AEMT Instructional Guidelines	
Preparatory	Applies fundamental knowledge of the EMS system, safety/well-being of the AEMT, and medical/legal and ethical issues to the provision of emergency care.
EMS Systems	**EMT Material PLUS:** **Simple depth, foundational breadth** • EMS Systems • History of EMS • Roles/ responsibilities/ professionalism of EMS personnel **Fundamental depth, foundational breadth** • Quality improvement • Patient safety
Research	**EMT Material PLUS:** **Simple depth, simple breadth** • Evidence-based decision making
NM EMS Licensing, NM EMS Bureau and Regional information	• NM EMS Licensure requirements • National Registry Certification requirements • Regions in New Mexico • NM Radio Communications • Santa Fe Control • Hospital Designation-Level 1-3 Trauma Centers/Stroke Center/Burn Center • NMEMSTARS. • Define Scope of Practice and understand the differences between NM and National scope. • Discuss and explain New Mexico state laws and regulations regarding the EMS system. • Discuss and explain various methods used to access the EMS system in your community. • Have a fundamental understanding of cultural diversity in the

	State of NM, for example government organizations, tribal reservations, government laboratories, border regions.
Workforce Safety and Wellness	**EMT Material PLUS:** **Fundamental depth, foundational breadth** • Standard safety precautions • Personal protective equipment • Stress management • Dealing with death and dying • Prevention of work related injuries • Lifting and moving patients • Disease transmission • Wellness principles **Lab:** (C/P)-Displays knowledge of body mechanics, lifting and carrying techniques, principles of moving patients, and demonstrates appropriate use of equipment. (NSC Lesson 1-6)
Documentation	**EMT Material PLUS:** **Complex depth, foundational breadth** • Principles of medical documentation and report writing C)-Accurately and concisely documents patient care encounters using standardized charting methodology. (NSC Lesson 3-8)
EMS System Communication	**EMT Material PLUS:** Fundamental depth, foundational breadth • EMS communication system • Communication with other health care professionals • Team communication and dynamics

Therapeutic Communication	**EMT Material PLUS:** **Simple depth, simple breadth** • Principles of communicating with patients in a manner that achieves a positive relationship C/A)-Demonstrates effective verbal communication, interpersonal communication, and therapeutic communication including patients of special population groups, culturally diverse populations and with communication impairment. (NSC Lesson 3-7) • Adjusting communication strategies for age, stage of development, patients with special needs, and differing cultures **Fundamental depth, foundational breadth** • Interviewing techniques • Verbal defusing strategies • Family presence issues **EMT Material PLUS:** **Simple depth, simple breadth** • Principles of communicating with patients in a manner that achieves a positive relationship • Dealing with difficult patient
Medical/Legal and Ethics	**EMT Material PLUS:** **Fundamental depth, foundational breadth** •Consent/refusal of care •Confidentiality •Advanced directives •Tort and criminal actions •Evidence preservation •Statutory responsibilities •Mandatory reporting •Ethical principles/moral obligations
NM Specific Medical/Legal and Ethics	1. Identify the New Mexico agency responsible for EMS related training, quality assurance, and curriculum development of the AEMT program. 2. Identify the agencies that are responsible for administering

	examinations and also issues the NREMT certification and New Mexico state AEMT license. 3. List the training requirements and the length of the New Mexico AEMT course. 4. Discuss and explain the details of initial licensing and recertification process including time frames. 5. List the EMS regional offices in New Mexico and discuss their functions. 6. Identify and discuss the types of consent and the methods for obtaining each. 7. Identify how to assess the competency of a patient who is refusing care and the legal implications of the patient who refuses care. 8. Define standard of care and how it relates to the AEMT 9. Define abandonment and discuss the implications of abandonment. 10. Define negligence and identify the necessary components for a successful negligence lawsuit. 11. State the conditions necessary for the AEMT to have a duty to act. 12. Explain the importance and legality of patient confidentiality. 13. Discuss the actions an AEMT should take to preserve a crime scene. 14. Give the purpose of the Good Samaritan Statute, whom it protects, and what actions would negate protection of the Good Samaritan Statute. 15. List the incidents that an AEMT is required by law to report to the authorities. 16. Explain the New Mexico Emergency Transport Act of 1993. Discuss when and how it may be utilized. 17. Describe the Tort Claims Act and what it provides to the AEMT 18. Define the terms and how they relate to the AEMT • Assault • Battery • False imprisonment • Slander • Libel 19. Define Do Not Resuscitate (DNR) orders and explain the significance to EMS. 20. Distinguish which patients a DNR is designed to address, and the resuscitative measures that may be withheld. 21. List the treatment strategies not affected by a New Mexico DNR. 22. List the settings in which a New Mexico DNR applies. 23. Indicate who may execute a New Mexico DNR. Discuss the steps necessary for execution. 24. Identify who may initiate a New Mexico DNR if the patient is unable to respond or is a minor. 25. State what would make a New Mexico DNR invalid and what can

