



BROWARD COLLEGE COURSE OUTLINE

LAST REVIEW: 2009-2010
(i.e. 2003-2004)

NEXT REVIEW: 2014-2015
(i.e. 2008-2009)

STATUS:
(A, I, D)

COURSE TITLE: Paramedic Science II

COMMON COURSE NUMBER: EMS 2632

CREDIT HOURS: 3

CONTACT HOUR BREAKDOWN
(per 16 week term)

CLOCK HOURS:
(Voc. Course ONLY)

Lecture: **48** Lab:
Clinic: Other:

PREREQUISITE(S): EMS 2010, EMS 2631, EMS 2631L, EMS 2650

COREQUISITE(S): EMS 2633, EMS 2632L, EMS 2641, EMS 2651

PRE/COREQUISITE(S):

COURSE DESCRIPTION *(750 characters, maximum):*

CATALOG COURSE DESCRIPTION: Topics include general principles of pathophysiology, pharmacology, venous access and medication administration. Patient Assessment including history taking, techniques of physical examination, assessment procedures, clinical decision making, and radio communications are included. Material includes 1998 U.S. Department of Transportation, (DOT), National Paramedic Curriculum objectives for Module 1, Units 6,7,8 and Module 3, Units1-5.

UNIT TITLES

1. General Principles of Pathophysiology
2. Pharmacology
3. Venous Access and Medication Administration
4. Patient Assessment - History Taking
5. Techniques of Physical Examination
6. Patient Assessment Procedures
7. Clinical Decision Making
8. Communications

UNITS

UNIT TERMINAL OBJECTIVE: Preparatory General Principles of Pathophysiology

1-6 At the completion of this unit, the paramedic student will be able to apply the general concepts of pathophysiology for the assessment and management of emergency patients.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-6.1 Discuss cellular adaptation. (C-1)
- 1-6.2 Describe cellular injury and cellular death. (C-1)
- 1-6.3 Describe the factors that precipitate disease in the human body. (C-1)
- 1-6.4 Describe the cellular environment. (C-1)
- 1-6.5 Discuss analyzing disease risk. (C-1)
- 1-6.6 Describe environmental risk factors. (C-1)
- 1-6.7 Discuss combined effects and interaction among risk factors. (C-1)
- 1-6.8 Describe aging as a risk factor for disease. (C-1)
- 1-6.9 Discuss familial diseases and associated risk factors. (C-1)
- 1-6.10 Discuss hypoperfusion. (C-1)
- 1-6.11 Define cardiogenic, hypovolemic, neurogenic, anaphylactic and septic shock. (C-1)
- 1-6.12 Describe multiple organ dysfunction syndrome. (C-1)
- 1-6.13 Define the characteristics of the immune response. (C-1)
- 1-6.14 Discuss induction of the immune system. (C-1)
- 1-6.15 Discuss fetal and neonatal immune function. (C-1)
- 1-6.16 Discuss aging and the immune function in the elderly. (C-1)
- 1-6.17 Describe the inflammation response. (C-1)
- 1-6.18 Discuss the role of mast cells as part of the inflammation response. (C-1)
- 1-6.19 Describe the plasma protein system. (C-1)
- 1-6.20 Discuss the cellular components of inflammation. (C-1)
- 1-6.21 Describe the systemic manifestations of the inflammation response. (C-1)
- 1-6.22 Describe the resolution and repair from inflammation. (C-1)
- 1-6.23 Discuss the effect of aging on the mechanisms of self-defense. (C-1)
- 1-6.24 Discuss hypersensitivity. (C-1)
- 1-6.25 Describe deficiencies in immunity and inflammation. (C-1)
- 1-6.26 Describe homeostasis as a dynamic steady state. (C-1)
- 1-6.27 List types of tissue. (C-1)
- 1-6.28 Describe the systemic manifestations that result from cellular injury. (C-1)
- 1-6.29 Describe neuroendocrine regulation. (C-1)
- 1-6.30 Discuss the inter-relationships between stress, coping, and illness. (C-1)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-6.31 Advocate the need to understand and apply the knowledge of pathophysiology to patient assessment and treatment. (A-2)

