

CFR Curriculum Objectives

Objectives Legend

C= Cognitive; P= Psychomotor; A= Affective

1 = Knowledge level; 2 = Application level; 3 = Problem-solving level

At the completion of each module the CFR should be able to demonstrate the skills related to that module.

Module 1

- 1-1 Define the components of Emergency Medical Services (EMS) systems. (C-1)
- 1-1.2 Differentiate the roles and responsibilities of the CFR from other out-of-hospital care providers. (C-3)
- 1-1.3 Define medical oversight and discuss the CFR S role in the process. (C-1)
- 1-1.4 Discuss the types of medical oversight that may affect the medical care of a CFR. (C-1)
- 1-1.5 State the specific statutes and regulations in your state regarding the EMS system. (C-1)
- 1-1.6 Accept and uphold the responsibilities of a CFR in accordance with the standards of an EMS professional. (A-3)
- 1-1.7 Explain the rationale for maintaining a professional appearance when on duty or when responding to calls. (A-3)
- 1-1.8 Describe why it is inappropriate to judge a patient based on a cultural, gender, age, or socioeconomic mode and to vary the standard of care rendered as a result of that judgement. (A-3)
- 1-2.1 List possible emotional reactions that the CFR may experience when faced with trauma, illness, death, and dying. (C-1)
- 1-2.2 Discuss the possible reactions that a family member may exhibit when confronted with death and dying. (C-1)
- 1-2.3 State the steps in the CFRs approach to the family confronted with death and dying. (C-1)
- 1-2.4 State the possible reactions that the family of the CFR may exhibit. (C-1)
- 1-2.5 Recognize the signs and symptoms of critical incident stress. (C-1)
- 1-2.6 State possible steps that the CFR may take to help reduce/alleviate stress. (C-1)
- 1-2.7 Explain the need to determine scene safety. (C-2)
- 1-2.8 Discuss the importance of body substance isolation (BSI). (C-1)
- 1-2.9 Describe the steps the CFR should take for personal protection from airborne and bloodborne pathogens. (C-1)
- 1-2.10 List the personal protective equipment necessary for each of the following situations: (C-1)
 - Hazardous materials
 - Rescue operations
 - Violent scenes
 - Crime scenes
 - Electricity
 - Water and ice
 - Exposure to bloodborne pathogens
 - Exposure to airborne pathogens
- 1-2.11 Explain the importance for serving as an advocate for the use of appropriate protective equipment. (A-3)
- 1-2.12 Explain the importance of understanding the response to death and dying and communicating effectively with the patient's family.
- 1-2.13 Demonstrate a caring attitude towards any patient with illness or injury who requests emergency medical services. (A-3)
- 1-2.14 Show compassion when caring for the physical and mental needs of patients. (A-3)
- 1-2.15 Participate willingly in the care of all patients. (A-3)
- 1-2.16 Communicate with empathy to patients being cared for, as well as with family members, and friends of the patient. (A-3)
- 1-2.17 Given a scenario with potential infectious exposure, the CFR will use appropriate personal protective equipment. At the completion of the scenario, the CFR will properly remove and discard the protective garments. (P-1, 2)
- 1-2.18 Given the above scenario, the CFR will complete disinfection/cleaning and all reporting documentation. (P-1, 2)
- 1-3.1 Define the CFR scope of practice. (C-1)
- 1-3.2 Discuss the importance of Do Not Resuscitate [DNR] (advance directives) and local or state provisions regarding EMS application. (C-1)
- 1-3.3 Define consent and discuss the methods of obtaining consent. (C-1)
- 1-3.4 Differentiate between informed and implied consent. (C-3)
- 1-3.5 Explain the role of consent of minors, emancipated minors and mentally incompetent adults in providing care. (C-1)
- 1-3.6 Discuss the implications for the CFR of patient refusal of transport and/or treatment. (C-1)

- 1-3.7 Define abandonment, negligence, and battery as they relate to the CFR.
- 1-3.8 State the conditions necessary for the CFR to have a duty to act. (C-1)
- 1-3.9 Explain the importance, necessity and legality of patient confidentiality.
- 1-3.10 Discuss the role that a CFR should take in the preservation of a crime scene. (C-3)
- 1-3.11 Explain the rationale for the needs, benefits and usage of advance directives. (A-3)
- 1-3.12 Explain the rationale for the concept of varying degrees of DNR. (A-3)
- 1-4.1 Describe the anatomy and function of the respiratory system. (C-1)
- 1-4.2 Describe the anatomy and function of the circulatory system. (C-1)
- 1-4.3 Describe the anatomy and function of the musculoskeletal system. (C-1)
- 1-4.4 Describe the components and function of the nervous system. (C-1)
- 1-4.5 Describe the function of the skin. (C-1)
- 1-5.1 Define body mechanics. (C-1)
- 1-5.2 Discuss the guidelines and safety precautions that need to be followed when lifting a patient. (C-1)
- 1-5.3 Describe the indications for an emergency move. (C-1)
- 1-5.4 Describe the indications for assisting in non-emergency moves. (C-1)
- 1-5.5 Discuss the various devices associated with moving a patient in the out-of-hospital arena. (C-1)
- 1-5.6 Explain the rationale for properly lifting and moving patients. (A-3)
- 1-5.7 Explain the rationale for an emergency move. (A-3)
- 1-5.8 Demonstrate an emergency move. (P-1, 2)
- 1-5.9 Demonstrate a non-emergency move. (P-1, 2)
- 1-5.10 Demonstrate the use of equipment utilized to move patient's in the out-of-hospital arena. (P-1, 2)

