

OSDH – EMS EMERGENCY MEDICAL RESPONDER

Recommended Training Hours for National Education Standard

**OSDH
2011**

Approved: Oklahoma Training and Licensure SubCommittee November 17th, 2011

Approved: Oklahoma Emergency Response Systems Development Advisory Council --- November 17th, 2011

INTRODUCTION:

Oklahoma is committed to the implementation of the EMS Education Agenda for the Future:

HISTORY:

The *EMS Education for the Future: A Systems Approach* establishes a system of EMS education that more closely parallels that of other health care professions. As part of this systems approach, the *National EMS Scope of Practice Model* calls for the reconfiguration of EMS provider levels in the United States. Oklahoma has opted to follow the *Scope of Practice Model*, as published by the National Highway Traffic Safety Administration's (NHTSA) Office of Emergency Medical Services. Therefore we have adopted the *National EMS Education Standards* which have been published by NHTSA in conjunction with the above. You may download the *Standard* and accompanying *Instructor Guidelines* at <ems.gov>.

Name Change: [Oklahoma has already changed this in our Rules]

| Current Level | New Level |
|----------------------|-----------------------------------|
| First Responder [FR] | Emergency Medical Responder [EMR] |

CURRENT CHANGES TO National Registry TESTING

| Levels | When do updated exams start? | Last date course based on NSC could finish | Last NREMT exam given |
|--------|------------------------------|---|-----------------------|
| FR | | September 30, 2011 (90 days ahead of last exam) | December 31, 2011 |
| EMR | January 1, 2012 | | |

The EMR training modalities have already changed as of September 30th of this year. You can 'download' the National Education Standard and the accompanying "Emergency Medical Responder Instructional Guidelines" [IGs] from the National Highway Traffic Safety Administration web site <http://ems.gov/education/nationalstandardandncs.html>

It will be a requirement that you have a copy of the "Instructor Guidelines" for this level of training! You as an Instructor will use this for entry level classes [EMR] and the "Transition Courses" when they are available later.

If you have any questions, please feel free to contact us at (405)271- 4027 or by email at <roberti@health.ok.gov>

EMERGENCY MEDICAL RESPONDER STANDARDS:

Emergency Medical Responder

The primary focus of the Emergency Medical Responder is to initiate immediate lifesaving care to critical patients who access the emergency medical system. This individual possesses the basic knowledge and skills necessary to provide lifesaving interventions while awaiting additional EMS response and to assist higher level personnel at the scene and during transport. Emergency Medical Responders function as part of a comprehensive EMS response, **under medical oversight**. Emergency Medical Responders perform basic interventions with minimal equipment.

Preparatory

Uses simple knowledge of the EMS system, safety/well-being of the EMR, medical/legal issues at the scene of an emergency while awaiting a higher level of care.

EMS Systems:

Simple depth, simple breadth

- EMS systems
- Roles/ responsibilities/professionalism of EMS personnel
- Quality improvement

Research

Simple depth, simple breadth

- Impact of research on EMR care
- Data collection

Workforce Safety and Wellness

Simple depth, simple breadth

- Standard safety precautions
- Personal protective equipment
- Stress management
 - Dealing with death and dying
- Prevention of response-related injuries
- Lifting and moving patients

Documentation

Simple depth, simple breadth

- Recording patient findings

EMS System Communication

Simple depth, simple breadth

Communication needed to

- Call for Resources
- Transfer care of the patient
- Interact within the team structure

Therapeutic Communication

Simple depth, simple breadth

Principles of communicating with patients in a manner that achieves a positive relationship

- Interviewing techniques

Medical/Legal and Ethics

Simple depth, simple breadth

- Consent/refusal of care
- Confidentiality
- Advanced directives

- Tort and criminal actions
- Evidence preservation
- Statutory responsibilities
- Mandatory reporting
- Ethical principles/moral obligations
- End-of-life issues

Anatomy and Physiology

Uses simple knowledge of the anatomy and function of the upper airway, heart, vessels, blood, lungs, skin, muscles, and bones as the foundation of emergency care.

Medical Terminology

Uses simple medical and anatomical terms.

Pathophysiology

Uses simple knowledge of shock and respiratory compromise to respond to life threats.

Life Span Development

Uses simple knowledge of age related differences to assess and care for patients.