UNIT TERMINAL OBJECTIVE: Preparatory Pharmacology

1-7 At the completion of this unit, the paramedic student will be able to integrate pathophysiological principles of pharmacology and the assessment findings to formulate a field impression and implement a pharmacologic management plan.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-7.1 Describe historical trends in pharmacology. (C-1)
- 1-7.2 Differentiate among the chemical, generic (nonproprietary), and trade (proprietary) names of a drug. (C-3)
- 1-7.3 List the four main sources of drug products. (C-1)
- 1-7.4 Describe how drugs are classified. (C-1)
- 1-7.5 List the authoritative sources for drug information. (C-1)
- 1-7.6 List legislative acts controlling drug use and abuse in the United States. (C-1)
- 1-7.7 Differentiate among Schedule I, II, III, IV, and V substances. (C-3)
- 1-7.8 List examples of substances in each schedule. (C-1)
- 1-7.9 Discuss standardization of drugs. (C-1)
- 1-7.10 Discuss investigational drugs, including the Food and Drug Administration (FDA) approval process and the FDA classifications for newly approved drugs. (C-1)
- 1-7.11 Discuss special consideration in drug treatment with regard to pregnant, pediatric and geriatric patients. (C-1)
- 1-7.12 Discuss the paramedic's responsibilities and scope of management pertinent to the administration of medications. (C-1)
- 1-7.13 Review the specific anatomy and physiology pertinent to pharmacology with additional attention to autonomic pharmacology. (C-1)
- 1-7.14 List and describe general properties of drugs. (C-1)
- 1-7.15 List and describe liquid and solid drug forms. (C-1)
- 1-7.16 List and differentiate routes of drug administration. (C-3)
- 1-7.17 Differentiate between enteral and parenteral routes of drug administration. (C-3)
- 1-7.18 Describe mechanisms of drug action. (C-1)
- 1-7.19 List and differentiate the phases of drug activity, including the pharmaceutical, pharmacokinetic, and pharmacodynamic phases. (C-3)
- 1-7.20 Describe the process called pharmacokinetics, pharmacodynamics, including theories of drug action, drug-response relationship, factors altering drug responses, predictable drug responses, iatrogenic drug responses, and unpredictable adverse drug responses. (C-1)
- 1-7.21 Differentiate among drug interactions. (C-3)
- 1-7.22 Discuss considerations for storing and securing medications. (C-1)
- 1-7.23 List the component of a drug profile by classification. (C-1)
- 1-7.24 List and describe drugs that the paramedic may administer according to local protocol. (C-1)
- 1-7.25 Integrate pathophysiological principles of pharmacology with patient assessment. (C-3)
- 1-7.26 Synthesize patient history information and assessment findings to form a field impression. (C-3)
- 1-7.27 Synthesize a field impression to implement a pharmacologic management plan. (C-3)

1-7.28 Assess the pathophysiology of a patient's condition by identifying classifications of drugs. (C-3)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-7.29 Serve as a model for obtaining a history by identifying classifications of drugs. (A-3)
- 1-7.30 Defend the administration of drugs by a paramedic to affect positive therapeutic affect. (A-3)
- 1-7.31 Advocate drug education through identification of drug classifications. (A-3)