Module 2

- 2-1.1 Name and label the major structures of the respiratory system on a diagram. (C-1)
- 2-1.2 List the signs of adequate breathing (C-1)
- 2-1.3 List the signs of inadequate breathing. (C-1)
- 2-1.4 Describe the steps in the head-tilt chin-lift. (C-1)
- 2-1.5 Relate mechanism of injury to opening the airway. (C-3)
- 2-1.6 Describe the steps in the jaw thrust. (C-1)
- 2-1.7 State the importance of having a suction unit ready for immediate use when providing emergency medical care. (C-1)
- 2-1.8 Describe the techniques of suctioning. (C-1)
- 2-1.9 Describe how to ventilate a patient with a pocket mask or barrier device.
- 2-1.10 Describe the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask while using the jaw thrust. (C-1)
- 2-1.11 List the parts of a bag-valve-mask system. (C-1)
- 2-1.12 Describe the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask for one and two rescuers. (C-1)
- 2-1.13 Describe the signs of adequate artificial ventilation using the bag-valve-mask. (C-1)
- 2-1.14 Describe the signs of inadequate artificial ventilation using the bag-valve-mask. (C-1)
- 2-1.15 Describe the steps in artificially ventilating a patient with a flow restricted, oxygen-powered ventilation device. (C-1)
- 2-1.16 Describe how ventilating an infant or child is different from an adult. (C-1)
- 2-1.17 List the steps in providing mouth-to-mouth and mouth-to-stoma ventilation. (C-1)
- 2-1.18 Describe how to measure and insert an oropharyngeal (oral) airway.
- 2-1.19 Describe how to measure and insert a nasopharyngeal (nasal) airway.
- 2-1.20 Define the components of an oxygen delivery system. (C-1)
- 2-1.21 Identify a non-rebreathing facemask and state the oxygen flow requirements needed for its use. (C-1)
- 2-1.22 Identify a nasal cannula and state the flow requirements needed for its use. (C-1)
- 2-1.23 Describe the indications for using a nasal cannula versus a nonrebreather facemask. (C-1)
- 2-1.24 Describe how to clear a foreign body airway obstruction in a responsive adult. (C-1)
- 2-1.25 Describe how to clear a foreign body airway obstruction in a responsive child with complete obstruction or partial airway obstruction and poor air exchange. (C-1)
- 2-1.26 Describe how to clear a foreign body airway obstruction in a responsive infant with complete obstruction or partial airway obstruction and poor air exchange. (C-1)
- 2-1.27 Describe how to clear a foreign body airway obstruction in a unresponsive adult. (C-1)
- 2-1.28 Describe how to clear a foreign body airway obstruction in a unresponsive child. (C-1)
- 2-1.29 Describe how to clear a foreign body airway obstruction in a unresponsive infant. (C-1)

- 2-1.30 Explain why basic life support ventilation and airway protective skills take priority over most other basic life support skills. (A-3)
- 2-1.31 Demonstrate a caring attitude towards patients with airway problems who request emergency medical services. (A-3)
- 2-1.32 Place the interests of the patient with airway problems as the foremost consideration when making any and all patient care decisions. (A-3)
- 2-1.33 Communicate with empathy to patients with airway problems, as well as with family members and friends of the patient. (A-3)
- 2-1.34 Demonstrate the steps in the head-tilt chin-lift. (P-1, 2)
- 2-1.35 Demonstrate the steps in the jaw thrust. (P-1, 2)
- 2-1.36 Demonstrate the techniques of suctioning. (P-1, 2)
- 2-1.37 Demonstrate the steps in mouth-to-mouth ventilation with body substance isolation (barrier shields). (P-1, 2)
- 2-1.38 Demonstrate how to use a pocket mask to ventilate a patient. (P-1, 2)
- 2-1.39 Demonstrate the assembly of a bag-valve-mask unit. (P-1, 2)
- 2-1.40 Demonstrate the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask for one and two rescuers. (P-1, 2)
- 2-1.41 Demonstrate the steps in performing the skill of artificially ventilating a patient with a bag-valve-mask while using the jaw thrust. (P-1, 2)
- 2-1.42 Demonstrate artificial ventilation of a patient with a flow restricted, oxygen powered ventilation device. (P-1, 2)
- 2-1.43 Demonstrate how to ventilate a patient with a stoma. (P-1, 2)
- 2-1.44 Demonstrate how to measure and insert an oropharyngeal (oral) airway.
- 2-1.45 Demonstrate how to measure and insert a nasopharyngeal (nasal) airway.
- 2-1.46 Demonstrate how to ventilate infant and child patients. (P-1, 2)
- 2-1.47 Demonstrate how to clear a foreign body airway obstruction in a responsive adult. (C-1)
- 2-1.48 Demonstrate how to clear a foreign body airway obstruction in a responsive child. (C-1)
- 2-1.49 Demonstrate how to clear a foreign body airway obstruction in a responsive infant. (C-1)
- 2-1.50 Demonstrate how to clear a foreign body airway obstruction in an unresponsive adult. (C-1)
- 2-1.51 Demonstrate how to clear a foreign body airway obstruction in an unresponsive child. (C-1)
- 2-1.52 Demonstrate how to clear a foreign body airway obstruction in an unresponsive infant. (C-1)