Public Health

Have an awareness of local public health resources and the role EMS personnel play in public health emergencies

Pharmacology

Uses simple knowledge of the medications that the EMR may self-administer or administer to a peer in an emergency.

Principles of Pharmacology

No knowledge related to this competency is applicable at this level.

Medication Administration

Simple depth, simple breadth

Within the scope of practice of the EMR, how to

- Self-administer medication
- Peer-administer medication

Emergency Medications

Simple depth, simple breadth

Within the scope of practice of the EMR

- Names
- Effects
- Indications
- Routes of administration
- Dosages for the medications administered

Airway Management, Respiration and Artificial Ventilation

Applies knowledge (fundamental depth, foundational breadth) of general anatomy and physiology to assure a patent airway, adequate mechanical ventilation, and respiration while awaiting additional EMS response for patients of all ages.

Airway Management

Fundamental depth, simple breadth
Within the scope of practice of the EMR
 Airway anatomy
 Airway assessment
 Techniques of assuring a patent airway

Respiration

Fundamental depth, simple breadth
 Anatomy of the respiratory system
 Physiology and pathophysiology of respiration
 Pulmonary ventilation
 Oxygenation
 Respiration
 External
 Internal
 Cellular
 Assessment and management of adequate and inadequate respiration
 Supplemental oxygen therapy

Artificial Ventilation

Fundamental depth, simple breadth
 Assessment and management of adequate and inadequate ventilation
 Artificial ventilation
 Minute ventilation
 Alveolar ventilation
 Effect of artificial ventilation on cardiac output

Assessment

Use scene information and simple patient assessment findings to identify and manage immediate life threats and injuries within the scope of practice of the EMR

Scene Size-UP

Complex depth, comprehensive breadth
 Scene Safety
Scene management
Fundamental depth, foundational breadth
 Impact of the environment on patient care
 Addressing hazards
 Violence
 Need for additional or specialized resources
 Standard precautions

Primary Assessment

Simple depth, simple breadth

- Primary assessment for all patient situations
 - Level of consciousness
 - ABC's
 - Identifying life threats
 - Assessment of vital functions
- Begin interventions needed to preserve life

History Taking

Simple depth, simple breadth Determining the chief complaint Mechanism of injury/nature of illness Associated signs and symptoms

Secondary Assessment

Simple depth, simple breadth
Performing a rapid full body scan
Focused assessment of pain
Assessment of vital signs

Monitoring Devices

No knowledge related to this competency is applicable at this level

Reassessment

Simple depth, simple breadth
How and when to reassess patients

Medicine

Recognizes and manages life threats based on assessment findings of a patient with a medical emergency while awaiting additional emergency response

Medical Overview

Simple depth, simple breadth
Assessment and management of a Medical complaint

Neurology

Simple depth, simple breadth
Anatomy, presentations, and management of
Decreased level of responsiveness
Seizure
Stroke

Abdominal and Gastrointestinal Disorders

Simple depth, simple breadth
Anatomy, presentations and management of shock associated with abdominal emergencies
Gastrointestinal bleeding

Immunology

Simple depth, simple breadth
Recognition and management of shock and difficulty breathing related to
Anaphylactic reactions

Infectious Diseases

Simple depth, simple breadth
Awareness of
A patient who may have an infectious disease
How to decontaminate equipment after treating a patient

Endocrine Disorders

Simple depth, simple breadth
Awareness that
Diabetic emergencies cause altered mental status

Psychiatric

Simple depth, simple breadth

- Recognition of Behaviors that pose a risk to the EMR, patient or others

Cardiovascular

Simple depth, simple breadth

- Anatomy, signs, symptoms and management of
 - Chest pain
 - Cardiac arrest

Toxicology

Simple depth, simple breadth

- Recognition and management of
 - Carbon monoxide poisoning
 - Nerve agent poisoning
- How and when to contact a poison control center

Respiratory

Simple depth, simple breadth

- Anatomy, signs, symptoms and management of respiratory emergencies including those that affect the
 - Upper airway
 - Lower airway

Hematology

No knowledge related to this competency is applicable at this level

Genitourinary/Renal

Simple depth, simple breadth

- Blood pressure assessment in hemodialysis patients

Gynecology

Simple depth, simple breadth

- Recognition and management of shock associated with
 - Vaginal bleeding

Non-Traumatic Musculoskeletal Disorders

No knowledge related to this competency is applicable at this level

Diseases of the Eyes, Ears, Nose, and Throat

Simple depth, simple breadth

- Recognition and management of
 - Nose bleed

Shock and Resuscitation

Uses assessment information to recognize shock, respiratory failure or arrest, and cardiac arrest based on assessment findings and manages the emergency while awaiting additional emergency response.