UNIT TERMINAL OBJECTIVE: Preparatory – Venous Access and Medication

Administration

1-8 At the completion of this unit, the paramedic student will be able to safely and precisely access the venous circulation and administer medications.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-8.1 Review the specific anatomy and physiology pertinent to medication administration. (C-1)
- 1-8.2 Review mathematical principles. (C-1)
- 1-8.3 Review mathematical equivalents. (C-1)
- 1-8.4 Differentiate temperature readings between the Centigrade and Fahrenheit scales. (C-3)
- 1-8.5 Discuss formulas as a basis for performing drug calculations. (C-1)
- 1-8.6 Discuss applying basic principles of mathematics to the calculation of problems associated with medication dosages. (C-1)
- 1-8.7 Describe how to perform mathematical conversions from the household system to the metric system. (C-1)
- 1-8.8 Describe the indications, equipment needed, technique used, precautions, and general principles of peripheral venous or external jugular cannulation. (C-1)
- 1-8.9 Describe the indications, equipment needed, technique used, precautions, and general principles of intraosseous needle placement and infusion. (C-1)
- 1-8.10 Discuss legal aspects affecting medication administration. (C-1)
- 1-8.11 Discuss the "six rights" of drug administration and correlate these with the principles of medication administration. (C-1)
- 1-8.12 Discuss medical asepsis and the differences between clean and sterile techniques. (C-1)
- 1-8.13 Describe use of antiseptics and disinfectants. (C-1)
- 1-8.14 Describe the use of universal precautions and body substance isolation (BSI) procedures when administering a medication. (C-1)
- 1-8.15 Differentiate among the different dosage forms of oral medications. (C-3)
- 1-8.16 Describe the equipment needed and general principles of administering oral medications. (C-3)

- 1-8.17 Describe the indications, equipment needed, techniques used, precautions, and general principles of administering medications by the inhalation route. (C-3)
- 1-8.18 Describe the indications, equipment needed, techniques used, precautions, and general principles of administering medications by the gastric tube. (C-3)
- 1-8.19 Describe the indications, equipment needed, techniques used, precautions, and general principles of rectal medication administration. (C-3)
- 1-8.20 Differentiate among the different parenteral routes of medication administration. (C-3)
- 1-8.21 Describe the equipment needed, techniques used, complications, and general principles for the preparation and administration of parenteral medications. (C-1)
- 1-8.22 Differentiate among the different percutaneous routes of medication administration. (C-3)
- 1-8.23 Describe the purpose, equipment needed, techniques used, complications, and general principles for obtaining a blood sample. (C-1)
- 1-8.24 Describe disposal of contaminated items and sharps. (C-1)
- 1-8.25 Synthesize a pharmacologic management plan including medication administration. (C-3)
- 1-8.26 Integrate pathophysiological principles of medication administration with patient management. (C-3)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 1-8.27 Comply with paramedic standards of medication administration. (A-1)
- 1-8.28 Comply with universal precautions and body substance isolation (BSI). (A-1)
- 1-8.29 Defend a pharmacologic management plan for medication administration. (A-3)
- 1-8.30 Serve as a model for medical asepsis. (A-3)
- 1-8.31 Serve as a model for advocacy while performing medication administration. (A-3)
- 1-8.32 Serve as a model for disposing contaminated items and sharps. (A-3)

UNIT TERMINAL OBJECTIVE: Patient Assessment – History Taking

- 3-1 At the completion of this unit, the paramedic student will be able to use the appropriate techniques to obtain a medical history from a patient.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-1.1 Describe the techniques of history taking. (C-1)
- 3-1.2 Discuss the importance of using open ended questions. (C-1)
- 3-1.3 Describe the use of facilitation, reflection, clarification, empathetic responses, confrontation, and interpretation. (C-1)
- 3-1.4 Differentiate between facilitation, reflection, clarification, sympathetic responses, confrontation, and interpretation. (C-3)
- 3-1.5 Describe the structure and purpose of a health history. (C-1)
- 3-1.6 Describe how to obtain a comprehensive health history. (C-1)
- 3-1.7 List the components of a comprehensive history of an adult patient. (C-1)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-1.8 Demonstrate the importance of empathy when obtaining a health history. (A-1)
- 3-1.9 Demonstrate the importance of confidentiality when obtaining a health history. (A-1)