Module 3

- 3-1.1 Discuss the components of scene size-up. (C-1)
- 3-1.2 Describe common hazards found at the scene of a trauma and a medical patient. (C-1)
- 3-1.3 Determine if the scene is safe to enter. (C-2)
- 3-1.4 Discuss common mechanisms of injury/nature of illness. (C-1)
- 3-1.5 Discuss the reason for identifying the total number of patients at the scene. (C-1)
- 3-1.6 Explain the reason for identifying the need for additional help or assistance. (C-1)
- 3-1.7 Summarize the reasons for forming a general impression of the patient.
- 3-1.8 Describe the steps of the initial assessment.
- 3-1.9 Discuss methods of assessing mental status. (C-1)
- 3-1.10 Differentiate between assessing mental status in the adult, child, and infant patient. (C-3)
- 3-1.11 Identify the components of vital signs. (C-1)
- 3-1.12 Describe the methods to obtain a breathing rate. (C-1)
- 3-1.13 Describe methods used for assessing if a patient is breathing. (C-1)
- 3-1.14 Differentiate between a patient with adequate and inadequate breathing.
- 3-1.15 Differentiate between shallow, labored and noisy breathing. (C-3)
- 3-1.16 Describe the methods used to assess circulation. (C-1)
- 3-1.17 Describe the methods to obtain a pulse rate. (C-1)
- 3-1.18 Differentiate between obtaining a pulse in an adult, child, and infant patient. (C-3)
- 3-1.19 Differentiate between a strong, weak, regular and irregular pulse. (C-3)
- 3-1.20 Describe the methods to assess the skin color, temperature, condition (capillary refill in infants and children). (C-1)
- 3-1.21 Identify the normal and abnormal skin colors. (C-1)
- 3-1.22 Differentiate between pale, blue, red and yellow skin color. (C-3)
- 3-1.23 Identify the normal and abnormal skin temperature. (C-1)
- 3-1.24 Differentiate between hot, cool and cold skin temperatures. (C-3)
- 3-1.25 Identify normal and abnormal skin conditions. (C-1)
- 3-1.26 Identify normal and abnormal capillary refill in infants and children. (C-1)
- 3-1.27 Describe the methods to assess the pupils. (C-1)
- 3-1.28 Identify normal and abnormal pupil sizes. (C-1)

- 3-1.29 Differentiate between dilated (big) and constricted (small) pupil size. (C-3)
- 3-1.30 Differentiate between reactive and non-reactive pupils and equal and unequal pupils. (C-3)
- 3-1.31 Describe the methods to assess blood pressure. (C-1)
- 3-1.32 Define systolic pressure. (C-1)
- 3-1.33 Define diastolic pressure. (C-1)
- 3-1.34 Explain the difference between auscultation and palpation for obtaining a blood pressure. (C-1)
- 3-1.35 Differentiate between a sign and a symptom. (C-3)
- 3-1.36 State the importance of accurately reporting and recording the baseline vital signs. (C-1)
- 3-1.37 Discuss the need to search for additional medical identification. (C-1)
- 3-1.38 Define each letter of AVPU.
- 3-1.39 Describe the patient characteristics for each letter of AVPU.
- 3-1.40 Discuss the need for assessing the patient for external bleeding. (C-1)
- 3-1.41 Explain the reason for prioritizing a patient for care and transport. (C-1)
- 3-1.42 Discuss the components of the physical exam. (C-1)
- 3-1.43 State the areas of the body that are evaluated during the physical exam.
- 3-1.44 Explain what additional questioning may be asked during the physical exam. (C-1)
- 3-1.45 Explain the components of the SAMPLE history. (C-1)
- 3-1.46 Discuss the components of the on-going assessment. (C-1)
- 3-1.47 Describe the information included in the CFR "hand-off" report. (C-1)
- 3-1.48 Explain the rationale for crew members to evaluate scene safety prior to entering. (A-2)
- 3-1.49 Serve as a model for others by explaining how patient situations affect your evaluation of the mechanism of injury or illness. (A-2)
- 3-1.50 Explain the importance of forming a general impression of the patient.
- 3-1.51 Explain the value of an initial assessment. (A-2)
- 3-1.52 Explain the value of questioning the patient and family. (A-2)
- 3-1.53 Explain the value of the physical exam. (A-2)
- 3-1.54 Explain the value of an on-going assessment. (A-2)
- 3-1.55 Explain the value of performing the baseline vital signs. (A-2)
- 3-1.56 Defend the need for obtaining and recording an accurate set of vital signs.
- 3-1.57 Explain the rationale of recording additional sets of vital signs. (A-1)
- 3-1.58 Explain the importance of obtaining a SAMPLE history. (A-1)
- 3-1.59 Recognize and respond to the feelings patients experience during assessment. (A-1)
- 3-1.60 Demonstrate a caring attitude when performing patient assessments.
- 3-1.61 Place the interests of the patient with foremost consideration when making any and all patient care decisions during patient assessment.
- 3-1.62 Communicate with empathy during patient assessment to patients as well as with family members and friends of the patient. (A-3)
- 3-1.63 Demonstrate the ability to differentiate various scenarios and identify potential hazards. (P-1)
- 3-1.64 Demonstrate the techniques for assessing mental status. (P-1, 2)
- 3-1.65 Demonstrate the techniques for assessing the airway. (P-1, 2)
- 3-1.66 Demonstrate the techniques for assessing if the patient is breathing.
- 3-1.67 Demonstrate the skills involved in assessment of breathing. (P-1, 2)
- 3-1.68 Demonstrate the skills associated with obtaining a pulse. (P-1, 2)
- 3-1.69 Demonstrate the skills associated with assessing the skin color, temperature, condition, and capillary refill in infants and children. (P-1, 2)
- 3-1.70 Demonstrate the skills associated with assessing the pupils. (P-1, 2)
- 3-1.71 Demonstrate the skills associated with obtaining blood pressure. (P-1, 2)
- 3-1.72 Demonstrate the skills that should be used to obtain information from the patient, family, or bystanders at the scene. (P-1, 2)
- 3-1.73 Demonstrate the techniques for assessing the patient for external bleeding. (P-1, 2)
- 3-1.74 Demonstrate the techniques for assessing the patient's skin color, temperature, condition, and capillary refill (infants and children only).
- 3-1.75 Demonstrate questioning a patient to obtain a SAMPLE history.
- 3-1.76 Demonstrate the skills involved in performing the physical exam. (P-1, 2)
- 3-1.77 Demonstrate the on-going assessment (P-1, 2)