Trauma

Uses simple knowledge to recognize and manage life threats based on assessment findings for an acutely injured patient while awaiting additional emergency medical response.

Trauma Overview

No knowledge related to this competency is applicable at this level

Chest Trauma

Simple depth, simple breadth

- Recognition and management of
 - Blunt versus penetrating mechanisms
 - Open chest wound
 - Impaled object

Abdominal and Genitourinary Trauma

Simple depth, simple breadth

- Recognition and management of
 - Blunt versus penetrating mechanisms
 - Evisceration
 - Impaled object

Orthopedic Trauma

Simple depth, simple breadth

- Recognition and management of
 - Open fractures
 - Closed fractures
 - Dislocations
 - Amputations

Soft Tissue Trauma

Simple depth, simple breadth

- Recognition and management of
 - Wounds
 - Burns
 - Electrical
 - Chemical
 - Thermal
 - Chemicals in the eye and on the skin

Head, Facial, Neck, and Spine trauma

Simple depth, simple breadth

- Recognition and management of
 - Life threats
 - Spine trauma

Nervous System

No knowledge related to this competency is applicable at this level

Special Considerations in Trauma

Simple depth, simple breadth

- Recognition and management of trauma in
 - Pregnant patient
 - Pediatric patient
 - Geriatric patient

Environmental Emergencies

Simple depth, simple breadth

- Recognition and management of
 - Submersion incidents
 - Temperature-related illness

Multi-System Trauma

Simple depth, simple breadth
Recognition and management of
Multi-system trauma

Special Patient Populations

Recognizes and manages life threats based on simple assessment findings for a patient with special needs while awaiting additional emergency response

Obstetrics

Simple depth, simple breadth
Recognition and management of
Normal delivery
Vaginal bleeding in the pregnant patient

Neonatal care

Simple depth, simple breadth
Newborn care
Neonatal resuscitation

Pediatrics

Simple depth, simple breadth
Age-related assessment findings, and age-related assessment and treatment modifications for pediatric specific major diseases and/or emergencies
Upper airway obstruction
Lower airway reactive disease
Respiratory distress/failure/arrest
Shock
Seizures
Sudden Infant Death Syndrome

Geriatrics

Simple depth, simple breadth
Impact of age-related changes on assessment and care

Patients with Special Challenges

Simple depth, simple breadth
Recognizing and reporting abuse and neglect

EMS Operations

Knowledge of operational roles and responsibilities to ensure safe patient, public, and personnel safety.

Principles of Safely Operating a Ground Ambulance

Simple depth, simple breadth
Risks and responsibilities of emergency response

Incident Management

Simple depth, simple breadth
Establish and work within the incident management system

Multiple Casualty Incidents

Simple depth, simple breadth
Triage principles
Resource management

Air Medical

Simple depth, simple breadth

Safe air medical operations

Criteria for utilizing air medical response

Vehicle Extrication

Simple depth, simple breadth

Safe vehicle extrication

Use of simple hand tools

Hazardous Materials Awareness

Simple depth, simple breadth

Risks and responsibilities of operating in a cold zone at a hazardous material or other special incident

Mass Casualty Incidents due to Terrorism and Disaster

(This section subject to ongoing collective and cooperative review and input from all stakeholders including the

Department of Transportation, Department of Homeland Security and the Department of Health and Human Services)

Simple depth, simple breadth

Risks and responsibilities of operating on the scene of a natural or man made disaster