	causes it to be revoked, and who may revoke it. 26. Identify the situations that would allow an AEMT to terminate resuscitative efforts or withhold care. 27. Identify the benefits and usage of advanced directives. 28. Identify the roles and responsibilities of medical control and how it relates to the AEMT. 29. Explain the importance of written documentation and the legal implications.
Pharmacology: **Medication Administration** **Emergency Medications**	Applies to patient assessment and management fundamental knowledge of the medications carried by AEMTs that may be administered to a patient during an emergency. **EMT Material PLUS:** **Fundamental depth, foundation breadth** • Medication safety • Medication legislation • Naming • Classifications • Storage and security • Autonomic pharmacology • Metabolism and excretion • Mechanism of action • Medication response relationships • Medication interactions • Toxicity **EMT Material PLUS:** **Fundamental depth, foundational breadth** • Routes of administration • Within the scope of practice of the AEMT, administer medications to a patient **EMT Material PLUS:** **Fundamental depth, foundational breadth** Within the scope of practice of the AEMT • Names

	• Actions • Indications • Contraindications • Complications • Routes of administration • Side effects • Interactions • Dosages for the medications administered (C)-Perform medication calculations. (NSC Lesson 4-1) (P)-Administer medications through routes defined by the NM Scope of Practice for the AEMT level utilizing safe administration and disposal techniques. (NSC Lesson 4-1)
NM Pharmacology	The student will demonstrate basic knowledge of pharmacology, providing a foundation for the administration of medications given by AEMT and those used to assist a patient with self-administration regarding the following medications in the NM EMS Scope of practice : allowable drugs: oral glucose preparations; aspirin PO for adults with suspected cardiac chest pain; activated charcoal PO; acetaminophen PO in pediatric patients with fever; IM auto injection of the following agents for treatment of chemical or nerve agent exposure: atropine, pralidoxime; albuterol (including isomers) via inhaled administration; ipratropium, via inhaled administration in combination with or after albuterol administration; naloxone; I.V. fluid therapy (except blood or blood products); dextrose;

	epinephrine (1:1000), SQ or IM (including auto injector) for anaphylaxis and known asthmatics in severe respiratory distress (no single dose greater than 0.3 cc); epinephrine (1:10,000) in pulseless cardiac arrest for both adult and pediatric patients; epinephrine may be administered via the endotracheal tube in accordance with most current ACLS and PALS guidelines; nitroglycerin (sublingual) for chest pain associated with suspected acute coronary syndromes; must have intravenous access established prior to administration or approval of online medical control if IV access is unavailable; morphine, fentanyl, or dilaudid for use in pain control with approval of on-line medical control; diphenhydramine for allergic reactions or dystonic reactions; glucagon, to treat hypoglycemia in diabetic patients when intravenous access is not obtainable; anti-emetic agents, for use as an anti-emetic only; methylprednisolone for reactive airway disease/acute asthma exacerbation; Hydroxycobalamine; lidocaine (2%, preservative and epinephrine free for IV use) for administration into the intraosseous space on pain responsive adult patients while receiving intraosseous fluids or medications; patient's own medication that may be administered: bronchodilators using pre-measured or metered dose inhalation device; sublingual nitroglycerin for unrelieved chest pain; must have intravenous access established prior to administration or approval of online medical control if IV access is unavailable;