Module 4

- 4-1.1 Describe the structure of the heart.
- 4-1.2 Describe the function of the heart.

- 4-1.3 Define coronary heart disease.
- 4-1.4 Define clinical manifestations of CHD
- 4-1.5 Identify the risk factors associated with cardiovascular disease.
- 4-1.6 Discuss prudent heart living.
- 4-1.7 Describe the early warning signs of heart attack and stroke.
- 4-1.8 List and discuss causes of sudden death.
- 4-1.9 Define cardiopulmonary arrest.
- 4-1.10 Describe cardiopulmonary anatomy and physiology.
- 4-1.11 Describe the rationale for each of the steps in CPR.
- 4-1.12 List the reasons for the heart to stop beating (C-1)
- 4-1.13 Define the components of cardiopulmonary resuscitation (C-1)
- 4-1.14 Describe each link in the chain of survival and how it relates to the EMS system. (C-2)
- 4-1.15 List the steps of one-rescuer adult CPR (C-1)
- 4-1.16 Describe the technique of external chest compressions on an adult patient. (C-1)
- 4-1.17 Describe the technique of external chest compressions on a child. (C-1)
- 4-1.18 Describe the technique of external chest compressions on an infant. (C-1)
- 4-1.19 Explain when the CFR is able to stop CPR. (C-2)
- 4-1.20 List the steps of two-rescuer adult CPR (C-1)
- 4-1.21 List the steps of child CPR (C-1)
- 4-1.22 List the steps of infant CPR (C-1)
- 4-1.23 Respond to the feelings that the family of a patient may be having during a cardiac event. (A-3)
- 4-1.24 Demonstrate a caring attitude towards patients with cardiac events who request emergency medical services. (A-3)
- 4-1.25 Place the interests of the patient with a cardiac event as the foremost consideration when making any and all patient care decisions. (A-3)
- 4-1.26 Communicate with empathy with family members and friends of the patient with a cardiac event. (A-3)
- 4-1.27 Demonstrate the proper technique of chest compressions on an adult.
- 4-1.28 Demonstrate the proper technique of chest compressions on a child.
- 4-1.29 Demonstrate the proper technique of chest compressions on an infant.
- 4-1.30 Demonstrate the steps of adult one rescuer CPR. (P-1, 2)
- 4-1.31 Demonstrate the steps of adult two rescuer CPR. (P-1, 2)
- 4-1.32 Demonstrate child CPR. (P-1, 2)
- 4-1.33 Demonstrate infant CPR. (P-1, 2)