NATIONAL EDUCATIONAL STANDARD

These hours are recommended hours only. The program and training should be based on successful completion of all EMR competencies (didactic, psychomotor and affective domains)

| EMERGENCY MEDICAL RESPONDER | Classroom Hours | Lab Hours | Total Hours | Comment |
|--|-----------------|------------|-------------|---|
| Preparatory | 10.5 | 1.5 | 12 | |
| EMS systems | 1.5 | | | |
| Research | 0.5 | | | |
| Workforce Safety & Wellness | 3 | | | Add hand washing |
| Documentation | 0.5 | | | |
| EMS System Communications | 1 | | | |
| Therapeutic Communication | 0.5 | | | |
| Medical/Legal and Ethics | 3.5 | | | |
| | | | | |
| Anatomy and Physiology | 2 | 0 | 2 | |
| | | | | |
| Medical Terminology | 0 | 0 | 0 | |
| | | | | |
| Pathophysiology | 0 | 0 | 0 | |
| | | | | |
| Life Span Development | 0 | 0 | 0 | |
| | | | | |
| Public Health | 0 | 0 | 0 | |
| | | | | |
| Pharmacology | 0.5 | 0.5 | 1 | |
| Medication Administration | 0.25 | | | See Oklahoma's acceptable assist drug for EMT |
| Emergency Medications | 0.25 | | | |
| | | | | |
| Airway Management, Respiration and Artificial Ventilation | 7 | 3 | 10 | |
| Airway Management | 2.5 | | | Includes pediatric airway skills |
| Respiration | 2.5 | | | |
| Artificial Ventilation | 2 | | | |
| | | | | |
| Assessment | 10 | 3 | 12 | |
| Scene Size-Up | 2 | | | |
| Primary Assessment | 2 | | | |
| History Taking | 2 | | | |
| Secondary Assessment | 2 | | | |
| Reassessment | 2 | | | |

| EMERGENCY MEDICAL RESPONDER | Classroom Hours | Lab Hours | Total Hours | Comment |
|---|------------------------|------------------|--------------------|-----------------------------|
| Medicine | 6 | 1 | 7 | |
| Medical Overview | 0.5 | | | |
| Neurology | 0.5 | | | |
| Abdominal and Gastrointestinal Disorders | 0.25 | | | |
| Immunology | 0.25 | | | |
| Infectious Diseases | 0.5 | | | |
| Endocrine Disorders | 0.25 | | | |
| Psychiatric | 0.5 | | | |
| Cardiovascular | 1 | | | |
| Toxicology | 0.25 | | | |
| Respiratory | 0.5 | | | Review: most done in airway |
| Genitourinary/Renal | 0.15 | | | |
| Gynecology | 1 | | | |
| Diseases of the Eyes, Ears, Nose and Throat | 0.15 | | | |
| | | | | |
| Shock and Resuscitation | 6 | 2 | 8 | Include BLS review |
| Trauma | 0.5 | | | |
| Bleeding | 0.75 | | | |
| Chest Trauma | 0.5 | | | |
| Abdominal and Genitourinary Trauma | 0.5 | | | |
| Orthopedic Trauma | 1 | | | |
| Soft Tissue Trauma | 0.5 | | | |
| *Head, Facial, Neck and Spine Trauma | 1.5 | | | |
| Special Considerations in Trauma | 0.15 | | | |
| Environmental Emergencies | 0.5 | | | |
| Multi-System Trauma | 0.5 | | | |
| | | | | |
| Special Patient Populations | 5 | 1 | 6 | |
| Obstetrics | 1 | | | |
| Neonatal Care | 1 | | | |
| Pediatrics | 1 | | | |
| Geriatrics | 1 | | | |
| Patients with Special Challenges | 1 | | | |
| | | | | |
| Continued on next page | | | | |

| EMERGENCY MEDICAL RESPONDER | Classroom Hours | Lab Hours | Total Hours | Comment |
|---|------------------------|------------------|--------------------|---------------------|
| EMS Operations | 1 | 1 | 2 | |
| Principles of Safely Operating a Ground Ambulance | 0.10 | | | |
| Incident management | | | | Co or Pre requisite |
| Multiple Casualty Incidents | 0.10 | | | |
| Air Medical | 0.10 | | | |
| Vehicle Extrication | 0.10 | | | |
| Hazardous Materials Awareness | | | | Co or Pre requisite |
| Mass Casualty Incidents due to Terrorism and Disaster | 0.20 | | | |
| | | | | |
| EMR TOTALS | 47 | 13 | 60 | |
| | | | | |
| With optional immobilization and splinting | 3 | 3 | 66 | |

COMMENT

Competencies [See Page 14]

The focus of laboratory time in this curriculum has shifted from a time based approach to an experience or competency based approach. It is certainly the opinion of this group that this will be a much more effective approach. This will allow each program greater flexibility to achieve the goals based upon their laboratory skills.

