Instructional Framework

Emergency Medical Services

51.0904.00



This Instructional Framework identifies, explains, and expands the content of the standards/measurement criteria, and, as well, guides the development of multiple-choice items for the Technical Skills Assessment. This document corresponds with the Technical Standards endorsed on January 25, 2023.

Domain 1: Patient Management	
Instructional Time: 50 - 55%	
STANDARD 7.0 PERFORM PATIENT ASSESSMENT	
7.1 Distinguish among primary assessment, history taking, and secondary assessment	 Primary assessment History taking Secondary assessment
7.2 Explain the importance of including psychological aspects of agerelated assessment and treatment modifications when determining the treatment of diseases and emergencies	 Primary Assessment Psychological aspects of age-related assessment and treatment modifications Determining treatment of diseases and emergencies Pediatric vs. adult vs. geriatric
7.3 Assess a patient's baseline vital signs [e.g., GCS (Glasgow Coma Scale), pulse, respiration rate, skin, pupils, blood pressure, oxygen saturation, and blood glucose]	 Assess a patient's baseline vital signs GCS (Glasgow Coma Scale) Pulse Respiration rate Skin Pupils Blood pressure Oxygen saturation Blood glucose Lung sounds
7.4 Obtain a SAMPLE history (e.g., signs/symptoms, allergies, medications, pertinent past medical history, last oral intake, and events leading to injury or illness)	 Obtain a SAMPLE history Signs/symptoms Allergies Medications Pertinent past medical history Last oral intake

	Events leading to injury or illness
7.5 Obtain an OPQRST (e.g., onset, provocations, quality, radiation, severity, and time)	 Obtain an OPQRST Onset Provocations Quality Radiation Severity Time
7.6 Perform a primary assessment for an infant, child, and adult (e.g., form a general impression; determine responsiveness; assess airway, breathing, and circulation; and determine priorities of patient care)	 Primary assessment for an infant, child, and adult Form a general impression Determine responsiveness Assess airway Breathing Circulation Determine priorities of patient care
7.7 Explain the C-A-B approach (circulation, airway, breathing) versus the A-B-C approach (airway, breathing, circulation) to a primary assessment	 C-A-B approach (circulation, airway, breathing) Unresponsive A-B-C approach (airway, breathing, circulation) Responsive
7.8 Perform a secondary assessment for a patient with medical and/or traumatic injuries to determine appropriate physical examination	 Secondary assessment Medical Chief complaint Traumatic injuries Deformities, contusions, abrasions, punctures/penetrations, burns, tenderness, lacerations, and swelling (DCAP-BTLS) Reassessing vital signs
7.9 Perform a detailed, focused physical examination of the patient (e.g., respiratory system, cardiovascular system, neurological system, and musculoskeletal system)	 Detailed, focused physical examination of the patient Respiratory system Cardiovascular system Neurological system Musculoskeletal system Endocrine system Reproductive system Integumentary system Lymphatic system

	Digestive system
7.10 Explain the importance of recording changes in the patient's condition and reassessing interventions	 Importance of recording changes in the patient's condition Reassess interventions Reassess vital signs Documentation
7.11 Describe the assessment of a patient who appears to be suffering from a behavioral or psychiatric emergency	 Patient assessment for a behavioral or psychiatric emergency Responsiveness level Suicide risk factors Post-traumatic stress disorder (PTSD) Treat with compassion Restatement, redirection, empathy Legal concerns Consent Legal hold Petitioned Restraints Safety concerns Egress considerations Call for assistance/additional resources
7.12 Explain the assessment steps for pediatric patients, including the scene size-up, primary assessment, secondary assessment with physical exam, and reassessment	 Assessment of a pediatric patient Toe to head Scene size up Primary assessment Secondary assessment Physical exam Reassessment
7.13 Discuss life span development as it relates to patient assessment and management	 Lifespan development based on age group Physiological characteristics Psychosocial characteristics Stages of Life Infancy Toddler phase Preschool age School age Adolescence Early adulthood Middle adulthood