Module 5

- 5-1.1 Identify the patient who presents with a general medical complaint. (C-1)
- 5-1.2 Explain the steps in providing emergency medical care to a patient with a general medical complaint. (C-1)
- 5-1.3 State the signs and symptoms of a patient with breathing difficulty. (C-1)
- 5-1.4 Describe the emergency medical care of the patient with breathing difficulty. (C-1)
- 5-1.5 Identify the patient who presents with a specific medical complaint of altered mental status. (C-1)
- 5-1.6 Explain the steps in providing emergency medical care to a patient with an altered mental status. (C-1)
- 5-1.7 Identify the patient taking diabetic medications with an altered mental status and a history of diabetes.
- 5-1.8 State the steps in the emergency care of the patient taking diabetic medications with an altered mental status and a history of diabetes
- 5-1.9 State the definition of Cerebrovascular Accident (Stroke).
- 5-1.10 List the signs and symptoms of Cerebrovascular Accident (Stroke).
- 5-1.11 Describe the emergency medical care of the patient with signs and symptoms of a Cerebrovascular Accident (Stroke).
- 5-1.12 Identify the patient who presents with a specific medical complaint of seizures. (C-1)
- 5-1.13 Explain the steps in providing emergency medical care to a patient with seizures. (C-1)
- 5-1.14 Identify the patient who presents with a specific medical complaint of exposure to cold. (C-1)
- 5-1.15 Explain the steps in providing emergency medical care to a patient with an exposure to cold. (C-1)
- 5-1.16 Identify the patient who presents with a specific medical complaint of exposure to heat. (C-1)
- 5-1.17 Explain the steps in providing emergency medical care to a patient with an exposure to heat. (C-1)
- 5-1.18 Identify the patient who presents with a specific medical complaint of behavioral change. (C-1)
- 5-1.19 Explain the steps in providing emergency medical care to a patient with a behavioral change. (C-1)
- 5-1.20 Identify the patient who presents with a specific complaint of a psychological crisis. (C-1)

- 5-1.21 Explain the steps in providing emergency medical care to a patient with a psychological crisis. (C-1)
- 5-1.22 Attend to the feelings of the patient and/or family when dealing with the patient with a general medical complaint. (A-3)
- 5-1.23 Attend to the feelings of the patient and/or family when dealing with the patient with a specific medical complaint. (A-3)
- 5-1.24 Explain the rationale for modifying your behavior toward the patient with a behavioral emergency. (A-3)
- 5-1.25 Demonstrate a caring attitude towards patients with a general medical complaint who request emergency medical services. (A-3)
- 5-1.26 Place the interests of the patient with a general medical complaint as the foremost consideration when making any and all patient care decisions.
- 5-1.27 Communicate with empathy to patients with a general medical complaint, as well as with family members and friends of the patient. (A-3)
- 5-1.28 Demonstrate a caring attitude towards patients with a specific medical complaint who request emergency medical services. (A-3)
- 5-1.29 Place the interests of the patient with a specific medical complaint as the foremost consideration when making any and all patient care decisions.
- 5-1.30 Communicate with empathy to patients with a specific medical complaint, as well as with family members and friends of the patient. (A-3)
- 5-1.31 Demonstrate a caring attitude towards patients with a behavioral problem who request emergency medical services. (A-3)
- 5-1.32 Place the interests of the patient with a behavioral problem as the foremost consideration when making any and all patient care decisions.
- 5-1.33 Communicate with empathy to patients with a behavioral problem, as well as with family members and friends of the patient. (A-3)
- 5-1.34 Demonstrate the steps in providing emergency medical care to a patient with a general medical complaint. (C-1)
- 5-1.35 Demonstrate the steps in providing emergency medical care for a patient with breathing difficulty. (P-2)
- 5-1.36 Demonstrate the steps in providing emergency medical care to a patient with an altered mental status. (C-1)
- 5-1.37 Demonstrate the steps in providing emergency medical care to a patient with altered mental status and a history of diabetes.
- 5-1.38 Demonstrate the steps in providing emergency medical care to a patient with a Cerebrovascular Accident (Stroke).
- 5-1.39 Demonstrate the steps in providing emergency medical care to a patient with seizures. (C-1)
- 5-1.40 Demonstrate the steps in providing emergency medical care to a patient with an exposure to cold. (C-1)
- 5-1.41 Demonstrate the steps in providing emergency medical care to a patient with an exposure to heat. (C-1)
- 5-1.42 Demonstrate the steps in providing emergency medical care to a patient with a behavioral change. (C-1)
- 5-1.43 Demonstrate the steps in providing emergency medical care to a patient with a psychological crisis. (C-1)
- 5-2.1 Differentiate between arterial, venous, and capillary bleeding. (C-3)
- 5-2.2 State the emergency medical care for external bleeding. (C-1)
- 5-2.3 Establish the relationship between body substance isolation and bleeding.
- 5-2.4 List the signs of internal bleeding. (C-1)
- 5-2.5 List the steps in the emergency medical care of the patient with signs and symptoms of internal bleeding. (C-1)
- 5-2.6 Establish the relationship between body substance isolation (BSI) and soft tissue injuries. (C-3)
- 5-2.7 State the types of open soft tissue injuries. (C-1)
- 5-2.8 Describe the emergency medical care of the patient with a soft tissue injury. (C-1)
- 5-2.9 Discuss the emergency medical care considerations for a patient with a penetrating chest injury. (C-1)
- 5-2.10 State the emergency medical care considerations for a patient with an open wound to the abdomen. (C-1)
- 5-2.11 Describe the emergency medical care for an impaled object. (C-1)
- 5-2.12 State the emergency medical care for an amputation. (C-1)
- 5-2.13 Describe the emergency medical care for burns. (C-1)
- 5-2.14 List the functions of dressing and bandaging. (C-1)
- 5-2.15 Explain the rationale for body substance isolation when dealing with bleeding and soft tissue injuries. (A-3)
- 5-2.16 Attend to the feelings of the patient with a soft tissue injury or bleeding.
- 5-2.17 Demonstrate a caring attitude towards patients with a soft tissue injury or bleeding who request emergency medical services. (A-3)
- 5-2.18 Place the interests of the patient with a soft tissue injury or bleeding as the foremost consideration when making any and all patient care decisions. (A-3)
- 5-2.19 Communicate with empathy to patients with a soft tissue injury or bleeding, as well as with family members and friends of the patient. (A-3)
- 5-2.20 Demonstrate direct pressure as a method of emergency medical care for external bleeding. (P-1, 2)
- 5-2.21 Demonstrate the use of diffuse pressure as a method of emergency medical care for external bleeding. (P-1, 2)