Add 6 hours for optional immobilization and splinting skills
 HAZWOPER; First Responder HazMat Awareness level hours, and
 ICS courses are not included in the above totals **[these are co or pre-requisites]**

CLINICALS:

Training sites may add clinical hours to the total on an optional basis

SEE STUDENT COMPETENCIES ON THE NEXT SEVERAL PAGES. ALL STUDENTS SHOULD ACCOMPLISH THESE SKILLS WITH 100% ACCURACY TO COMPLETE THIS COURSE!

OKLAHOMA EMR COMPETENCIES

| **Skill – Airway/Ventilation/Oxygenation | Date | Approved |
|--|-------------|-----------------|
| Airway – Oral | | |
| *Airway – Nasal | | |
| Bag-Valve-Mask (BVM) | | |
| Cricoid pressure (Sellick’s Maneuver – ALS assist only) | | |
| Head tilt – Chin lift | | |
| Jaw-Thrust | | |
| Jaw-Thrust Modified (trauma) | | |
| Mouth-to-Barrier | | |
| Mouth-to-Mask (with one-way valve) | | |
| Obstruction/FBAO – Manual | | |
| *Oxygen tank use/Safety/Administration | | |
| Oxygen Therapy – Nasal Cannula | | |
| Oxygen Therapy – Non-Rebreather Mask | | |
| Suctioning – Upper Airway Rigid Tip Flexible Tip | | |
| *Pulse Oximetry | | |
| | | |
| | | |
| | | |
| | | |

| **Skill - Cardiovascular/Circulation | Date | Approved |
|--|-------------|-----------------|
| Cardiopulmonary Resuscitation (CPR) | | |
| Defibrillation - Automated/Semi-automated | | |
| Hemorrhage Control - Direct pressure | | |
| Hemorrhage Control - Tourniquet | | |
| *Bandaging | | |
| *Shock Treatment | | |
| *Trauma Patient Assessment | | |
| | | |
| | | |
| **Skill - Immobilization | Date | Approved |
| *Spinal Immobilization - Cervical Collar (optional see NOTE:) | | |
| *Spinal Immobilization - Long Board (optional see NOTE:) | | |
| Spinal Immobilization - Manual | | |
| *Spinal Immobilization - Seated Patient (KED, etc.) (optional see NOTE:) | | |
| *Spinal Immobilization - Rapid manual Extrication (optional see NOTE:) | | |
| Extremity stabilization - Manual | | |
| *Extremity splinting (optional see NOTE:) | | |
| Emergency moves for endangered patients | | |
| *Cervical Immobilization Device (CID) (optional see NOTE:) | | |
| | | |
| | | |
| <i>NOTE: Optional skills are to be added if the Spinal Immobilization and Splinting lessons are added to this course</i> | | |

| **Skill - Medication Administration/Routes | Date | Approved |
|---|-------------|-----------------|
| Assisting a Patient with His/Her Own Prescribed Medications (Aerosolized/Nebulized) (per protocols) | | |
| *Oral (Aspirin) (optional per protocol) | | |
| Auto-Injector (self or peer care) | | |
| Auto-Injector Patient's own Prescribed Meds (per protocol) | | |
| | | |
| **Skill - Miscellaneous | Date | Approved |
| Assisted delivery (normal childbirth) | | |
| *Blood glucose monitoring (per protocol) | | |
| *Blood glucose automated (per protocol) | | |
| Blood pressure - Manual | | |
| Eye Irrigation | | |
| *Hand Washing | | |
| *Patient Assessment Primary Assessment Secondary Assessment | | |
| *SAMPLE history | | |
| *Vital Signs | | |
| *Landing Zone (optional) | | |
| *Medical Assessment | | |
| *Lifting and Moving (optional) Urgent Non urgent | | |
| *Personal Protective Equipment/Body Substance Isolation Use | | |
| *Cincinnati Pre-hospital Stroke assessment | | |

| | | |
|--|--|--|
| <p>Please let OSDH-EMS know of any omissions or corrections needed for this document. We want to review its accuracy and needed changes</p> | | |
| <p>NOTES:</p> | | |
| <p>COMMENTS [affective domain]</p> | | |
| | | |

****These SKILLS should include adult, child and pediatrics**

***These SKILLS are items added by the new National Educational Standard**

NOTE: Spinal Immobilization and Splinting skills are optional (add 6 hours to total)