	Late adulthood
7.14 Identify situations requiring the need for advanced life support (e.g., equipment and personnel)	 Situations requiring the need for advanced life support Based on patient assessment Respiratory distress/failure Cardiac arrest Major trauma Unconscious/unresponsive Status epileptic Equipment Personnel
7.15 Demonstrate effective communication with patients and family members of various ages and cultures, hospital personnel, and authority figures	 Effective communication Patients Family members of various ages and cultures Patient privacy Hospital personnel Authority figures Supervisor/manager Law enforcement officers Health Insurance Portability and Accountability Act (HIPAA)
7.16 Practice delivering verbal reports with pertinent patient information to healthcare personnel	 Delivering verbal reports with pertinent patient information to healthcare personnel SAMPLE history Patient condition when found Patient complaint Initial and on-going vital signs Treatment provided
STANDARD 8.0 MANAGE MEDICAL EMERGENCIES	
8.1 Describe the chain of survival (early recognition of sudden cardiac arrest and access to emergency medical care, early CPR (Cardiopulmonary resuscitation), early defibrillation, early advanced cardiac life support, and physical and emotional recovery)	 Chain of survival Early recognition of sudden cardiac arrest and access to emergency medical care Early CPR (Cardiopulmonary resuscitation) Early defibrillation/treatment Early advanced cardiac life support Physical and emotional recovery
8.2 Recognize conditions, signs, and symptoms of respiratory	Conditions, signs, and symptoms of respiratory emergencies

emergencies (e.g., COPD, asthma, pneumonia, pulmonary embolism, epiglottitis, and common cold)	 Chronic Obstructive Pulmonary Disease (COPD) Asthma Pneumonia Pulmonary embolism Epiglottitis Respiratory Syncytial Virus (RSV) Common cold COVID Congestive Heart Failure (CHF)
8.3 Provide respiratory emergency care based on medical assessment and physical examination [e.g., oxygen techniques, artificial ventilation, CPAP (continuous positive airway pressure), and inhalers]	 Respiratory emergency care Oxygen techniques Artificial ventilation CPAP (Continuous Positive Airway Pressure) Inhalers Nebulizers Suctioning
8.4 Recognize the signs of choking and describe treatment procedures and supportive care for infants, children, and adults	ChokingSignsTreatmentSupportive care
8.5 Recognize signs and symptoms for cardiac emergencies (e.g., coronary artery disease, aneurysm, electrical/mechanical malfunctions of the heart, angina pectoris, acute myocardial infarction, and congestive heart failure) and treatment [i.e., administration of nitroglycerin or aspirin, AEDs (automated external defibrillators), chest compressions, CPR, etc.]	 Signs and symptoms for cardiac emergencies Coronary artery disease Aneurysm Aortic Dissecting Electrical/mechanical malfunctions of the heart Pacemaker LVAD (Left ventricular assist device) Angina pectoris Acute myocardial infarction Chest pain Shortness of breath Diaphoresis Congestive heart failure and treatment Administration of nitroglycerin or aspirin AEDs (Automated External Defibrillators) Chest compressions

	■ CPR
8.6 Recognize conditions, signs, symptoms, and treatment for diabetic emergencies involving hyperglycemia and hypoglycemia	 Diabetic emergencies Hyperglycemia Conditions, signs, symptoms, and treatment Hypoglycemia Conditions, signs, symptoms, and treatment Glucose
8.7 Recognize signs, symptoms, and history consistent with altered mental status, including seizures, stroke, dizziness, and syncope, and develop plan for treatment	 Altered mental status Seizures, stroke, dizziness, syncope, diabetes, drugs, and TIA (transient ischemic attack) (AEIOU tips) Signs, symptoms, and history AVPU (Alert, Voice, Pain, Unresponsive) Develop plan for treatment
8.8 Recognize the signs, symptoms, and treatment for patients with allergic or anaphylactic reactions	 Allergic or anaphylactic reactions Signs, symptoms, and treatment Difficulty breathing Hives, itchy, red, or blotchy skin, etc. Epinephrine auto-injector
8.9 Recognize the signs, symptoms, and treatment for patients where poisoning has been ingested, inhaled, or absorbed	 Poisoning emergencies Signs, symptoms, and treatment SLUDGE (Salivation, Lacrimation, Urination, Defecation, GI distress, and Emesis) Poison control
8.10 Recognize the signs, symptoms, and treatment for patients of alcohol or substance abuse (e.g., stimulants, depressants, narcotics, volatile chemicals, and hallucinogens)	 Alcohol or substance abuse Stimulants Depressants Narcotics Volatile chemicals Hallucinogens Signs, symptoms, and treatment
8.11 Recognize conditions that can cause unusual behavior (e.g., stress, psychiatric conditions, and suicidal ideation) and determine a treatment plan	 Conditions that can cause unusual behavior Stress Psychiatric conditions Suicidal ideation Trauma