UNIT TERMINAL OBJECTIVE: Patient Assessment – Techniques of Physical Examination

- 3-2 At the completion end of this unit, the paramedic student will be able to explain the pathophysiological significance of physical exam findings.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-2.1 Define the terms inspection, palpation, percussion, auscultation. (C-1)
- 3-2.2 Describe the techniques of inspection, palpation, percussion, and auscultation. (C-1)
- 3-2.3 Describe the evaluation of mental status. (C-1)
- 3-2.4 Evaluate the importance of a general survey. (C-3)
- 3-2.5 Describe the examination of skin, hair and nails. (C-1)
- 3-2.6 Differentiate normal and abnormal findings of the assessment of the skin. (C-3)
- 3-2.7 Distinguish the importance of abnormal findings of the assessment of the skin. (C-3)
- 3-2.8 Describe the examination of the head and neck. (C-1)
- 3-2.9 Differentiate normal and abnormal findings of the scalp examination. (C-3)
- 3-2.10 Describe the normal and abnormal assessment findings of the skull. (C-1)
- 3-2.11 Describe the assessment of visual acuity. (C-1)
- 3-2.12 Explain the rationale for the use of an ophthalmoscope. (C-1)
- 3-2.13 Describe the examination of the eyes. (C-1)
- 3-2.14 Distinguish between normal and abnormal assessment findings of the eyes. (C-3)
- 3-2.15 Explain the rationale for the use of an otoscope. (C-1)
- 3-2.16 Describe the examination of the ears. (C-1)
- 3-2.17 Differentiate normal and abnormal assessment findings of the ears. (C-3)
- 3-2.18 Describe the examination of the nose. (C-1)
- 3-2.19 Differentiate normal and abnormal assessment findings of the nose. (C-3)
- 3-2.20 Describe the examination of the mouth and pharynx. (C-1)
- 3-2.21 Differentiate normal and abnormal assessment findings of the mouth and pharynx. (C-3)
- 3-2.22 Describe the examination of the neck. (C-1)
- 3-2.23 Differentiate normal and abnormal assessment findings the neck. (C-3)
- 3-2.24 Describe the survey of the thorax and respiration. (C-1)
- 3-2.25 Describe the examination of the posterior chest. (C-1)
- 3-2.26 Describe percussion of the chest. (C-1)
- 3-2.27 Differentiate the percussion notes and their characteristics. (C-3)
- 3-2.28 Differentiate the characteristics of breath sounds. (C-3)
- 3-2.29 Describe the examination of the anterior chest. (C-1)
- 3-2.30 Differentiate normal and abnormal assessment findings of the chest examination. (C-3)
- 3-2.31 Describe special examination techniques related to the assessment of the chest. (C-1)
- 3-2.32 Describe the examination of the arterial pulse including rate, rhythm, and amplitude. (C-1)

