ask the candidate, "How would you know if you are delivering appropriate volumes with each ventilation?" | | |
| Actual Time Ended: _____ | TOTAL | 16 |

CRITICAL CRITERIA

- _____ After suctioning the patient, failure to initiate ventilations within 30 seconds or interrupts ventilations for greater than 30 seconds at any time
- _____ Failure to take or verbalize appropriate PPE precautions
- _____ Failure to suction airway **before** ventilating the patient
- _____ Suctions the patient for an excessive and prolonged time
- _____ Failure to check responsiveness, then check breathing and pulse simultaneously for no more than 10 seconds
- _____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- _____ Failure to ventilate the patient at a rate of 10 – 12/minute (1 ventilation every 5 – 6 seconds)
- _____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- _____ Insertion or use of any adjunct in a manner dangerous to the patient
- _____ Failure to manage the patient as a competent EMT
- _____ Exhibits unacceptable affect with patient or other personnel
- _____ Uses or orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

APPENDIX C

West Virginia Office of Emergency Medical Services Policies and Procedures

EMR Psychomotor Skills Summary Sheet – Initial Course

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

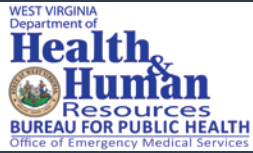
Test Type: ☐ Entire Practical ☐ Retest

| EMR “TESTED” Skill Station | Score | *CS | Evaluator Initials | NOTES |
|---|-------|-----|--------------------|-------|
| Patient Assessment - Trauma | | | | |
| Bleeding Control/Shock Management | | | | |
| Patient Assessment – Medical (Includes Baseline Vital Signs) | | | | |
| Oxygen Admin, by Non-Rebreather Mask | | | | |
| BVM Ventilation of an Apneic Patient | | | | |

** Any failure requires a completed skill sheet to be attached to this summary sheet.*



Instructor signature verifies that the student has shown competence in the respective skill in accordance with the accompanying skill sheet.



West Virginia Office of Emergency Medical Services Policies and Procedures

EMR Psychomotor Skills Summary Sheet – Refresher Course

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: ☐ Entire Practical ☐ Retest

| EMR Skill Station | Score | Pass/Fail | Date | Instructor Signature |
|---|-------|-----------|------|----------------------|
| Patient Assessment - Trauma | | | | |
| Bleeding Control/Shock Management | | | | |
| Patient Assessment – Medical (Includes Baseline Vital Signs) | | | | |
| Oxygen Admin, by Non-Rebreather Mask | | | | |
| BVM Ventilation of an Apneic Patient | | | | |

** Any failure requires a completed skill sheet to be attached to this summary sheet.*

West Virginia Office of Emergency Medical Services Policies and Procedures

EMR Psychomotor Skills Summary Sheet – **Refresher Course**

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: ☐ Entire Practical ☐ Retest

| EMR Skill Station | Score | Pass/Fail | Date | Instructor Signature |
|--|-------|-----------|------|----------------------|
| Cardiac Arrest Management / AED | | | | |
| Baseline Vital Signs | | | | |
| Spinal Immobilization – Seated Patient | | | | |
| Spinal Immobilization – Supine Patient | | | | |
| Long Bone Immobilization | | | | |
| Joint Immobilization | | | | |
| Naloxone Administration | | | | |

Instructor signature verifies that the student has shown competence in the respective skill in accordance with the accompanying skill sheet.

West Virginia Office of Emergency Medical Services Policies and Procedures

EMT Psychomotor Skills Summary Sheet – Initial Course

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: ☐ Entire Practical ☐ Retest

| EMT “TESTED” Skill Station | | Score | *CS | Evaluator Initials | NOTES |
|---|----------------------------------|-------|-----|--------------------|-------|
| Patient Assessment - Trauma | | | | | |
| Bleeding Control/Shock Management | | | | | |
| Patient Assessment – Medical (Includes Baseline Vital Signs) | | | | | |
| Medication Administration -CHOOSE ONE- | Oral Glucose Administration | | | | |
| | Nitroglycerin Administration | | | | |
| | Nebulized Medication Admin. | | | | |
| | Epinephrine Auto-Injector Admin. | | | | |
| | Epinephrine 1:1000 Admin. | | | | |
| Airway Management | | | | | |

** Any failure requires a completed skill sheet to be attached to this summary sheet.*

West Virginia Office of Emergency Medical Services Policies and Procedures

EMT Psychomotor Skills Summary Sheet – Initial Course

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: ☐ Entire Practical ☐ Retest

| EMT “VERIFIED” Skill Station | Score | Pass/Fail | Date | Instructor Signature |
|--|-------|-----------|------|----------------------|
| Cardiac Arrest Management / AED | | | | |
| Baseline Vital Signs | | | | |
| Spinal Immobilization – Seated Patient | | | | |
| Spinal Immobilization – Supine Patient | | | | |
| Long Bone Immobilization | | | | |
| Joint Immobilization | | | | |
| 12 Lead EKG Acquisition | | | | |
| Continuous Positive Airway Pressure – CPAP | | | | |
| Naloxone Administration | | | | |
| Tetracaine Ophthalmic Administration / Morgan Lens | | | | |
| Oxygen Administration by Non-Rebreather Mask | | | | |
| BVM Ventilation of an Apneic Patient | | | | |

Instructor signature verifies that the student has shown competence in the respective skill in accordance with the accompanying skill sheet.

