**EMS Module 1**

Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Station/Shift:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preceptor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Supervisor Signature*  *Date***

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| --- | --- | --- |
| SKILL | SIGNATURE | DATE |
| Demonstrate an accurate knowledge of the ambulance inventory. |  |  |
| Demonstrate proficiency with all of the equipment carried on an EMS unit. |  |  |
| Using the inspection checklist for FERNO cots, complete a monthly inspection of the cot. Checklist available on EMS Quicklinks |  |  |
| Simulate use of EMRC and MC800 MHz radio system to relay patient information to a hospital. |  |  |
| Simulate use of EMRC to conduct a BLS consult with a hospital using the MIEMSS short form as a template. |  |  |
| Properly apply a traction splint. |  |  |
| Successfully demonstrates the difference between Spinal Protection and Spinal immobilization |  |  |
| **Proficiently demonstrate how to splint the following:**   * Straight Knee * Bent Knee * Wrist * Hip * Tibia/Fibula * Shoulder * Clavicle * Humorous * Elbow * Forearm |  |  |
| Demonstrate proper application of the LUCAS in coordination with High Performance CPR |  |  |
| Demonstrate ability to properly apply a tourniquet |  |  |
| Demonstrate the usage of the “Mega Mover” |  |  |
| Demonstrate the ability to obtain the Cincinnati Stroke Scale, LAMS Score, and other appropriate diagnostic testing for a Stroke Consult |  |  |
| Explain documentation requirements for when eMEDS is down. Attach a copy of the appropriate documentation |  |  |
| Demonstrate proper use of car seat and built-in child restraint system in transport unit |  |  |
| Explain how to appropriately restock BLS supplies from hospitals |  |  |

Written Assignments

1. Describe the following Policies and Procedures and explain why they are important
   * FCGO: 08-09, 13-14, 13-15, 15-06 and 19-03
   * MCFRS Policies: 21-02 Care After Pronouncement of Death
2. Define each Hospital Alert Status (red, yellow, blue, min-disaster, trauma bypass, and reroute) for hospitals that are overtaxed, according to the MIEMSS Region V Alert Status System and how each impact transport destination decisions.
3. Explain when you can override a hospital’s alert status for each type of alert listed above.
4. Explain and describe all levels of the trauma decision tree.
5. Explain the patient priority classification system (clinical priority), and provide three examples of each priority.
6. List all the MIEMSS-approved specialties for each of the receiving facilities in Montgomery County and for Frederick Memorial Hospital, Howard County General, Washington Hospital Center, Prince George's Hospital Center.
7. List the patients’ Bill of Rights.
8. What must you do when you cannot obtain a patient’s Social Security number for your ePCR report?
9. What do you do if you cannot obtain a patient’s signature for your ePCR report?
10. You are on the scene of a fire incident and have set up your aid station. A firefighter has received first and second degree burns. Where do you transport this patient?
11. Describe the treatment differences between a DNR-A, DNR-B, DNR-I and MOLST patients.
12. How would you treat a patient with an out of state DNR order?
13. Identify the unit locations of all bariatric resources within MCFRS.
14. Identify and list the locations and Area of Responsibilities for the MCFRS EMS Duty Officers
15. In accordance with MCFRS Policy 28-02, describe the conditions that must be met to release a firefighter from Rehab.
16. Explain the circumstances in which a firefighter / rescuer must wear eye protection during patient care.
17. Define an exposure and the procedure to be followed when one has occurred.
18. In accordance with MIEMSS Protocol and FCGO 18-08, what must be done when a suspected opioid overdose patient does not consent to transport to a hospital.