- 5-2.22 Demonstrate the use of pressure points as a method of emergency medical care for external bleeding. (P-1, 2)
- 5-2.23 Demonstrate the care of the patient exhibiting signs and symptoms of internal bleeding. (P-1, 2)
- 5-2.24 Demonstrate the steps in the emergency medical care of open soft tissue injuries. (P-1, 2)
- 5-2.25 Demonstrate the steps in the emergency medical care of a patient with an open chest wound. (P-1, 2)
- 5-2.26 Demonstrate the steps in the emergency medical care of a patient with open abdominal wounds. (P-1, 2)
- 5-2.27 Demonstrate the steps in the emergency medical care of a patient with an impaled object. (P-1, 2)
- 5-2.28 Demonstrate the steps in the emergency medical care of a patient with an amputation. (P-1, 2)
- 5-2.29 Demonstrate the steps in the emergency medical care of an amputated part. (P-1, 2)
- 5-3.1 Describe the function of the musculoskeletal system. (C-1)
- 5-3.2 Differentiate between an open and a closed painful, swollen, deformed extremity. (C-1)
- 5-3.3 State the reasons for splinting. (C-1)
- 5-3.4 List devices used for splinting. (C-1)
- 5-3.5 List the general rules of splinting. (C-1)
- 5-3.6 List the complications of splinting. (C-1)
- 5-3.7 List the emergency medical care for a patient with a painful, swollen, deformed extremity. (C-1)
- 5-3.8 Relate mechanism of injury to potential injuries of the head and spine.
- 5-3.9 State the signs and symptoms of a potential spine injury. (C-1)
- 5-3.10 Describe the method of determining if a responsive patient may have a spine injury. (C-1)
- 5-3.11 Describe the method of determining if an unresponsive patient may have a spine injury. (C-1)
- 5-3.12 Relate the airway emergency medical care techniques to the patient with a suspected spine injury. (C-3)
- 5-3.13 Describe the basic principals of emergency care for a spine injured patient.
- 5-3.14 Describe how to stabilize the cervical spine. (C-1)
- 5-3.15 Discuss indications for using a cervical spine immobilization device. (C-1)
- 5-3.16 Establish the relationship between airway management and the patient with head and spine injuries. (C-1)
- 5-3.17 Describe a method for sizing a cervical spine immobilization device. (C-1)
- 5-3.18 Describe how to log roll a patient with a suspected spine injury. (C-1)
- 5-3.19 Describe how to secure a patient to a long spine board. (C-1)
- 5-3.20 List the signs and symptoms of injury to the head. (C-1)
- 5-3.21 Describe the emergency medical care for injuries to the head. (C-1)
- 5-3.22 Explain the rationale for splinting at the scene versus load and go.
- 5-3.23 Explain the rationale for immobilization of the painful, swollen, deformed extremity.
- 5-3.24 Explain the rationale for the feeling patients who have need for immobilization of the painful, swollen, deformed extremity. (A-3)
- 5-3.25 Demonstrate a caring attitude towards patients with a musculoskeletal injury who request emergency medical services. (A-3)
- 5-3.26 Place the interests of the patient with a musculoskeletal injury as the foremost consideration when making any and all patient care decisions.
- 5-3.27 Communicate with empathy to patients with a musculoskeletal injury, as well as with family members and friends of the patient. (A-3)
- 5-3.28 Explain the rationale for immobilization of the entire spine when a cervical spine injury is suspected. (A-3)
- 5-3.29 Demonstrate the emergency medical care of a patient with a painful, swollen, deformed extremity. (P-1, 2)
- 5-3.30 Demonstrate opening the airway in a patient with suspected spinal cord injury. (P-1, 2)
- 5-3.31 Demonstrate evaluating a responsive patient with a suspected spinal cord injury. (P-1, 2)
- 5-3.32 Demonstrate stabilizing of the cervical spine. (P-1, 2)
- 5-3.33 Demonstrate how to log roll a patient with a suspected spinal cord injury. (P-1, 2)
- 5-3.34 Demonstrate how to secure a patient to a long spine board. (C-1)