West Virginia Office of Emergency Medical Services Policies and Procedures

EMT Psychomotor Skills Summary Sheet – **Refresher Course**

Name: _____ Exam Date: ____/____/____
Last First MI

WV Certification Number: _____ Exam Location: _____

WVOEMS Class Number: _____ Training Agency Class Number: _____

Test Type: ☐ Entire Practical ☐ Retest

| EMT Skill Station | | Score | Pass/Fail | Date | Instructor Signature |
|---|----------------------------------|-------|-----------|------|----------------------|
| Patient Assessment - Trauma | | | | | |
| Bleeding Control/Shock Management | | | | | |
| Patient Assessment – Medical (Includes Baseline Vital Signs) | | | | | |
| Medication Administration -CHOOSE ONE- | Oral Glucose Administration | | | | |
| | Nitroglycerin Administration | | | | |
| | Nebulized Medication Admin. | | | | |
| | Epinephrine Auto-Injector Admin. | | | | |
| | Epinephrine 1:1000 Admin. | | | | |
| Airway Management | | | | | |

* Any failure requires a completed skill sheet to be attached to this summary sheet.



Name: _____ **Exam Date:** ____/____/____

Last First MI

WVOEMS Class Number:_____ **Training Agency Class Number:**_____

| EMT Skill Station | Score | Pass/Fail | Date | Instructor Signature |
|--|-------|-----------|------|----------------------|
| Cardiac Arrest Management / AED | | | | |
| Baseline Vital Signs | | | | |
| Spinal Immobilization – Seated Patient | | | | |
| Spinal Immobilization – Supine Patient | | | | |
| Long Bone Immobilization | | | | |
| Joint Immobilization | | | | |
| 12 Lead EKG Acquisition | | | | |
| Continuous Positive Airway Pressure – CPAP | | | | |
| Naloxone Administration | | | | |
| Tetracaine Ophthalmic Administration / Morgan Lens | | | | |
| Oxygen Administration by Non-Rebreather Mask | | | | |
| BVM Ventilation of an Apneic Patient | | | | |

Instructor signature verifies that the student has shown competence in the respective skill in accordance with the accompanying skill sheet.

APPENDIX D

WVOEMS Approved EMR Refresher Outline (NCCP standards)

The National Component requires **8 hours** of the topic hours listed for recert: Modules I thru II

Module I

4 Hours

| TOPIC – <i>Airway and Neurological Management</i> | TIME LINE |
|---|--|
| Ventilation ETCO2 | 30 Min. |
| Oxygenation | 30 Min. |
| Neurological Emergencies | 30 Min. |
| Cardiac Adult Cardiac Arrest Pediatric Cardiac Arrest ROSC Stroke | 30 Min. 30 Min. 30 Min. 30 Min. |
| CNS Injuries | 30 Min. |

Required Objectives:

1. Discuss and Describe the ventilatory process
2. Identify adequate vs. inadequate breathing
 - a. Tidal volume
 - b. Minute volume
 - c. Vital capacity
 - d. Hypoxia
 - e. Hypoxic Drive
 - f. Dyspnea
3. Describe ventilatory assist and measurement of adequacy-ETCO2
 - a. When to oxygenate and when to ventilate
4. Discuss cellular metabolism thru oxygenation
5. Difference between respiratory arrest and failure
6. Differentiate between the features and indications of oxygen therapy devices including nasal cannula and non-rebreather mask.
7. State the chain of survival
8. Discuss recognition of the critical cardiac patient
9. Describe the current techniques of one and two rescuer adult CPR
10. Describe the current techniques of one and two rescuer pediatric CPR
11. Describe the use of the AED
12. Identify the signs associated with Return of Spontaneous Circulation
13. Discuss s/s of stroke
14. Discuss importance of knowing the timeline of stroke events
15. Discuss management of the stroke victim
16. Define altered mental status
17. State common causes of altered mental status
18. Define status epilepticus/seizures
19. Explain complications associated with seizures
20. Identify the s/s of a patient with a traumatic brain injury (TBI)
21. Discuss the current research and practices for the use of selective spinal immobilization

| TOPIC – Medical Emergencies/Operations | TIME LINE |
|--|------------------|
| Endocrine Emergencies | 30 Min. |
| Psychiatric / Behavioral Emergencies | 30 Min. |
| Toxicological Emergencies | 30 Min. |
| Immunological Emergencies | 30 Min. |
| Infectious Diseases | 30 Min. |
| OB Emergencies | 30 Min. |
| Field Triage – Disaster/MCI's | 30 Min. |
| EMS Provider Hygiene, Safety, and Vaccinations | 15 Min. |
| EMS Culture and Safety | 15 Min. |

Required Objectives:

1. Explain the role glucose plays on the cells
2. Identify symptoms commonly associated with hypoglycemia
3. Identify symptoms commonly associated with hyperglycemia
4. Describe interventions for hypo/hyperglycemic patients
5. Define a behavioral crisis
6. Describe the components of a mental status exam
7. State the risk factors for suicide
8. Discuss the physiology related to allergies and anaphylaxis
9. Differentiate between a mild/localized allergic reaction and anaphylaxis
10. Explain the actions of medications used to treat anaphylaxis:
 - a. Epinephrine
11. Identify common synthetic stimulants and natural or synthetic THC (Tetrahydrocannabinol)
 - a. Recognize the effects
12. Identify common opioids
 - a. Recognize the effects
13. Explain common treatment options for a person experiencing opioid overdose
14. Describe drug resistant infections
15. State how the transmission of influenza virus occurs
16. Understand mode of transmission
17. Assess the differences between sepsis and septic shock
18. Identify proper hand washing technique
19. Identify appropriate use of alcohol-based hand cleaner
20. Discuss the CDC's recommendations of vaccines for healthcare providers
21. Assess eye safety indications and measures
22. State the stages of labor
23. Explain the procedures for normal child delivery in the field
24. Determine the need for neonatal resuscitation during delivery
25. Describe the routine care of a newborn not requiring resuscitation
26. Discuss CDC's Field Triage Decision Scheme
27. Discuss different triage methods:
 - a. SALT
 - b. START
 - c. JumpSTART
28. Define culture of safety
29. Identify and explain the six core elements necessary to advance an EMS Culture of Safety
30. Identify the role of the EMS providers in establishing a culture of safety within EMS organizations