	Drugs/Alcohol use and withdrawalDetermine a treatment plan
STANDARD 9.0 MANAGE TRAUMATIC INJURIES	
9.1 Differentiate among arterial, venous, and capillary bleeding and describe the care for external bleeding	 Difference between Arterial bleeding Capillary bleeding Venous bleeding Care for external bleeding Pressure Tourniquets Stop the bleed
9.2 Identify the signs and symptoms of internal bleeding and describe the steps in the care for internal bleeding	 Internal bleeding Signs and symptoms Steps in the care for internal bleeding Rapid transport
9.3 Identify orthopedic injuries (e.g., open/closed fractures; dislocations; amputations/replantation; upper/lower extremity trauma; sprains/strains; and pelvic fractures) and describe the management of these injuries	 Orthopedic injuries Open/closed fractures Dislocations Amputations/replantation Upper/lower extremity trauma Sprains/strains Pelvic fractures Injury management Splinting Rest, Ice, Compression, Elevation (RICE) Wrap amputation Cool moist transport of amputated part
9.4 Identify and describe the management of soft tissue trauma (e.g., wounds; thermal, electrical, and radiation burns; chemicals in eye; crush/compartment syndrome; and high-pressure injection injury)	 Management of soft tissue trauma Wounds Avulsions, bites, lacerations, incisions, eviscerations, abrasions, and puncture Burns Thermal, electrical, chemical, and radiation Chemicals in eye Crush/compartment syndrome High-pressure injection injury

	 Open and closed fractures Treatment for a closed fracture Treatment for open fractures
9.5 Recognize signs and symptoms and describe treatment for head, facial, neck, and spine trauma (e.g., applying a cervical collar; immobilizing a seated patient, including rapid extrication for high priority patients; applying a long backboard; rapid extrication from a child safety seat; immobilizing a standing patient; and immobilizing a patient wearing a helmet)	 Head, facial, neck, and spine trauma Signs and symptoms Head, neck, and/or back pain Treatment Applying a cervical collar Immobilizing a seated patient, including rapid extrication for high priority patients Applying a long backboard Rapid extrication from a child safety seat Immobilizing a standing patient Immobilizing a patient wearing a helmet
9.6 Identify signs, symptoms, and care for patients with nervous system trauma (e.g., traumatic brain injury and spinal cord injury)	 Nervous system trauma Traumatic brain injury Spinal cord injury Signs, symptoms, and care
9.7 Discuss the management of multi-system trauma such as blast injuries	 Management of multi-system trauma Blast injury Primary Secondary Tertiary Quaternary Assessment Additional resources
9.8 Recognize signs, symptoms, and treatment for environmental-related emergencies (e.g., temperature-related illness, drowning, bites and stings, and lightning injury)	 Environmental-related emergencies Temperature-related illness Hyper/Hypothermia Heat stroke Drowning Bites and stings Lightning injury Signs and symptoms Treatment Assessment

	Additional resources
STANDARD 10.0 MANAGE OBSTETRIC AND GYNECOLOGIC EMERGENCIES	
10.1 Review the anatomical and physiological changes that occur during pregnancy and describe fetal development	 Anatomical and physiological changes that occur during pregnancy Fetal development
10.2 Identify the three stages of labor	 Describe the three stages of labor Stage 1 Crowning of baby's head Stage 2 Delivery of baby Stage 3 Delivery of placenta
10.3 Demonstrate the steps in preparation and delivery	 Preparation and delivery steps Assessment Identify imminent delivery Transport decision
10.4 Describe and discuss care for complications of delivery (e.g., breech presentation, limb presentation, prolapsed umbilical cord, multiple birth, premature birth, and meconium aspiration)	 Care for complications of delivery Breech presentation Limb presentation Prolapsed umbilical cord Multiple birth Premature birth Meconium aspiration Toilet delivery
10.5 Describe and discuss care for emergencies in pregnancy (e.g., excessive pre-birth bleeding, ectopic pregnancy, seizures in pregnancy, miscarriage and abortion, and stillbirths)	 Emergencies in pregnancy Excessive pre-birth bleeding Ectopic pregnancy Seizures in pregnancy Miscarriage and abortion Stillbirths Trauma
10.6 Describe and discuss care for gynecological emergencies (e.g., vaginal bleeding and sexual assault)	 Gynecological emergencies Vaginal bleeding Female caregivers