Module 6

- 6-1.1 Identify the following structures: Uterus, vagina, fetus, placenta, umbilical cord, amniotic sac, perineum. (C-1)
- 6-1.2 Identify and explain the use of the contents of an obstetrics kit. (C-1)
- 6-1.3 Identify pre-delivery emergencies. (C-1)
- 6-1.4 State indications of an imminent delivery. (C-1)
- 6-1.5 Differentiate the emergency medical care provided to a patient with pre-delivery emergencies from a normal delivery. (C-3)
- 6-1.6 State the steps in the pre-delivery preparation of the mother. (C-1)
- 6-1.7 Establish the relationship between body substance isolation and childbirth. (C-3)
- 6-1.8 State the steps to assist in the delivery. (C-1)
- 6-1.9 Describe care of the baby as the head appears. (C-1)
- 6-1.10 Describe how and when to cut the umbilical cord. (C-1)

- 6-1-11 Discuss the steps in caring for a newborn. (C-1)
- 6-1.12 Understand the special needs of a newborn in the pre hospital setting
- 6-1.13 Describe the normal respiratory and heart rates for the newborn
- 6-1.14 Understand the need for warming, drying, suctioning and stimulating the newborn.
- 6-1.15 List the steps in newborn resuscitation and the indications for supplemental oxygen, assisted ventilations and chest compressions
- 6-1.16 Discuss the steps in the delivery of the placenta. (C-1)
- 6-1.17 List the steps in the emergency medical care of the mother post-delivery. (C-3)
- 6-1.18 Summarize neonatal resuscitation procedures. (C-1)
- 6-1.19 Describe the procedures for the following abnormal deliveries: Breech birth, prolapsed cord, limb presentation. (C-1)
- 6-1.20 Differentiate the special considerations for multiple births. (C-3)
- 6-1.21 Describe special considerations of meconium. (C-1)
- 6-1.22 Describe special considerations of a premature baby. (C-1)
- 6-1.23 Discuss the emergency medical care of a patient with a gynecological emergency. (C-1)
- 6-1.24 Explain the rationale for understanding the implications of treating two patients (mother and baby). (A-3)
- 6-1.25 Explain the rationale for attending to the feeling of a patient in need of emergency medical care during childbirth. (A-2)
- 6-1.26 Demonstrate a caring attitude towards patients during childbirth who request emergency medical services. (A-3)
- 6-1.27 Place the interests of the patient during childbirth as the foremost consideration when making any and all patient care decisions. (A-3)
- 6-1.28 Communicate with empathy to patients during childbirth, as well as with family members and friends of the patient. (A-3)
- 6-1.29 Demonstrate the steps to assist in the normal cephalic delivery. (P-1, 2)
- 6-1.30 Demonstrate necessary care procedures of the fetus as the head appears. (P-1, 2)
- 6-1.31 Demonstrate infant neonatal procedures. (P-1, 2)
- 6-1.32 Demonstrate post delivery care of infant. (P-1, 2)
- 6-1.33 Demonstrate how and when to cut the umbilical cord. (P-1, 2)
- 6-1.34 Attend to the steps in the delivery of the placenta. (P-1, 2)
- 6-1.35 Demonstrate the post-delivery care of the mother. (P-1, 2)
- 6-1.36 Demonstrate the care of the newborn. (P-1, 2)
- 6-1.37 Demonstrate how to assess a newborn
- 6-1.38 Demonstrate how to warm, dry, suction and stimulate the newborn
- 6-1.39 Demonstrate how to provide blow-by oxygen to the newborn
- 6-1.40 Demonstrate how to provide assisted ventilations to the newborn
- 6-1.41 Demonstrate how to perform chest compressions on the newborn
- 6-1.42 Demonstrate the procedures for the following abnormal deliveries: vaginal bleeding, breech birth, prolapsed cord, limb presentation. (P-1, 2)
- 6-1.43 Demonstrate the steps in the emergency medical care of the mother with excessive bleeding. (P-1, 2)
- 6-1.44 Demonstrate completing a prehospital care report for patients with obstetrical/gynecological emergencies. (P-2)
- 6-2.1 Describe differences in anatomy and physiology of the infant, child, and adult patient. (C-1)
- 6-2.2 Describe assessment of the infant or child. (C-1)
- 6-2.3 Describe the importance of maintaining an open airway.
- 6-2.4 Indicate various causes of respiratory emergencies in infants and children.
- 6-2.5 Differentiate between respiratory distress and respiratory failure. (C-3)
- 6-2.6 Describe the signs and symptoms of respiratory distress and respiratory failure.
- 6-2.7 Describe the techniques of suctioning the infant and child.
- 6-2.8 Summarize emergency medical care strategies for respiratory distress and respiratory failure/arrest in infants and children. (C-1)
- 6-2.9 Describe the techniques of suctioning the infant and child.
- 6-2.10 List common causes of seizures in the infant and child patient. (C-1)
- 6-2.11 Describe management of seizures in the infant and child patient. (C-1)
- 6-2.12 List the common causes for altered mental status in the infant and child patient. (C-1).
- 6-2.13 Describe the emergency care for altered mental status in the infant/child.
- 6-2.14 Describe the emergency care for poisoning in the infant and child.
- 6-2.15 Identify the signs and symptoms of shock (hypoperfusion) in the infant and child patient. (C-1)
- 6-2.16 Compare the signs and symptoms of compensated and decompensated shock.
- 6-2.17 Identify the signs and symptoms of Sudden Infant Death Syndrome (SIDS)
- 6-2.18 Describe the emergency medical care for a victim of SIDS