	glucagon; situations may arise involving patients with uncommon conditions requiring specific out of hospital administered medications or procedures; family members or the designated caregiver trained and knowledgeable of the special needs of the patient should be recognized as the expert regarding the care of the patient; EMS can offer assistance in airway management appropriate to their level of licensure, IV access, and the administration of the patient's prescribed medications where appropriate only if the medication is in the EMS provider's scope of practice; online (direct contact) medical control communication must be established with the medical control physician approving the intervention; EMS services are not expected to provide the prescribed medications for these special needs patients; drugs allowed for monitoring during interfacility transport: potassium; intermediate EMT's may monitor IV solutions that contain potassium during transport (not to exceed 20 mEq/1000cc or more than 10 mEq/hour); antibiotics and other anti-infectives utilizing an infusion pump; intermediate EMT's may monitor antibiotic or other anti-infective agents, provided a hospital initiated infusion has been running for a minimum of 30 minutes prior to the intermediate initiating the transfer, and the intermediate EMT is aware of reactions for which to monitor and the appropriate action to take before assuming responsibility for patient care; immunizations and biologicals: administration of immunizations, vaccines, biologicals, and TB skin testing is authorized under the following circumstances: to the general public as part of a department of health initiative or emergency
Airway Management, Respiration and Artificial	Applies knowledge (fundamental depth, foundational breadth) of general anatomy and physiology to patient assessment and management in order to assure a patent airway, adequate mechanical ventilation, and respiration for patients of all ages.

Ventilation	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Within the scope of practice of the AEMT • Airway anatomy • Airway assessment • Techniques of assuring a patent airway C)-Identify the need to secure an airway using advanced airways as defined by NM Scope of Practice. The student will demonstrate basic knowledge of anatomy and physiology, how to maintain an open airway, pulmonary resuscitation, variations for infants and children and patients with laryngectomies. The use of airways, suction equipment, oxygen equipment and delivery systems, and resuscitation devices including • basic airway management; • use of basic adjunctive airway equipment; • suctioning; • obstructed airway management; • oxygen; • The following require service medical director approval: • allowable skills: • mechanical positive pressure ventilation; • use of multi-lumen, supraglottic, and laryngeal airway devices (examples: PTLA, • combi-tube, king airway, LMA) to include gastric suctioning; CPAP, ETCO2 **Lab:** (P)-Demonstrate the ability to open and maintain patent airways through the use of airway adjuncts, suction equipment, oxygen equipment, delivery systems and ventilatory devices such as BVM and any other devices as defined by the NM Scope of Practice for the AEMT level, and resuscitation devices including variations for infants and children and patients with laryngectomies. (NSC Lesson 2-2) P)-Demonstrate the ability to utilize airway monitoring devices as defined by the NM Scope of Practice for the AEMT level.

Respiration	**EMT Material Plus:** **Complex depth, foundational breadth** •Anatomy of the respiratory system **Fundamental depth, comprehensive breadth** •Physiology and pathophysiology of respiration • Pulmonary ventilation • Oxygenation • Respiration • External • Internal • Cellular •Assessment and management of adequate and inadequate respiration •Supplemental oxygen therapy
Artificial Ventilation	**EMT Material PLUS:** **Complex depth, foundational breadth** Assessment and management of adequate and inadequate ventilation •Artificial ventilation •Minute ventilation •Alveolar ventilation •Effect of artificial ventilation on cardiac output
Patient Assessment **Scene Size-Up**	Applies scene information and patient assessment findings (scene size up, primary and secondary assessment, patient history, and reassessment) to guide emergency management. **Fundamental depth, foundational breadth** • Scene management • Multiple patient situations **EMT Material PLUS:** **Fundamental depth, foundational breadth** • Scene management • Multiple patient situations

Primary Assessment	**EMT Material PLUS:** **Fundamental depth, foundational breadth** • Primary assessment for all patient situations • Initial general impression • Level of consciousness • ABCs • Identifying life threats • Assessment of vital functions • Integration of treatment/ procedures needed to preserve life
History Taking	**EMT Material PLUS:** • Fundamental depth, foundational breadth • Investigation of the chief complaint • Mechanism of injury/nature of illness • Past medical history • Associated signs and symptoms • Pertinent negatives
Secondary Assessment	**EMT Material PLUS:** **Fundamental depth, foundational breadth** • Techniques of physical examination • Respiratory system • Presence of breath sounds • Cardiovascular system • Neurological system • Musculoskeletal system • All anatomical region **Complex depth, foundational breadth** Assessment of •Lung sounds **Lab:** (C/P)-Demonstrates the ability to properly perform the initial assessment. The student will form a general impression, determine responsiveness, and perform assessment of the airway, breathing and circulation to include external blood loss. Students will also discuss how