	 Sexual assault Psychological care Female caregivers
10.7 Demonstrate the indications and procedures for neonatal resuscitation	Indications and procedures for neonatal resuscitation
10.8 Demonstrate after-delivery care for mother and baby	 After delivery care for mother and baby Transport decision Baby temperature
10.9 Describe the APGAR (Appearance, Pulse, Grimace, Activity, Respiration) score and when it is needed	APGAR (Appearance, Pulse, Grimace, Activity, Respiration)
STANDARD 11.0 MANAGE PEDIATRIC EMERGENCIES	
11.1 Describe and discuss the developmental and anatomical differences in infants and children	Developmental and anatomical differences in infants and children
11.2 Recognize common medical and trauma situations involving pediatric patients [e.g., difficulty breathing, seizures, fever, meningitis, diarrhea and vomiting, poisoning, drowning, and SIDS (sudden infant death syndrome)]	 Common medical and trauma situations for pediatric patients Difficulty breathing Seizures Febrile seizures Fever Meningitis Diarrhea and vomiting Poisoning Drowning SIDS (Sudden Infant Death Syndrome) Respiratory Syncytial Virus (RSV) Trauma
11.3 Describe how to perform infant and child CPR	Infant and child CPR
11.4 Discuss the signs and symptoms of child abuse and neglect and the EMT's ethical and legal responsibilities	 Child abuse and neglect Signs and symptoms EMT's ethical and legal responsibilities Mandatory reporting
11.5 Demonstrate adaptations to techniques and equipment to properly manage the airway, ventilation, and oxygenation of pediatric patients	 Techniques to properly manage a pediatric patient airway, ventilation, and oxygenation

11.6 Discuss special challenges for pediatric patients (e.g., tracheostomy tubes, home artificial ventilators, central intravenous lines, and gastrostomy tubes)	 Challenges for pediatric patients Tracheostomy tubes Home artificial ventilators Central intravenous lines Gastrostomy tubes 	
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Domain 2: Body Systems and Functions Instructional Time: 25 - 35% STANDARD 4.0 DEMONSTRATE BASIC KNOWLEDGE OF GENERAL PHARMACOLOGY 4.1 Explain the Medication Cross Check Procedure (e.g., two-person Medication Cross Check Procedure verbal procedure that contains intentional error traps to find mistakes) Two-person verbal procedure that contains intentional error traps to find mistakes 4.2 Explain the steps on using an autoinjector (e.g., inject the medicine • Steps on using an autoinjector o Inject the medicine into the fleshy outer portion of the thigh into the fleshy outer portion of the thigh and hold in place for about 3 seconds until all the medicine is injected) and hold in place for about 3 seconds until all the medicine is injected 4.3 Explain the use of a unit-dose, premeasured intranasal device • Unit-dose, premeasured intranasal device Narcan/Naloxone 4.4 Identify the drugs in the EMT Basic Scope of Practice and describe • Identify medications in the EMT Basic Scope of Practice each according to generic and common trade names, indications, Trade and generic names contraindications, side effects, forms, and routes of administration Indications/contraindications Side effects Forms of medication Route of administration 4.5 Explain the Five Rights of medication administration to ensure • Five Rights of medication administration to ensure safety and safety and prevent complications or errors (e.g., Right Medication, prevent complications or errors Right Patient, Right Dose, Right Time, Right Route) Right Medication Right Patient Right Dose o Right Time Right Route Right Documentation