Module III

4 hours +

| TOPIC – <i>Skills Performance</i> |
|--|
| Patient Assessment – Trauma <i>(includes baseline vital assessment)</i> |
| Patient Assessment - Medical <i>(includes baseline vital assessment)</i> |
| Bleeding Control / Shock Management |
| Oxygen Administration |
| Cardiac Arrest / AED Management |

Required Objectives:

See WVOEMS approved psychomotor objectives

WVOEMS Approved EMT Refresher (NCCP standards)

The National Component requires **20 hours** of the topic hours listed for recert: Modules I thru V.

Module I

4 hours

| TOPIC – <i>Airway and Neurological Management</i> | TIME LINE |
|---|-----------|
| Ventilation ETCO2 | 1 Hour |
| Oxygenation CPAP | 30 Min. |
| Neurological – (Seizures / CNS) | |
| Injury | 1 Hour |
| Stroke | 1 Hour |
| EMS Research / Evidence Based Medicine | 30 Min. |

Required Objectives:

1. Discuss and describe the ventilatory process
2. Identifying adequate vs. inadequate breathing
 - a. Tidal volume
 - b. Minute volume
 - c. Vital capacity
 - d. Hypoxia
 - e. Hypoxic drive
 - f. Dyspnea
3. Describe ventilatory assist and measurement of adequacy-ETCO2
 - When to oxygenate and when to ventilate.
4. Discuss cellular metabolism thru oxygenation.
5. Discuss Internal vs. External respiration
 - Difference between respiratory arrest and failure
6. Discuss use of CPAP* (optional per agency medical direction)
7. Define altered mental status
8. Define diverse types of seizures: generalized, partial, status epilepticus
9. List possible causes of seizures
10. Explain the importance to recognize seizure activity and identify other problems associated with seizures
11. Describe the postictal state and the patient care interventions
12. Identify the s/s of a pt. with a traumatic brain injury
13. Discuss the current research and practices for the use of selective spinal immobilization
14. Discuss differences between ischemic vs. hemorrhagic stroke and TIA
15. Discuss s/s of stroke and some mimics
16. Discuss causes of stroke
17. Discuss identifying, assessing and treatment of the stroke patient.
18. Discuss importance of knowing the timeline of stroke events.
19. Discuss transport to appropriate stroke facilities
20. Explain the practical use of research in EMS care
21. Define different research methods in EMS research
22. Explain the process of conducting a literature review for EMS research

Module II**4 hours**

| TOPIC – <i>Cardiac Management & Considerations</i> | TIME LINE |
|--|-----------|
| Cardiac Arrest 12 Lead EKG AED | 2 Hours |
| ROSC | 30 Min. |
| VAD | 30 Min. |
| Pain Management | 30 Min. |
| Toxicological - Opioids | 30 Min. |

Required Objectives:

1. Describe the A & P, pathophysiology, assessment and management of a myocardial infarction
2. Describe the purpose and demonstrate the application of the 12 lead ECG monitor/transmission
3. Discuss pathophysiology, assessment and management of a cardiac arrest
4. Discuss and demonstrate the application of an AED, indications and contraindications
5. Describe ROSC and effectively manage hemodynamic instability
6. Determine causes of cardiac arrest
 - a. Make treatment choices based on the cause
 - b. Determine appropriate destination
7. Describe the process of induced hypothermia
8. Understand the function of VAD's
9. Discuss patient care issues/differences in assessment involved in patients with a VAD
10. Determine differences between acute and chronic pain management
11. Discuss conducting pain assessments appropriately by patient's age
12. Discuss non-pharmacological pain management options
13. Identify common synthetic stimulants and natural or synthetic THC (Tetrahydrocannabinol)
 - a. Recognize the effects
 - b. Synthetic stimulants
 - c. Natural and synthetic THC
14. Identify common opioids
 - Recognize the effects
15. Discuss management and treatment of the opioid overdose patient

Module III**4 hours**

| TOPIC – Medical Emergencies I/Ops I Management & Considerations | TIME LINE |
|--|------------------|
| Diabetic Emergencies | 1 Hour |
| Psychiatric / Behavioral | 30 Min. |
| EMS Culture of Safety | 30 Min. |
| Immunological Emergencies | 30 Min. |
| Infectious Diseases | 30 Min. |
| EMS Provider Hygiene, Safety, and Vaccinations | 30 Min. |
| At Risk Populations | 30 Min. |

Required objectives:

1. Explain the role glucose plays on the cells
2. Explain the role of insulin
3. Define and explain diabetes and the two types
 - a. Hyperglycemia
 - b. hypoglycemia
4. Discuss assessing the patient with a history of diabetes and an altered mental status
5. Describe the interventions for care and treatment of both the conscious and unconscious patient with a history of diabetes who is having a hypoglycemic episode
6. Explain the management of hyperglycemia
7. Define a behavioral crisis
8. Discuss special considerations for assessing and managing a behavioral crisis or psychiatric emergency
9. Define agitated delirium and describe the care for a patient with agitated delirium
10. State the risk factors for suicide
11. Define culture of safety
12. Identify and explain the six core elements necessary to advance an EMS culture of Safety
Identify the role of the EMS provider in establishing a culture of safety within EMS organizations
13. Understand and define the terms allergic reaction vs. anaphylaxis
14. Discuss causes of an allergic reaction
15. Discuss the assessment, management and treatment of a patient having an allergic vs. anaphylaxis reaction
16. Describe some age-related contraindications to using epinephrine to treat an allergic reaction in a geriatric patient
17. Define infectious disease and communicable disease
18. Define bloodborne vs. airborne transmission
19. Understand mode of transmission
20. Explain post-exposure management
21. Identify proper hand-washing technique
22. Identify appropriate use of alcohol-based hand cleaner
23. Discuss the CDC's recommendations of vaccines for healthcare providers
24. Assess eye safety indications and measures
25. Recognize the unique characteristics of at-risk populations
26. Recognize circumstances that may indicate abuse
 - a. Domestic abuse
 - b. Human trafficking
 - c. Non-accidental trauma
27. State appropriate actions of EMS professionals in the presence of abused pts.

Module IV**4 hours**

| TOPIC – <i>Medical Emergencies II Management & Considerations</i> | TIME LINE |
|--|------------------|
| Special Healthcare Needs | 1.5 Hours |
| OB Emergencies | 30 Min. |
| Pediatric Cardiac Arrest | 2 Hours |

Required Objectives:

1. Identify common special needs patients seen in EMS
2. Relate the role of caregivers of the special needs patient to the EMS Professional's patient care
3. Describe patient assessment of a special needs patient Identify abnormal presentations during childbirth and nuchal cord presentations
4. Discuss management of abnormal presentation and nuchal cord presentation during delivery
5. Recognize the need for neonatal resuscitation during delivery
6. Describe steps for neonatal resuscitation
7. Describe routine care of a newborn not requiring resuscitation
8. Describe current techniques of one and two rescuer CPR for pediatric cardiac arrest
9. Demonstrate current techniques of one and two rescuer CPR for pediatric cardiac arrest

Module V**4 hours**

| TOPIC – Trauma/Ops II Management & Considerations | TIME LINE |
|--|------------------|
| Trauma and Field Triage | 1 Hour |
| Hemorrhage Control | 30 Min. |
| Pediatric Transport | 30 Min. |
| Ambulance Safety | 30 Min. |
| Crew Resource Management | 1 Hour |
| Evidence Based Guidelines | 30 Min. |

Required Objectives:

1. Identify triage criteria for the trauma patient in the Field Triage Decision Scheme
2. State the four steps of the CDC's Field Triage Decision Scheme
3. Examine local protocols
4. Identify and treat severe hemorrhage
5. Define the indications, effects, and contraindications for the use of
 - a. Tourniquets
 - b. Hemostatic agents
6. Explain how to appropriately secure a child safety restraint to a stretcher
7. Discuss the difference between the NHTSA recommendations for safe transport of children based on the condition of the child
8. Discuss the on-going initiatives to increase the safety of children during ambulance transport and the limitations of those current recommendations
9. Define Crew Resource Management
10. Explain the benefits of CRM to EMS
11. Explain the concept of communication in the team environment using advocacy/inquiry or appreciative inquiry
12. State characteristics of effective team leaders
13. State characteristics of effective team members
14. Explain how the use of CRM can reduce errors in patient care
15. Define evidence based medicine and practice
16. Identify resources available through NASEMSO to aid states and agencies in developing evidence based guidelines
17. Explain the benefits of evidence based guidelines for patients
18. Discuss federal initiatives developed to monitor and analyze ground ambulance crashes
 - a. Reference: NHTSA Advances Ground Ambulance Safety
19. Identify the significance of ambulance crashes through the use of national data
20. Evaluate policies and procedures at one's own EMS service related to protecting the patient and providers safety during ground ambulance transport

Module VI

4 hours +

| TOPIC – <i>Skills Performance</i> |
|--|
| Patient Assessment - Trauma |
| Patient Assessment - Medical (<i>includes baseline vital assessment</i>) <i>Must include one (1) of the following:</i> <ul style="list-style-type: none">• Oral Glucose Administration• Nitroglycerine Administration• Nebulized medication Administration• Epinephrine Administration |
| Bleeding Control / Shock Management |
| Airway Management |
| Cardiac Arrest / AED Management |
| Evidence Based Guidelines |

Required Objectives:

See WVOEMS approved psychomotor objectives

WVOEMS Approved AEMT Refresher (NCCP Standards)

Module 1

4 hours

| TOPIC – Airway, Respiration, Ventilation and Neurological Management | TIME LINE |
|---|------------------|
| Ventilation ETCO2 Automated Transport Ventilators | 2 Hours |
| Oxygenation CPAP | 30 Min. |
| Neurological Seizures / CNS | 30 Min. |
| Geriatrics | 1 Hour |

Required Objectives:

1. Differentiate between adequate and inadequate breathing
2. Differentiate between respiratory distress and failure
3. Explain when to oxygenate and when to ventilate a patient
4. Discuss the AHA's position on routine suctioning of the newborn
5. Analyze physiology related to oxygen transport and metabolism
6. Identify the AHA's guidelines on oxygen therapy in the post cardiac arrest, acute coronary syndrome and stroke patient
7. Discuss the role of free radicals related to oxygen therapy
8. Define altered mental status (AMS)
9. State common causes of altered mental status
10. Define status epilepticus/seizures
11. Explain complications associated with seizures
12. Describe the steps in the primary assessment for providing emergency care to a geriatric patient, including the elements of the GEMS diamond.
13. Discuss special considerations when performing the patient assessment process on a geriatric patient
14. Describe the pathophysiology of most common medical conditions including s/s, and the emergency medical care strategies used in the management of each for the geriatric patient.
15. Describe special considerations for a geriatric patient who has experienced trauma
16. Discuss elder abuse and neglect, and its implications in assessment and management of the patient