	to determine priorities of patient care. (NSC Lesson 3-2) (C/P)-Demonstrate the ability to accurately obtain and record a patient's vital signs and a SAMPLE history. (NSC Lesson 1-5)
Monitoring Devices **NM Specific :** **Reassessment**	**Simple depth, simple breadth** Within the scope of practice of the AEMT : • Obtaining and using information from patient • monitoring devices including (but not limited to) • Pulse oximetry • Non-invasive blood pressure • Blood Glucose determination • Glucometry and any other point of care testing as approved by the state of NM and local medical direction. • Capnometry placement and monitoring • 12 lead EKG acquisition and transmission **EMT Material PLUS:** **Fundamental depth, foundational breadth** •how and when to perform a reassessment for all patient situations Lab: (C/P)-Displays knowledge and skills required to continue the assessment and treatment of a patient. (NSC Lesson 3-5)
Anatomy and Physiology	Integrates complex knowledge of the anatomy and physiology of the airway, respiratory and circulatory systems to the practice of EMS. **Lab:** (C/P)-Demonstrate the ability to identify major bones and organs and

	anatomical landmarks on a patient. (NSC Lesson 1-4)
Medical Terminology	Uses foundational anatomical and medical terms and abbreviations in written and oral communication with colleagues and other health care professionals.
Pathophysiology	Applies comprehensive knowledge of the pathophysiology of respiration and perfusion to patient assessment and management.
Life Span Development	Applies fundamental knowledge of life span development to patient assessment and management.
Public Health	Uses simple knowledge of the principles of the role of EMS during public health emergencies
Medicine	Applies fundamental knowledge to provide basic emergency care and selected advanced Emergency care and transportation based on assessment findings for an acutely ill patient.
Medical Overview	**EMT Material PLUS:** Fundamental depth, foundational breadth Pathophysiology, assessment, and management of a medical complaints to include • Transport mode • Destination decisions (A/C/P)-Describes and demonstrates the method of assessing patients with medical complaints or signs and symptoms. This lesson will also serve as an introduction to the care of the medical patient. (NSC Lesson 3-4) (C/P)-Demonstrates the ability to identify and manage individual system and multi-system related medical emergencies including respiratory, cardiovascular, endocrine, neurological, and behavioral. (NSC Lessons 4-2 through 4-5, 4-8)
Neurology	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment and management of • Stroke/ transient ischemic attack • Status epilepticus • Headache **Complex depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment and management of •Seizure

Abdominal and Gastrointestinal Disorders	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Acute and chronic gastrointestinal hemorrhage **Simple depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Peritonitis • Ulcerative diseases
Immunology	**EMT Material PLUS:** **Complex depth, comprehensive breadth** Anatomy, physiology, pathophysiology, assessment, and management of hypersensitivity disorders and/or emergencies • Allergic and Anaphylactic reactions
Infectious Diseases	**EMT Material PLUS:** **Simple depth, simple breadth** Assessment and management of • A patient who may have an infectious disease • How to decontaminate the ambulance and equipment after treating a patient **EMT Material PLUS:** **Fundamental depth, foundational breadth** Assessment and management of •A patient who may be infected with a blood borne pathogen O HIV O Hepatitis B •Antibiotic resistant infections •Current infectious diseases prevalent in the community
Endocrine Disorders	**EMT Material PLUS:** **Complex depth , foundational breadth** Anatomy, physiology, pathophysiology, assessment and management of • Acute diabetic emergencies
Psychiatric	**EMT Material PLUS:** **Simple depth, simple breadth** • Basic principles of the mental health system **Fundamental depth, foundational breadth**

	Assessment and management of • Acute psychosis • Suicidal/risk • Agitated delirium
Cardiovascular	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Aortic aneurysm/dissection • Thromboembolism **Complex depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of •Acute coronary syndrome • Angina pectoris • Myocardial infarction **Fundamental depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Heart failure • Hypertensive emergencies
Toxicology	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Inhaled poisons • Ingested poisons • Injected poisons • Absorbed poisons • Alcohol intoxication and withdrawal **Fundamental depth, foundational breadth** •Opiate toxidrome
Respiratory	**EMT Material PLUS:** **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Epiglottitis • Spontaneous pneumothorax