4.6 Identify special considerations in the administration of medications and access to resources for clarification (e.g., online or offline medical direction)	 Considerations in the administration of medications and access to resources for clarification Online or offline medical direction Age, size of patient
4.7 Explain the importance of accurate documentation and reevaluation of drug administration	Accurate documentationReevaluation of drug administration
STANDARD 5.0 ANALYZE THE ANATOMY AND THE FUNCTION OF	BODY SYSTEMS
5.1 Describe the structure and function of the musculoskeletal system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.2 Describe the structure and function of the respiratory system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.3 Describe the structure and function of the cardiovascular system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.4 Describe the structure and function of the nervous system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.5 Describe the structure and function of the reproductive system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.6 Describe the structure and function of the digestive system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.7 Describe the structure and function of the integumentary system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.8 Describe the structure and function of the endocrine system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology

5.9 Describe the structure and function of the renal system and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.10 Describe the structure and function of the ears, nose, throat, and eyes and properly name and label on a diagram, including correct terminology	 Structure and function Label diagrams Correct terminology
5.11 Describe the anatomy and physiology differences between children and adults that affect assessment and emergency care, including correct terminology	 Anatomy and physiology differences Children vs. adults Assessment and emergency care
5.12 Use common prefixes, suffixes, and roots to determine the meaning of medical terms	Common prefixes, suffixes, and roots
5.13 Explain acronyms and abbreviations commonly used in EMS	Acronyms and abbreviations
5.14 Use anatomical and medical terms with regards to position and direction to describe the location of body structures and body positions in written and oral communication with EMS and healthcare professionals, as well as authority personnel	 Anatomical and medical terms Position Direction Location

Domain 3: Preparatory Instructional Time: 10 - 15%	
STANDARD 1.0 ANALYZE THE EMERGENCY MEDICAL SERVICES SYSTEM	
1.1 Describe key historical events that influenced the development of EMS [i.e., 1970 National Registry of Emergency Technicians traces back to war times (Civil War, World War I, World War II), 1966 Highway Safety Act and formation of NHTSA (National Highway Traffic Safety Administration), etc.]	 Key historical events 1970 National Registry of Emergency Technicians Civil War, World War I, World War II 1966 Highway Safety Act Formation of National Highway Traffic Safety Administration (NHTSA)
1.2 Describe the components and roles of the EMS system (e.g., agencies and organizations; trained professionals; communications and transportation networks; trauma systems and hospitals; and community medical emergency plan)	 Components and roles of the EMS system Agencies and organizations Trained professionals Communications and transportation networks Trauma systems and hospitals

	Community medical emergency plan
1.3 Describe the role of EMS in public health (e.g., infection prevention and control, human trafficking, reporting and data collection, patient and community education, screenings, and vaccinations/immunizations)	 Role of EMS in public health Infection prevention and control Human trafficking Reporting and data collection Patient and community education Screenings Vaccinations/immunizations
1.4 Compare the training, roles, and responsibilities of EMRs, EMTs, AEMTs (Advanced Emergency Medical Technicians), and Paramedics	 Training, roles, and responsibilities Emergency Medical Responder (EMR) Emergency Medical Technician (EMT) Advanced Emergency Medical Technicians (AEMT) Paramedic
1.5 Identify desirable attributes of EMTs (e.g., critical thinking skills, teamwork, mental agility, physical fitness, compassion, communication skills, and hunger for learning)	 Desirable attributes of EMTs Critical thinking skills Teamwork Mental agility Physical fitness Compassion Communication skills Hunger for learning
1.6 Explain the EMS communication system (e.g., interaction within team structure; interaction with other healthcare professionals; and telemetric monitoring devices and transmission of clinical data including video data)	 EMS communication system Interaction within team structure Interaction with other healthcare professionals Telemetric monitoring devices and transmission of clinical data including video data
1.7 Identify and explain Arizona statutes and regulations regarding the EMS system [i.e., CAR-EMS Guidelines (Central Arizona Regional EMS Guidelines)]	 Arizona statutes and regulations regarding the EMS system CAR-EMS Guidelines (Central Arizona Regional EMS Guidelines) Arizona Department of Health Emergency Medical Services Trauma System Statutes Rule Book Local protocols
STANDARD 2.0 RECOGNIZE THE IMPORTANCE OF THE WELL-BEING OF THE EMERGENCY MEDICAL TECHNICIAN	
2.1 Identify cases with emotional stress that affect the EMT (e.g.,	Cases with emotional stress that affect the EMT