Module 2

4 hours

| TOPIC – <i>Cardiovascular</i> | TIME LINE |
|--------------------------------------|------------------|
| Stroke | 1 Hour |
| Pediatric Cardiac Arrest | 2.5 Hours |
| Acute Coronary Syndrome | 1 Hour |

Required Objectives:

1. Identify the options for out-of-hospital stroke assessment tools
2. Explain oxygen administration during a stroke emergency
3. Discuss the importance of knowing a timeline of stroke events
4. Identify patients needing rapid transport to the most appropriate stroke hospital
5. Discuss the importance of starting the fibrinolytics check sheet
6. Describe the current techniques of one and two-rescuer CPR
7. Demonstrate the current techniques of one and two-rescuer CPR
8. Demonstrate the proper placement of 12-lead EKGs
9. Assess injury patterns on a 12-lead EKG

Module 3

4 hours

| TOPIC – <i>Cardiovascular / Medical Emergencies</i> | TIME LINE |
|--|------------------|
| VAD (<i>Ventricular Assist Devices</i>) | 30 Min. |
| Adult Cardiac Arrest | 2 Hours |
| Post Resuscitation Care | 30 Min. |
| Pain Management | 1 Hour |

Required objectives:

1. Understand the function of Ventricular Assist Devices
2. State the chain of survival
3. Describe the current techniques of one and two-rescuer CPR
4. Demonstrate the current techniques of one and two-rescuer CPR
5. Effectively manage hemodynamic instability
6. Investigate possible causes of cardiac arrest
 - Make appropriate treatment choices based on the cause
 - Determine the appropriate destination
7. Describe the process of induced hypothermia
8. Conduct pain assessments appropriately by patient's age
9. Critique clinical protocols for pain management
10. Discuss non-pharmacological pain management options
11. Determine the differences between acute and chronic pain management
12. Critique the position paper published by the National Association of EMS Physicians regarding Prehospital Pain Management

Module 4**4 hours**

| TOPIC – Trauma / Medical Emergencies | TIME LINE |
|---|------------------|
| Trauma Triage | 1 Hour |
| Central Nervous System Injury | 1 Hour |
| Hemorrhage Control | 30 Min. |
| Fluid Resuscitation | 30 Min. |
| Endocrine/Diabetic Emergencies | 1 Hour |

Required Objectives:

1. Identify the triage criteria in the CDC's Field Triage Decision Scheme
2. State the four steps of the CDC's Field Triage Decision Scheme
3. Review local protocols
4. Identify the signs and symptoms of a patient with a traumatic brain injury (TBI)
5. Differentiate between the various levels of a TBI
6. Discuss the current research and practices for the use of selective spinal immobilization
7. Identify and treat severe hemorrhage.
8. Differentiate among indications, effects, and contraindications for the use of:
 - Tourniquets
 - Junctional Tourniquets
 - Hemostatic agents
9. Explain the concept of permissive hypotension
10. Discuss research regarding fluid resuscitation
11. Explain the role glucose plays on the cells
12. Explain the role of insulin
13. Identify symptoms commonly associated with hypo/hyperglycemia
14. Identify commonly prescribed medications used to treat diabetes
15. Discuss metabolic syndrome
16. Explain the management of hyperglycemia
17. Explain the management of hypoglycemia
18. Compare the functions of different insulin pumps

Module 5

4 hours

| TOPIC – Medication Delivery and Medical Emergencies I | TIME LINE |
|---|------------------|
| Toxicological/Opioid Emergencies | 30 Min. |
| Immunological Emergencies Allergic Reaction Anaphylaxis | 30 Min. |
| Pharmacology | 1 Hour |
| Medication Administration | 1 Hour |
| Crew Resource Management | 1 Hour |

Required Objectives:

1. Identify common synthetic stimulants and natural or synthetic THC
 - Recognize the effects
 - Synthetic stimulants
 - Natural and synthetic THC
2. Identify common opioids
 - Recognize the effects
3. Explain common treatment options for a person experiencing opioid overdose
4. Discuss the physiology related to allergies and anaphylaxis
5. Differentiate between a mild/localized allergic reaction and anaphylaxis
6. Explain the actions of medications used to treat anaphylaxis
 - Epinephrine
7. Review medications utilized by the AEMT level provider in West Virginia.
8. Analyze the benefits of intramuscular (IM) administration compared to the subcutaneous (SQ) route
9. Critique the delivery of medication with a nasal atomizer to other routes of administration
10. Discuss the different routes of delivery of medications and the rates of absorption for those routes
 - IM
 - SQ
 - IN
 - IV
 - IO
11. Define Crew Resource Management (CRM)
12. Explain the benefits of CRM to EMS
13. State the guiding principles of CRM and briefly explain each
14. Explain the concept of communication in the team environment using advocacy/inquiry or appreciative inquiry
15. State characteristics of effective team leaders
16. State characteristics of effective team members
17. Explain how the use of CRM can reduce errors in patient care

Module 6**4 hours**

| TOPIC – <i>Medical Emergencies II / Operations I</i> | TIME LINE |
|---|------------------|
| Psychiatric/Behavioral Emergencies | 1 Hour |
| Infectious Disease | 30 Min. |
| Special Healthcare Needs | 1 Hours |
| OB Emergencies | 30 Min. |
| EMS Provider Hygiene, Safety, and Vaccinations | 30 Min. |
| EMS Culture of Safety | 30 Min. |

Required Objectives:

1. Describe the components of a mental status examination
2. Perform effective patient restraint methods (verbal and physical)
3. State the risk factors for suicide
4. Analyze the effects of opioids and excited delirium
5. Identify common synthetic stimulants and natural or synthetic THC
 - Recognizing the effects
 - Synthetic stimulants
 - Natural and synthetic THC
6. Describe drug resistant infections
7. State how the transmission of influenza virus (flu) occurs
8. Investigate the role of the EMS provider in disease reporting
9. Compare an epidemic and pandemic
10. Assess the differences between sepsis and septic shock
11. Identify common special needs patients seen in EMS
12. Relate the role of caregivers of the special needs patient to the EMS professional's patient care
13. Describe patient assessment of a special needs patient
14. Identify abnormal presentations present during childbirth
15. Discuss management of a patient with an abnormal presentation during delivery
16. Describe a nuchal cord presentation
17. Discuss the procedures to take when a nuchal cord is present during delivery
18. Recognize the need for neonatal resuscitation during delivery
19. Discuss the management principles of neonatal resuscitation
20. Describe the routine care of a newborn not requiring resuscitation
21. Identify proper hand washing technique
22. Identify appropriate use of alcohol-based hand cleaner
23. Discuss the CDC's recommendations of vaccines for healthcare providers
24. Assess eye safety indications and measures
25. Define culture of safety
26. Identify and explain the six core elements necessary to advance an EMS Culture of Safety
27. Identify the role of the EMS providers in establishing a culture of safety within EMS organizations

Module 7

3 hours

| TOPIC – <i>Operations I</i> | TIME LINE |
|-------------------------------|-----------|
| Ambulance Safety | 30 Min. |
| Pediatric Transport | 30 Min. |
| Field Triage – Disasters/MCIs | 30 Min. |
| EMS Research | 30 Min. |
| At Risk Populations | 30 Min. |
| Evidence Based Guidelines | 30 Min. |

Required Objectives:

1. Discuss federal initiatives developed to monitor and analyze ground ambulance crashes
2. Identify the significance of ambulance crashes through the use of national data
3. State specific factors that contributed to injuries and fatalities sustained during ambulance crashes
4. Evaluate the policies and procedures at each participant's own EMS service related to protecting patient and provider safety during ground ambulance transport
5. Explain how to appropriately secure a child safety restraint to a wheeled ambulance stretcher
6. Differentiate between the NHTSA recommendations for safe ambulance transport of children based on the condition of the child
7. Discuss the on-going initiatives to increase the safety of children during ambulance transport
8. Discuss the limitations of the current recommendations
9. Relate MUCCs impact on the development of the CDC Field Triage Decision Scheme and SALT
10. Analyze the triage methods for
 - SALT
 - START
 - JumpSTART
11. Identify national initiatives and resources that promote and enable EMS Research
12. Explain the practical use of research in EMS care
13. Explain the scientific method
14. Differentiate among the different research methods
15. Explain the process of conducting a literature review
16. Determine training resources for special populations
 - Human trafficking
 - Domestic violence
17. Recognize the unique characteristics of at-risk populations
18. Determine the appropriate actions of EMS professionals in the presence of at-risk patients
19. Recognize circumstances that may indicate abuse
 - Domestic abuse
 - Human trafficking
 - Non-accidental trauma
20. State appropriate actions of EMS professionals in the presence of abused patients
21. Define evidenced based medicine and practice
22. Identify resources available through NASEMSO to aid states and agencies in developing evidence based guidelines
23. Explain the benefits of EBG to patients

WVOEMS Approved PARAMEDIC Refresher (NCCP standards)

Module I

4 hours

| TOPIC – <i>Airway, Respiration, Ventilation and Neurological Management</i> | TIME LINE |
|--|------------------|
| Ventilation ETCO2 Automated Transport Ventilators | 2 Hours |
| Oxygenation CPAP | 30 Min. |
| Capnography | 1 Hour |
| Neurological Seizures / CNS | 30 Min. |

Required Objectives:

1. Differentiate between adequate and inadequate breathing
2. Differentiate between respiratory distress and failure
3. Explain when to oxygenate and when to ventilate a patient
4. Identify the use of automated transport ventilators when managing patients
5. Demonstrate effective BVM ventilation at a proper rate and depth
6. Discuss advantages and disadvantages of various advanced airway adjuncts
7. Define altered mental status
8. State common causes of altered mental status
9. Define status epilepticus/seizures
10. Explain complications associated with seizures

Module II**4 hours**

| TOPIC – <i>Cardiovascular</i> | TIME LINE |
|--------------------------------------|------------------|
| Stroke | 1.5 Hours |
| Pediatric cardiac Arrest | 2.5 Hours |

Required Objectives:

1. Identify the options for out-of-hospital stroke assessment tools
2. Explain oxygen administration during a stroke emergency
3. Discuss the importance of knowing a timeline of stroke events
4. Identify patients needing rapid transport to the most appropriate stroke hospital
5. Discuss the importance of starting the fibrinolytics check sheet
6. Consider causes of pediatric cardiac arrests
7. Demonstrate ALS management skills during a pediatric cardiac arrest for:
 - a. Airway management
 - b. Vascular access
 - c. Pharmacology

Module III**4.5 hours**

| TOPIC – Cardiovascular | TIME LINE |
|---|------------------|
| VAD (<i>Ventricular Assist Devices</i>) | 30 Min. |
| Congestive Heart Failure | 30 Min. |
| Acute Coronary Syndrome | 1 Hour |
| Adult Cardiac Arrest | 2 Hours |
| Post-Resuscitation Care | 30 Min. |

Required objectives:

1. Understand the function of Ventricular Assist Devices
2. Describe assessment/management of patients with VAD's
3. Discuss pathophysiology of congestive heart failure
4. Discuss s/s and treatment of congestive heart failure
5. Discuss the assessment and management of coronary disease and angina
6. List the s/s of acute MI
7. Identify injury patterns on a 12-lead ECG
8. Differentiate STEMI from STEMI imposters
9. Explain the procedure for managing an acute MI including STEMI and non-STEMI presentations
10. Understand the benefits of reperfusion techniques in patients with AMI or suspected AMI
11. Demonstrate the current techniques of cardiac arrest management
12. Discuss airway issues in cardiac arrest management
13. Determine criteria for terminating cardiac arrest in the out-of-hospital setting
14. Identify signs associated with Return of Spontaneous Circulation
15. Describe how to effectively manage hemodynamic instability
16. List possible causes of cardiac arrest
17. Make appropriate treatment choices
18. Make appropriate destination decision

Module IV

3.5 hours

| TOPIC – Trauma | TIME LINE |
|-------------------------------|------------------|
| Trauma Triage | 1 Hour |
| Central Nervous System Injury | 1 Hour |
| Acute Abdomen | 30 Min. |
| Hemorrhage Control | 30 Min. |
| Fluid Resuscitation | 30 Min. |

Required Objectives:

1. Identify the triage criteria in the CDC's Field Triage Decision Scheme
2. State the four steps of the CDC's Field Triage Decision Scheme
3. Review local protocols
4. Identify s/s of a patient with a traumatic brain injury
5. Explain the use of ETCO₂ as a guide for ventilating head injury patients
6. Define primary and secondary spinal cord injury.
7. Discuss various cord syndromes and their s/s
8. Discuss s/s of neurogenic shock and spinal shock
9. Describe how to investigate the chief complaint of a patient with a gastrointestinal disorder, including how to take the patient's history.
10. Discuss the management and treatment of various gastrointestinal disorders
11. Identify and treat severe hemorrhage
12. Differentiate among indications, effects, and contraindications for the use of:
 - a. Tourniquets
 - b. Junctional Tourniquets
 - c. Hemostatic agents
 - d. TXA
13. Explain the concept of permissive hypotension
14. Discuss the dangers of excessive fluid administration
15. Describe Mean Arterial Pressure (MAP) as a tool to better evaluate perfusion

Module V**4 hours**

| TOPIC – Medical Emergencies I | TIME LINE |
|---|------------------|
| Endocrine/Diabetic Emergencies | 1 Hour |
| Toxicological/Opioid Emergencies | 30 Min. |
| Immunological Emergencies Allergic Reaction Anaphylaxis | 30 Min. |
| Pharmacology/Medication Delivery | 1 Hour |
| Pain Management | 1 Hour |

Required Objectives:

1. Explain the role glucose plays on the cells
2. Explain the role of insulin
3. Discuss s/s commonly associated with hypo/hyperglycemia
4. Identify commonly prescribed medications used to treat diabetes
5. Explain the management of hypo/hyperglycemia
6. Discuss metabolic syndrome
7. Discuss the functions of different insulin pumps
8. Discuss common synthetic stimulants and natural or synthetic THC
 - a. Recognize the effects
 - b. Synthetic stimulants
 - c. Natural and synthetic THC
9. Discuss common opioids
10. Explain common treatment options for a person experiencing opioid overdose
11. Discuss the causes of an allergic reaction/anaphylaxis
12. Differentiate between a mild/localized allergic reaction and anaphylaxis
13. Explain the actions of medications used to treat anaphylaxis
 - a. Benadryl
 - b. Epinephrine
14. Discuss the different routes of delivery of medications and the rates of absorption for those routes
 - a. IM
 - b. SQ
 - c. IN
 - d. IV
15. Discuss pharmacological and non-pharmacological pain management options
16. Determine the differences between acute and chronic pain management
17. Discuss the role of QA/QI, medical direction involvement and the importance of documentation of pain management.
18. Discuss reassessment/re-evaluation of pain and management

Module VI**4 hours**

| TOPIC – <i>Medical Emergencies II</i> | TIME LINE |
|--|------------------|
| Psychiatric/Behavioral Emergencies | 1 Hour |
| Infectious Disease | 30 Min. |
| Special Healthcare Needs | 2 Hours |
| OB Emergencies | 30 Min. |

Required Objectives:

1. Discuss the potential causes of behavioral emergencies
2. Define normal, abnormal, overt, and covert behavior.
3. Describe the assessment process for patients with psychiatric emergencies, including safety guidelines
4. Discuss the general management of a patient with a psychiatric emergency
5. Describe restraint methods, both chemical and physical forms and when to apply each
6. Describe care for the psychotic patient
7. State risk factors for suicide
8. Describe drug resistant infections
9. Compare epidemic to pandemic
10. Describe the role of the EMS provider in disease reporting
11. State the differences between sepsis and septic shock
12. Identify common special needs patients seen in EMS
13. Describe the relationship between the caregiver and the EMS provider in caring for the special needs patient.
14. Describe patient assessment of a special needs patient
15. Discuss abnormal presentations present during childbirth
16. Describe nuchal cord presentation
17. Recognize the need for and discuss the management of the principals of neonatal resuscitation
18. Describe the routine care of the newborn not requiring resuscitation
19. Discuss management of a patient with an abnormal presentation during delivery

Module VII**4 hours**

| TOPIC – Operations I | TIME LINE |
|--|------------------|
| EMS Provider Hygiene, Safety, and Vaccinations | 30 Min. |
| EMS Culture and Safety | 30 Min. |
| Crew Resource Management | 1 Hour |
| Ambulance Safety | 30 Min. |
| Pediatric Transport | 30 Min. |
| Field Triage – Disasters/MCIs | 1 Hour |

Required Objectives:

1. Describe proper hand washing techniques
2. Describe appropriate use of alcohol-based hand cleaner
3. Discuss the CDC's recommendations of vaccines for healthcare providers
4. Assess eye safety indications and measures
5. Define culture of safety
6. Identify and explain the six core elements necessary to advance an EMS Culture of Safety
7. Identify the role of the EMS providers in establishing a culture of safety within EMS organizations
8. Define Crew Resource Management
9. Explain the benefits of Crew Resource Management to EMS
10. State the guiding principles of Crew Resource Management, briefly explaining each
11. Explain the concept of communication in the team environment using advocacy/inquiry or appreciative inquiry.
12. State the characteristics of effective team members/leaders
13. Explain how the use of CRM can reduce errors in patient care
14. Discuss federal initiatives developed to monitor and analyze ground ambulance crashes
15. Identify the significance of ambulance crashes through the use of national data
16. Evaluate the policies and procedures at each participant's own EMS service related to protecting patient and provider safety during ground ambulance transport.
17. Explain how to appropriately secure a child safety restraint to a wheeled ambulance stretcher
18. Determine the NHTSA safe recommendations for safe ambulance transport of children based on the condition of the child.
19. Discuss the on-going initiatives to increase the safety of children during ambulance transport
20. Discuss the limitations of the current recommendations
21. Discuss the National Implementation of the MUCC (Model Uniform Core Criteria) for Mass Casualty Incident Triage 2013.
22. Discuss the triage methods:
 - a. SALT
 - b. START
 - c. JumpSTART

Module VIII**4 hours**

| TOPIC – <i>Operations II</i> | TIME LINE |
|--------------------------------|-----------|
| At Risk Populations/Pediatrics | 1.5 Hours |
| Geriatrics | 1 Hour |
| EMS Research | 1 Hour |
| Evidence Based Guidelines | 30 Min. |

Required Objectives:

1. Define training resources for special populations
 - a. Human trafficking
 - b. Domestic violence
2. Recognize the unique characteristics of at-risk populations
3. Discuss the appropriate actions of EMS professionals in the presence of at-risk patients
4. Recognize circumstances that may indicate abuse
 - a. Domestic abuse
 - b. Human trafficking
 - c. Non-accidental trauma
5. Describe the steps in the primary assessment for providing emergency care to a geriatric patient, including the elements of the GEMS diamond.
6. Discuss special considerations when performing the patient assessment process on a geriatric patient
7. Describe the pathophysiology of most common medical conditions including s/s, and the emergency medical care strategies used in the management of each for the geriatric patient.
8. Describe special considerations for a geriatric patient who has experienced trauma
9. Discuss elder abuse and neglect, and its implications in assessment and management of the patient
10. Identify national initiatives and resources that promote and enable EMS research
11. Explain the practical use of research in EMS care
12. Explain the scientific method
13. Define the differences between quantitative and qualitative research methods
14. Explain the process of conducting a literature review
15. Define evidence based medicine and practice
16. Identify resources available through NASEMSO to aid states and agencies in developing evidence based guidelines.
17. Explain the benefits of EBG to patients

APPENDIX E

APPENDIX D

WVOEMS Pre-Approved Course List

WVOEMS Pre-Approved Course List:

| | |
|----|--|
| 1 | ACC (Advanced Cardiac Care) |
| 2 | ACLS (Advanced Cardiac Life Support) |
| 3 | Advanced Pediatric Life Support |
| 4 | Advanced Stroke Life Support |
| 5 | Advanced Trauma Life Support |
| 6 | AEMT Protocol Initial Course |
| 7 | AEMT Protocol Update Course |
| 8 | AMLS (Advanced Medical Life Support) |
| 9 | Basic Disaster Life Support |
| 10 | Certified Emergency Vehicle Operator |
| 11 | CPR (WVOEMS Approved) |
| 12 | DDLS (Developmental Disability Life Support) |
| 13 | Emergency Pediatric Care |
| 14 | EMS Safety |
| 15 | EMT Protocol Initial Course |
| 16 | EMT Protocol Update Course |
| 17 | EVOC (Emergency Vehicle Operation Course) |
| 18 | FEMA IS - 100 |
| 19 | FEMA IS - 200 |
| 20 | FEMA IS - 300 |
| 21 | FEMA IS - 400 |
| 22 | FEMA IS - 700 |
| 23 | FEMA IS - 800 |
| 24 | GEMS (Geriatric Education for EMS) |
| 25 | Haz Mat Awareness |
| 26 | Haz Mat Operations |
| 27 | Haz Mat Technician |
| 28 | HIPAA |
| 29 | ITLS (International Trauma Life Support) |
| 30 | Mass Casualty Incidents I (WVOEMS) |
| 31 | Mass Casualty Incidents II (WVOEMS) |
| 32 | Mass Casualty Refresher and/or Drills |
| 33 | Neonatal Resuscitation |
| 34 | PALS (Pediatric Advanced Life Support) |
| 35 | Paramedic Protocol Initial Course |
| 36 | Paramedic Protocol Update Course |
| 37 | PEARS (Pediatric Emergency Assessment, Recognition, and Stabilization) |

APPENDIX D

WVOEMS Pre-Approved Course List

| | |
|----|--|
| 38 | PEPP (Pediatric Emergencies for Pre-Hospital Professionals) |
| 39 | PHTLS (Pre-Hospital Trauma Life Support) |
| 40 | S.T.A.B.L.E. (Sugar, Temperature, Airway, Blood pressure, Lab work, and Emotional support) |
| 41 | TCCC (Tactical Combat Casualty Care) |
| 42 | TECC (Tactical Emergency Casualty Care) |
| 43 | TIMs (Traffic Incident Management) |