- 3-2.33 Distinguish normal and abnormal findings of arterial pulse. (C-3)
- 3-2.34 Describe the assessment of jugular venous pressure and pulsations. (C-1)
- 3-2.35 Distinguish normal and abnormal examination findings of jugular venous pressure and pulsations. (C-3)
- 3-2.36 Describe the examination of the heart and blood vessels. (C-1)
- 3-2.37 Differentiate normal and abnormal assessment findings of the heart and blood vessels. (C-3)
- 3-2.38 Describe the auscultation of the heart. (C-1)
- 3-2.39 Differentiate the characteristics of normal and abnormal findings associated with the auscultation of the heart. (C-3)
- 3-2.40 Describe special examination techniques of the cardiovascular examination. (C-1)
- 3-2.41 Describe the examination of the abdomen. (C-1)
- 3-2.42 Differentiate normal and abnormal assessment findings of the abdomen. (C-3)
- 3-2.43 Describe auscultation of the abdomen. (C-1)
- 3-2.44 Distinguish normal and abnormal findings of the auscultation of the abdomen. (C-3)
- 3-2.45 Describe the examination of the female genitalia. (C-1)
- 3-2.46 Differentiate normal and abnormal assessment findings of the female genitalia. (C-3)
- 3-2.47 Describe the examination of the male genitalia. (C-1)
- 3-2.48 Differentiate normal and abnormal findings of the male genitalia. (C-3)
- 3-2.49 Describe the examination of the anus and rectum. (C-3)
- 3-2.50 Distinguish between normal and abnormal findings of the anus and rectum. (C-3)
- 3-2.51 Describe the examination of the peripheral vascular system. (C-1)
- 3-2.52 Differentiate normal and abnormal findings of the peripheral vascular system. (C-3)
- 3-2.53 Describe the examination of the musculoskeletal system. (C-1)
- 3-2.54 Differentiate normal and abnormal findings of the musculoskeletal system. (C-3)
- 3-2.55 Describe the examination of the nervous system. (C-1)
- 3-2.56 Differentiate normal and abnormal findings of the nervous system. (C-3)
- 3-2.57 Describe the assessment of the cranial nerves. (C-1)
- 3-2.58 Differentiate normal and abnormal findings of the cranial nerves. (C-3)
- 3-2.59 Describe the general guidelines of recording examination information. (C-1)
- 3-2.60 Discuss the considerations of examination of an infant or child. (C-1)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-2.61 Demonstrate a caring attitude when performing physical examination skills. (A-3)
- 3-2.62 Discuss the importance of a professional appearance and demeanor when performing physical examination skills. (A-1)
- 3-2.63 Appreciate the limitations of conducting a physical exam in the out-of-hospital environment. (A-2)

UNIT TERMINAL OBJECTIVE: Patient Assessment – Patient Assessment Process

- 3-3 At the end of this unit, the paramedic student will be able to integrate the principles of history taking and techniques of physical exam to perform a patient assessment.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-3.1 Recognize hazards/ potential hazards. (C-1)
- 3-3.2 Describe common hazards found at the scene of a trauma and a medical patient. (C-1)
- 3-3.3 Determine hazards found at the scene of a medical or trauma patient. (C-2)
- 3-3.4 Differentiate safe from unsafe scenes. (C-3)
- 3-3.5 Describe methods to making an unsafe scene safe. (C-1)
- 3-3.6 Discuss common mechanisms of injury/ nature of illness. (C-1)
- 3-3.7 Predict patterns of injury based on mechanism of injury. (C-2)
- 3-3.8 Discuss the reason for identifying the total number of patients at the scene. (C-1)
- 3-3.9 Organize the management of a scene following size-up. (C-3)
- 3-3.10 Explain the reasons for identifying the need for additional help or assistance. (C-1)
- 3-3.11 Summarize the reasons for forming a general impression of the patient. (C-1)
- 3-3.12 Discuss methods of assessing mental status. (C-1)
- 3-3.13 Categorize levels of consciousness in the adult, infant and child. (C-3)
- 3-3.14 Differentiate between assessing the altered mental status in the adult, child and infant patient. (C-3)
- 3-3.15 Discuss methods of assessing the airway in the adult, child and infant patient. (C-1)
- 3-3.16 State reasons for management of the cervical spine once the patient has been determined to be a trauma patient. (C-1)
- 3-3.17 Analyze a scene to determine if spinal precautions are required. (C-3)
- 3-3.18 Describe methods used for assessing if a patient is breathing. (C-1)
- 3-3.19 Differentiate between a patient with adequate and inadequate minute ventilation. (C-3)
- 3-3.20 Distinguish between methods of assessing breathing in the adult, child and infant patient. (C-3)
- 3-3.21 Compare the methods of providing airway care to the adult, child and infant patient. (C-3)
- 3-3.22 Describe the methods used to locate and assess a pulse. (C-1)
- 3-3.23 Differentiate between locating and assessing a pulse in an adult, child and infant patient. (C-3)
- 3-3.24 Discuss the need for assessing the patient for external bleeding. (C-1)
- 3-3.25 Describe normal and abnormal findings when assessing skin color. (C-1)
- 3-3.26 Describe normal and abnormal findings when assessing skin temperature. (C-1)
- 3-3.27 Describe normal and abnormal findings when assessing skin condition. (C-1)
- 3-3.28 Explain the reason for prioritizing a patient for care and transport. (C-1)
- 3-3.29 Identify patients who require expeditious transport. (C-3)
- 3-3.30 Describe the evaluation of patient's perfusion status based on findings in the initial assessment. (C-1)
- 3-3.31 Describe orthostatic vital signs and evaluate their usefulness in assessing a patient in shock. (C-1)
- 3-3.32 Apply the techniques of physical examination to the medical patient. (C-1)
- 3-3.33 Differentiate between the assessment that is performed for a patient who is unresponsive or has an altered mental status and other medical patients requiring assessment. (C-3)
- 3-3.34 Discuss the reasons for reconsidering the mechanism of injury. (C-1)