multiple-casualty incidents; child abuse and neglect; elderly abuse; incidents involving a friend, relative, or coworker; traumatic injuries; and dealing with death and dying)	 Multiple-casualty incidents Child abuse and neglect Elderly abuse Incidents involving a friend, relative, or coworker Traumatic injuries Dealing with death and dying SIDS
2.2 Describe ways to cope with death and dying issues for patients, for family members, and for the EMT	 Ways to cope with death and dying Critical Incident Stress Management (CISM)
2.3 Identify typical stress symptoms for the EMT and others (e.g., anxiety, irritability, nausea, guilt, isolation, loss of concentration, and loss of appetite)	 Typical stress symptoms for the EMT and others Anxiety Irritability Nausea Guilt Isolation Loss of concentration Loss of appetite
2.4 Discuss how to recognize and manage stress (e.g., physical and mental adaptations, exercise, diet, relaxation, and participation in stress management programs)	 Recognize and manage stress Physical and mental adaptations Exercise Diet Relaxation Participation in stress management programs
2.5 Differentiate between CISD (critical incident stress debriefing) and CISM (critical incident stress management)	 Critical Incident Stress Debriefing (CISD) Critical Incident Stress Management (CISM)
2.6 Discuss the physical well-being of the EMT [e.g., personal protective equipment, handwashing, immunizations [i.e., Tetanus, Hepatitis B, MMR, Polio, etc.), and scene safety (i.e., handling hazardous, violence, etc.)]	 Physical well-being of the EMT Personal protective equipment Biohazard disposal Handwashing Immunizations Tetanus Hepatitis B MMR Polio Scene safety Scene hazards

	Handling hazardous materialViolence
2.7 Describe provisions of OSHA, CDC, and the Ryan White CARE Act as they relate to infection control	 Infection control Occupational Safety and Health Administration (OSHA) Center for Disease Control (CDC) Ryan White CARE Act
2.8 Describe proper lifting and moving techniques	 Proper lifting and moving techniques Emergency moves Blanket drag Clothes drag Assisted walk Firefighter carry Non-emergent moves Identifying self-limits for lifting
STANDARD 3.0 EXAMINE MEDICAL, LEGAL, AND ETHICAL ISSUES	RELATED TO EMERGENCY MEDICAL SERVICES
3.1 Identify the code of professional ethics for EMS practitioners according to the National Association of Emergency Medical Technician (NAEMT) (e.g., to conserve life, alleviate suffering, promote health, do no harm, and encourage the quality and equal availability of emergency medical care)	 Code of professional ethics for EMS practitioners according to the National Association of Emergency Medical Technician (NAEMT) Conserve life Alleviate suffering Promote health Do no harm Encourage the quality and equal availability of emergency medical care
3.2 Explain the difference between Scope of Practice and Standard of Care	Scope of PracticeStandard of Care
3.3 Explain the EMT Basic Scope of Practice as outlined by the National Highway Traffic Safety Administration (NHTSA)	 Basic scope of practice National Traffic Safety Administration (NHTSA) State guidelines
3.4 Identify the three ethical principles that EMS providers should follow [e.g., respect for others, beneficence (charity, mercy, and kindness), and justice]	 The three ethical principles that EMS providers should follow Respect for others Beneficence (charity, mercy, and kindness) Justice

3.5 Define and give examples of different types of patient consents (e.g., expressed, implied, and consent for minors)	 Types of patient consents Expressed Implied Consent for minors
3.6 Identify common ethical issues encountered by emergency medical services and discuss how to handle them (i.e., denying or delaying transport of patients, termination of resuscitations, restriction of EMS provider duty hours to prevent fatigue, substance abuse by EMS providers, challenges of child maltreatment recognitions and reporting, etc.)	 Common ethical issues encountered by emergency medical services Denying or delaying transport of patients Termination of resuscitations Restriction of EMS provider duty hours to prevent fatigue Substance abuse by EMS providers Challenges of child maltreatment recognitions and reporting Mandated reporting Elder abuse Child abuse Gunshot wound Car accidents Importance of documentation
3.7 Explain advance directives, including do not resuscitate orders	 Advanced directives Do Not Resuscitate (DNR) Power of Attorney (POA) Living Will
3.8 Explain the importance and legality of patient confidentiality	Patient confidentiality Health Insurance Portability and Accountability Act (HIPAA)
3.9 Discuss legal issues associated with required documentation (i.e., subpoenas, testifying, etc.)	 Legal issues associated with required documentation Subpoenas Testifying