	• Pulmonary edema • Chronic obstructive pulmonary disease • Environmental/industrial exposure • Toxic gas **Complex depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment, and management of •Asthma •Obstructive/restrictive disease •Pneumonia **Simple depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Pertussis • Cystic fibrosis • Pulmonary embolism • Viral respiratory infections
Hematology	**Simple depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Clotting disorders **Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment and management of •Sickle cell crisis
Genitourinary/Renal	**EMT Material PLUS:** **Simple depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of • Complications related to o Urinary catheter management (not insertion) **Fundamental depth, simple breadth** Anatomy, physiology, pathophysiology, assessment, and management of •Complications related to renal dialysis •Kidney stones

Gynecology	**EMT Material Plus:** **Fundamental depth, foundational breadth** Anatomy, physiology, assessment findings, and management of • Vaginal bleeding • Sexual assault (to include appropriate emotional support) Simple depth, simple (C/P)-Demonstrates the ability to identify and manage Obstetrics/Gynecology emergencies. (NSC Lesson 4-9)
Non-Traumatic Musculoskeletal Disorders	**Fundamental depth, foundational breadth** Anatomy, physiology, pathophysiology, assessment and management of • Non-traumatic fractures
Diseases of the Eyes, Ears, Nose, and Throat	**Simple depth, simple breadth** Recognition and management of • Nose bleed
Shock and Resuscitation	Applies fundamental knowledge to provide basic and selected advanced emergency care and transportation based on assessment findings for a patient in shock, respiratory failure or arrest, cardiac failure or arrest, and post resuscitation management. (C/P)-Recognize a patient with internal and external bleeding, signs and symptoms of shock (hypo perfusion), and provide emergency medical care of shock (hypo perfusion) and external bleeding control to include skills approved by the NM Scope of Practice for the AEMT level. (NSC Lesson 5-1)
Trauma	Applies fundamental knowledge to provide basic and selected advanced emergency care and transportation based on assessment findings for an acutely injured patient.
Trauma Overview	**Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of the trauma patient • Trauma scoring

Bleeding	• Rapid transport and destination issues • Transport mode (C/P)-Describes and demonstrates the method of assessing patients' traumatic injuries. A rapid approach to the trauma patient will be the focus of this lesson. (NSC Lesson 3-3) **EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of • Bleeding **Complex depth, comprehensive breadth** •Fluid resuscitation
Chest Trauma	**EMT Material Plus:** **Fundamental depth, simple breadth** Pathophysiology, assessment and management • Blunt versus penetrating mechanisms **Fundamental depth, foundational breadth** Pathophysiology, assessment and management of •Traumatic aortic disruption •Pulmonary contusion •Blunt cardiac injury •Hemothorax •Pneumothorax O Open O Simple O Tension •Cardiac tamponade •Rib fractures •Flail chest •Commotio cordis •Traumatic asphyxia

Abdominal and Genitourinary Trauma	**EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of •Vascular injury •Solid and hollow organs injuries •Blunt versus penetrating mechanisms •Evisceration •Retroperitoneal injuries •Injuries to the external genitalia •Vaginal bleeding due to trauma •Sexual assault
Orthopedic Trauma	**EMT Material Plus:** Pathophysiology, assessment, and management of **Fundamental depth, foundational breadth** • Upper and lower extremity orthopedic trauma • Open fractures • Closed fractures • Dislocations • Sprains/strains **Simple depth, simple breadth** •Compartment syndrome **Complex depth, foundational breadth** •Pelvic fractures •Amputations/replantation
Soft Tissue Trauma	**EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management • Wounds o Avulsions o Bite wounds o Lacerations o Puncture wounds o Incisions • Burns o Electrical o Chemical o Thermal o Radiation

	Fundamental depth, simple breadth Pathophysiology, assessment, and management • Crush syndrome P)-Demonstrate the ability to perform all skills associated with managing and treating soft-tissue, burns and musculoskeletal injuries. (NSC Lesson 5-2, 5-3)
Head, Facial, Neck, and Spine trauma	**EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of • Penetrating neck trauma • Spine trauma **Simple depth, simple breadth** Pathophysiology, assessment, and management of • Skull fractures • Foreign bodies in the eyes • Dental trauma **Complex depth, foundational breadth** Pathophysiology, assessment, and management of •Facial fractures •Laryngeotracheal injuries (P)-Demonstrate the ability to manage and treat injuries to the spine and head, including identification of mechanism of injury, signs and symptoms of injury, and assessment. Provide appropriate emergency medical care, including spinal motion restriction, helmet removal and special population considerations. (NSC Lesson 5-4)
Nervous System Trauma	**Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of