- 3-3.35 State the reasons for performing a rapid trauma assessment. (C-1)
- 3-3.36 Recite examples and explain why patients should receive a rapid trauma assessment. (C-1)
- 3-3.37 Apply the techniques of physical examination to the trauma patient. (C-1)
- 3-3.38 Describe the areas included in the rapid trauma assessment and discuss what should be evaluated. (C-1)
- 3-3.39 Differentiate cases when the rapid assessment may be altered in order to provide patient care. (C-3)
- 3-3.40 Discuss the reason for performing a focused history and physical exam. (C-1)
- 3-3.41 Describe when and why a detailed physical examination is necessary. (C-1)
- 3-3.42 Discuss the components of the detailed physical exam in relation to the techniques of examination. (C-1)
- 3-3.43 State the areas of the body that are evaluated during the detailed physical exam. (C-1)
- 3-3.44 Explain what additional care should be provided while performing the detailed physical exam. (C-1)
- 3-3.45 Distinguish between the detailed physical exam that is performed on a trauma patient and that of the medical patient. (C-3)
- 3-3.46 Differentiate patients requiring a detailed physical exam from those who do not. (C-3)
- 3-3.47 Discuss the reasons for repeating the initial assessment as part of the on-going assessment. (C-1)
- 3-3.48 Describe the components of the on-going assessment. (C-1)
- 3-3.49 Describe trending of assessment components. (C-1)
- 3-3.50 Discuss medical identification devices/ systems. (C-1)

AFFECTIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-3.51 Explain the rationale for crew members to evaluate scene safety prior to entering. (A-2)
- 3-3.52 Serve as a model for others explaining how patient situations affect your evaluation of mechanism of injury or illness. (A-3)
- 3-3.53 Explain the importance of forming a general impression of the patient. (A-1)
- 3-3.54 Explain the value of performing an initial assessment. (A-2)
- 3-3.55 Demonstrate a caring attitude when performing an initial assessment. (A-3)
- 3-3.56 Attend to the feelings that patients with medical conditions might be experiencing. (A-1)
- 3-3.57 Value the need for maintaining a professional caring attitude when performing a focused history and physical examination. (A-3)
- 3-3.58 Explain the rationale for the feelings that these patients might be experiencing. (A-3)
- 3-3.59 Demonstrate a caring attitude when performing a detailed physical examination. (A-3)
- 3-3.60 Explain the value of performing an on-going assessment. (A-2)
- 3-3.61 Recognize and respect the feelings that patients might experience during assessment. (A-1)
- 3-3.62 Explain the value of trending assessment components to other health professionals who assume care of the patient. (A-2)

UNIT TERMINAL OBJECTIVE: Patient Assessment – Clinical Decision Making

At the end of this unit, the paramedic student will be able to apply a process of clinical decision making to use the assessment findings to help form a field impression.