Domain 4: Operations Instructional Time: 5 - 10%	
STANDARD 6.0 MANAGE THE EMERGENCY MEDICAL/CRIME SCENE TO ENSURE PATIENT AND EMS PERSONNEL SAFETY	
6.1 Identify the major components of the size-up emergency medical/crime scene (e.g., number of patients, mechanism of injury/nature of illness, resource determination, standard-precautions	 Components of the size-up emergency medical/crime scene Number of patients Mechanism of injury/nature of illness

determination, and scene safety)	 Resource determination Standard-precautions determination Scene safety
6.2 Identify the six major potential hazards at an emergency medical/crime scene (e.g., biological, chemical, physical, safety, ergonomic, and psychological)	 Six major potential hazards at an emergency medical/crime scene Biological Chemical Physical Safety Ergonomic Psychological
6.3 Explain the basic elements of a crime scene (e.g., physical evidence recognition, documentation, proper collection, packaging, preservation, and scene construction)	 Basic elements of a crime scene Physical evidence recognition Documentation Proper collection Packaging Preservation Scene construction
6.4 Explain why teamwork and communication are so important during an emergency (e.g., to improve patient safety, reduce clinical errors, and reduce waiting times)	 Importance of teamwork and communication during an emergency To improve patient safety Reduce clinical errors Reduce waiting times
6.5 Identify the major requirements of EMS technicians at an emergency scene (e.g., establishing scene safety, loading and moving patients, delivering stabilizing care on the scene and during transport, and transferring patient care to receiving facilities)	 Major requirements of EMS technicians at an emergency scene Establishing scene safety Do not enter unless scene is safe Loading and moving patients Deliver stabilizing care on the scene and during transport Transferring patient care to receiving facilities
STANDARD 12.0 ANALYZE EMERGENCY MEDICAL SERVICES OPE	ERATIONS
12.1 Recognize the types of ambulances specified by the U.S. Department of Transportation	 Types of ambulances Type 1 Type 2 Type 3 Type 4

	Specialty Response Vehicles
12.2 Discuss safe ambulance operation while responding to the scene	Safe ambulance operationDriving with due regard
12.3 Describe laws that apply to ambulance operations	 Ambulance operations laws Arizona Revised Statutes Title 28 (A.R.S.)
12.4 Describe the required equipment to be carried by EMS response units	 Required equipment to be carried by EMS response units Arizona Department of Health Services (AZDHS)
12.5 Describe the roles and responsibilities of the Emergency Medical Dispatcher	Roles and responsibilities of an Emergency Medical Dispatcher
12.6 Describe the phases of an ambulance call	Phases of an ambulance call
12.7 Identify the phases of vehicle extrication and rescue operations	Phases of vehicle extrication and rescue operations
12.8 Describe the EMT's responsibilities in transferring patients to receiving healthcare personnel	 Responsibilities of patient transfer to receiving healthcare personnel Accurate patient report (verbal and written) Treatment and response to treatment Receiving facility signature to equal scope or higher Patient personal items
12.9 Describe different responses to emergency incidents (e.g., hazardous material, terrorist, rescue, and violence)	 Different responses to emergency incidents Hazardous material Terrorist Rescue Swift water High angle Tactical Violence
12.10 Discuss safe air medical operations, criteria for utilizing air medical response, and medical risks, needs, and advantages	 Safe air medical operations Landing zone Weather Environment Aircraft approach and departure Criteria for utilizing air medical response Ground transport vs. air transport

	Pros and consMedical risks, needs, and advantages
12.11 Discuss risks and responsibilities of operating on the scene of a natural or man-made disaster	 Risks and responsibilities of operating on the scene of a natural or man-made disaster Federal Emergency Management Agency (FEMA) Certifications for deployment (IS-100, IS-200, IS-700, IS-800)