	• Spinal cord injury **Complex depth, foundational breadth** Pathophysiology, assessment, and management of •Traumatic brain injury
Special Considerations in Trauma	**EMT Material Plus:** **Complex depth, comprehensive breadth** Pathophysiology, assessment, and management of trauma in the • Pregnant patient • Pediatric patient • Geriatric patient • Cognitively impaired patient
Environmental Emergencies	**EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of • Near drowning • Temperature-related illness • Bites and envenomations • Dysbarism o High-altitude o Diving injuries • Electrical injury • Radiation exposure (C/P)-Demonstrates the ability to identify and manage poisoning, overdose and environmental emergencies. (NSC Lessons 4-6, 4-7)
Multi-System Trauma	**EMT Material Plus:** **Fundamental depth, foundational breadth** Pathophysiology, assessment, and management of • Blast injuries **Complex depth, foundational breadth** Pathophysiology, assessment and management of •Multi-system trauma
Special Patient Populations	Applies a fundamental knowledge of growth, development, and aging and assessment findings to provide basic and selected advanced

	emergency care and transportation for a patient with special needs. (P)-Demonstrates the ability to provide emergency medical care for at risk populations to include neonate, infant, children, bariatric, technology dependent and geriatric patients. (NSC Lesson 6-2)
Obstetrics	**EMT Material Plus:** **Fundamental depth, foundational breadth** • Anatomy and physiology of normal pregnancy • Pathophysiology of complications of pregnancy • Assessment of the pregnant patient • Management of o Normal delivery o Abnormal delivery ▯ Nuchal cord ▯ Prolapsed cord ▯ Breech delivery o Third trimester bleeding ▯ Placenta Previa ▯ Abruptio placenta o Spontaneous abortion/miscarriage o Ectopic pregnancy o Preeclampsia/Eclampsia
Neonatal care	**EMT Material Plus:** **Fundamental depth, foundational breadth** Assessment and management • Newborn • Neonatal resuscitation
Pediatrics	**EMT Material Plus**: **Fundamental depth, foundational breadth** Age-related assessment findings, age-related, and developmental stage related assessment and treatment modifications for pediatric specific major diseases and/or emergencies • Upper airway obstruction • Lower airway reactive disease • Respiratory distress/failure/arrest • Shock • Seizures • Sudden Infant Death Syndrome • Gastrointestinal disease

Geriatrics	**EMT Material Plus:** **Fundamental depth, foundational breadth** Changes associated with aging, psychosocial aspects of aging and age-related assessment and treatment modifications for the major or common geriatric diseases and/or emergencies • Cardiovascular diseases • Respiratory diseases • Neurological diseases • Endocrine diseases • Alzheimer's • Dementia **Complex depth, foundational breadth** •Fluid resuscitation in the elderly
Patients with Special Challenges	**EMT Material Plus:** **Fundamental depth, foundational breadth** Healthcare implications of • Abuse • Neglect • Homelessness • Poverty • Bariatric • Technology dependent • Hospice/ terminally ill • Tracheostomy care/dysfunction • Homecare • Sensory deficit/loss • Developmental disability
EMS Operations	Knowledge of operational roles and responsibilities to ensure safe patient, public, and personnel safety Apply fundamental understanding of rural versus urban EMS operations
Principles of Safely Operating a Ground Ambulance	**EMT Material Plus:** **Simple depth, foundational breadth** • Risks and responsibilities of transport

Incident Management	**EMT Material Plus:** **Fundamental depth, foundational breadth** • Establish and work within the incident management system
Multiple Casualty Incidents	**EMT Material Plus:** **Simple depth, foundational** breadth • Triage • Performing • Re-Triage • Destination Decisions • Post Traumatic and Cumulative Stress
Air Medical	**Simple depth, simple breadth** • Safe air medical operations • Criteria for utilizing air medical response
Vehicle Extrication	**Simple depth, simple breadth** • Safe vehicle extrication • Use of simple hand tools
Hazardous Materials Awareness	**Simple depth, simple breadth** • Risks and responsibilities of operating in a cold zone at a hazardous material or other special incident
Mass Casualty Incidents due to Terrorism and Disaster (this section subject to ongoing collective and cooperative review and input from all stakeholders including the Department of Transportation, Department of Homeland Security and the Department of Health and Human Services)	**Simple depth, simple breadth** • Risks and responsibilities of operating on the scene of a natural or man-made disaster (C/P)-Display the ability to recognize, declare, integrate and operate within hazardous material incidents, incident management systems, mass casualty situations, and perform basic triage. (NSC Lesson 7-3).