COGNITIVE OBJECTIVES

At the end of this unit, the paramedic student will be able to:

- 3-4.1 Compare the factors influencing medical care in the out-of-hospital environment to other medical settings. (C-2)
- 3-4.2 Differentiate between critical life-threatening, potentially life-threatening, and non life-threatening patient presentations. (C-3)
- 3-4.3 Evaluate the benefits and shortfalls of protocols, standing orders and patient care algorithms. (C-3)
- 3-4.4 Define the components, stages and sequences of the critical thinking process for paramedics. (C-1)
- 3-4.5 Apply the fundamental elements of critical thinking for paramedics. (C-2)
- 3-4.6 Describe the effects of the “fight or flight” response and the positive and negative effects on a paramedic’s decision making. (C-1)
- 3-4.7 Summarize the “six Rs” of putting it all together: Read the patient, Read the scene, React, Reevaluate, Revise the management plan, Review performance. (C-1)

AFFECTIVE OBJECTIVES

At the end of this unit, the paramedic student will be able to:

- 3-4.8 Defend the position that clinical decision making is the cornerstone of effective paramedic practice. (A-3)
- 3-4.9 Practice facilitating behaviors when thinking under pressure. (A-1)

UNIT TERMINAL OBJECTIVE: Patient Assessment - Communications

- 3-5 At the completion of this unit, the paramedic student will be able to follow an accepted format for dissemination of patient information in verbal form, either in person or over the radio.

COGNITIVE OBJECTIVES

At the completion of this unit, the paramedic student will be able to:

- 3-5.1 Identify the importance of communications when providing EMS. (C-1)
- 3-5.2 Identify the role of verbal, written, and electronic communications in the provision of EMS. (C-1)
- 3-5.3 Describe the phases of communications necessary to complete a typical EMS event. (C-1)
- 3-5.4 Identify the importance of proper terminology when communicating during an EMS event. (C-1)
- 3-5.5 Identify the importance of proper verbal communications during an EMS event. (C-1)
- 3-5.6 List factors that impede effective verbal communications. (C-1)
- 3-5.7 List factors which enhance verbal communications. (C-1)
- 3-5.8 Identify the importance of proper written communications during an EMS event. (C-1)
- 3-5.9 List factors which impede effective written communications. (C-1)
- 3-5.10 List factors which enhance written communications. (C-1)
- 3-5.11 Recognize the legal status of written communications related to an EMS event. (C-1)
- 3-5.12 State the importance of data collection during an EMS event. (C-1)
- 3-5.13 Identify technology used to collect and exchange patient and/ or scene information electronically. (C-1)
- 3-5.14 Recognize the legal status of patient medical information exchanged electronically. (C-1)
- 3-5.15 Identify the components of the local EMS communications system and describe their function and use. (C-1)
- 3-5.16 Identify and differentiate among the following communications systems: (C-3)
 - a. Simplex
 - b. Multiplex
 - c. Duplex
 - d. Trunked
 - e. Digital communications
 - f. Cellular telephone
 - g. Facsimile
 - h. Computer
- 3-5.17 Identify the components of the local dispatch communications system and describe their function and use. (C-1)
- 3-5.18 Describe the functions and responsibilities of the Federal Communications Commission. (C-1)
- 3-5.19 Describe how an EMS dispatcher functions as an integral part of the EMS team. (C-1)
- 3-5.20 List appropriate information to be gathered by the Emergency Medical Dispatcher. (C-1)
- 3-5.21 Identify the role of Emergency Medical Dispatch in a typical EMS event. (C-1)
- 3-5.22 Identify the importance of pre-arrival instructions in a typical EMS event. (C-1)
- 3-5.23 Describe the purpose of verbal communication of patient information to the hospital. (C-1)
- 3-5.24 Describe information that should be included in patient assessment information verbally reported to medical direction. (C-1)
- 3-5.25 Diagram a basic model of communications. (C-3)
- 3-5.26 Organize a list of patient assessment information in the correct order for electronic transmission to medical direction according to the format used locally. (C-3)

AFFECTIVE OBJECTIVES

At the end of this unit, the paramedic student will be able to:

- 3-5.27 Show appreciation for proper terminology when describing a patient or patient condition.
(A-2)