- 6-2.19 Discuss emergency medical care of the infant and child trauma patient.
- 6-2.20 Explain the modifications for spinal immobilization for the infant and child
- 6-2.21 Summarize the signs and symptoms of possible child abuse and neglect.
- 6-2.22 Describe the medical - legal responsibilities in suspected child abuse.
- 6-2.23 Recognize need for Certified First Responder debriefing following a difficult infant or child transport. (C-1)
- 6-2.24 Attend to the feelings of the family when dealing with an ill or injured infant or child. (A-1)
- 6-2.25 Understand the provider's own emotional response to caring for infants or children. (A-1)
- 6-2.26 Demonstrate a caring attitude towards infants and children with illness or injury who require emergency medical services. (A-3)
- 6-2.27 Place the interests of the infant or child with an illness or injury as the foremost consideration when making any and all patient care decisions.
- 6-2.28 Communicate with empathy to infants and children with an illness or injury, as well as with family members and friends of the patient. (A-3)
- 6-2.29 Demonstrate how to open the airway of the pediatric patient.
- 6-2.30 Demonstrate assessment of the infant and child. (P-1, 2)
- 6-2.31 Demonstrate the sizing technique for the selection of infant and child bag-valve-masks and oxygen delivery devices.
- 6-2.32 Demonstrate oxygen delivery for the infant and child. (P-1, 2)
- 6-2.33 Demonstrate suctioning techniques for the infant and child (P-1, 2)
- 6-2.34 Demonstrate how to provide manual stabilization of the head and cervical spine.
- 6-2.35 Demonstrate how to open the airway of the pediatric patient with suspected spinal injury.
- 6-2.36 Demonstrate how to properly size and apply a cervical collar to the pediatric patient.
- 6-2.37 Demonstrate the modifications for spinal immobilization for the infant and child

Module 7

- 7-1.1 Discuss the medical and non-medical equipment needed to respond to a call. (C-1) - refer to Part 800
- 7-1.2 List the phases of an ambulance call. (C-1)
- 7-1.3 Describe the general provisions of the NYS Motor Vehicle and Traffic laws relating to the operation of the ambulance and privileges in any or all of the following categories:(C-1)
 - Speed
 - Warning lights
 - Sirens
 - Right-of-way
 - Parking
 - Turning
 - Responsibility of vehicle operator for "Due Regard For Safety of All Others" while operating an emergency vehicle
- 7-1.4 List contributing factors to unsafe driving conditions. (C-1)
- 7-1.5 Describe the considerations that should be given to:
 - Request for escorts.
 - Following an escort vehicle
 - Intersections(C-1)
- 7-1.6 State what information is essential in order to respond to a call. (C-1)
- 7-1.7 Discuss various factors that may affect response to a call. (C-1)
- 7-1.8 Describe the methods of preparing the patient for transport
- 7-1.9 Understand the importance of written documentation of patient care rendered.
- 7-1.10 Discuss issues concerning the fundamental components of documentation. (C-1)
- 7-1.11 Explain the components of the written report and list the information that should be included in the written report. (C-1)
- 7-1.12 Identify the various sections of the written report. (C-1)
- 7-1.13 Describe what information is required in each section of the prehospital care report and how it should be entered. (C-1)
- 7-1.14 Define the special considerations concerning patient refusal. (C-1)
- 7-1.15 Describe the legal implications associated with the written report. (C-1)
- 7-1.16 Discuss all state and/or local record and reporting requirements. (C-1)
- 7-1.17 Summarize the importance of preparing the unit for the next response.
- 7-1.18 Identify what is essential for completion of a call. (C-1)
- 7-1.19 Distinguish among the terms cleaning, disinfection, high-level disinfection, and sterilization. (C-3)
- 7-1.20 Describe how to clean or disinfect items following patient care. (C-1)

- 7-1.21 Describe the common situations in which Advanced Life Support should be utilized.
- 7-1.22 Describe the utilization of aeromedical EMS in a given EMS system. (C-1)
- 7-1.23 Describe the local dispatch and local protocols for use of Aeromedical transport.
- 7-1.24 Explain the rationale for patient care documentation. (A-3)
- 7-1.25 Explain the rationale for the EMS system gathering data. (A-3)
- 7-1.26 Explain the rationale for using medical terminology correctly. (A-3)
- 7-1.27 Explain the rationale for using an accurate and synchronous clock so that information can be used in trending. (A-3)
- 7-1.28 Explain the rationale for appropriate report of patient information. (A-3)
- 7-1.29 Explain the rationale for having the unit prepared to respond. (A-3)
- 7-1.30 Complete a prehospital care report. (P-2)