Clinical Behavior and Judgment **Assessment**	Perform a basic history and physical examination to identify acute complaints and monitor changes. Identify the actual and potential complaints of emergency patients.
Therapeutic communication and cultural competency	Communicate in a culturally sensitive manner. Fundamental understanding of various cultural diversities that exist in State of NM. (Such as: Reservations; government research laboratories; border regions; and religious/ethnic groups.)
Psychomotor Skills	Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND state Scope of Practice at this level. **Airway and Breathing** • Nasopharyngeal airway • Positive pressure ventilation • Manually-triggered ventilators • Automatic transport ventilators • Supplemental oxygen therapy • Humidifiers • Partial-rebreather mask • Venturi mask assessment •Airways not intended for insertion into the trachea •Esophageal-tracheal •Multi-lumen airway •Tracheal-bronchial suctioning of an already intubated patient **Assessment** • Pulse oximetry • Automatic B/P • Blood glucose monitor **Medical/Cardiac Care** • Mechanical CPR • Assisted complicated delivery

	Trauma care • Spinal immobilization • Cervical collars • Seated • Longboard • Rapid extrication • Splinting • Extremity • Traction • PASG • Mechanical patient restraint **Pharmacologic interventions** • Assist patients in taking their own prescribed medications • Administration of OTC medications with medical oversight • Oral glucose for hypoglycemia • Aspirin for chest pain medical/cardiac care •Establish and maintain peripheral intravenous access •Establish and maintain intraosseous access in pediatric patient •Administer (nonmedicated) intravenous fluid therapy •Sublingual nitroglycerin (chest pain) •Subcutaneous or intramuscular epinephrine (anaphylaxis) •Glucagon (hypoglycemia) •Intravenous 50% dextrose (hypoglycemia) •Inhaled beta agonists (wheezing) •Intravenous narcotic antagonist (narcotic overdose) •Nitrous oxide (pain
Professionalism	Demonstrate professional behavior including: but not limited to, integrity, empathy, self-motivation, appearance/personal hygiene, self-confidence, communications, time management, teamwork/ diplomacy, respect, patient advocacy, and careful delivery of service.
Decision Making	Initiates basic and selected advanced interventions based on assessment findings intended to mitigate the emergency and provide limited symptom relief while providing access to definitive care
Record Keeping	Report and document assessment data and interventions. (C/P)-Recognize the importance of trending, recording changes in the

	patient's condition, and reassessment of interventions to assure appropriate care. (NSC Lesson 3-6)
Patient Complaints	Perform a patient assessment and provide prehospital emergency care and transportation for patient complaints: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, anxiety, apnea, ataxia, back pain, behavioral emergency, bleeding, cardiac arrest, cardiac rhythm disturbances, chest pain, constipation, cyanosis, dehydration, diarrhea, dizziness/vertigo, dysphasia, dyspnea, edema, eye pain, fatigue, fever, GI bleeding, headache, hematuria, hemoptysis, hypertension, hypotension, joint pain/swelling, multiple trauma, nausea/vomiting, pain, paralysis, pediatric crying/fussiness, poisoning, rash, rectal pain, shock, sore throat, stridor/drooling, syncope, urinary retention, visual disturbances, weakness, and wheezing. ****The patient encounters are preferred to be live patient encounters, or standardized patients as defined the National EMS Education standards are acceptable. If the event that the above are not available, use of mannequins at a 2 to 1 rations is acceptable. For example, for every 1 live patient encounter recommended, 2 mannequin based encounters are acceptable
Scene Leadership	Serve as an EMS team leader of an emergency call. (P)-Demonstrate the ability to function effectively in all phases of an ambulance call. (NSC Lesson 7-2) ****The patient encounters are preferred to be live patient encounters, or standardized patients as defined the National EMS Education standards are acceptable. If the event that the above are not available, use of mannequins at a 2 to 1 rations is acceptable. For example, for every 1 live patient encounter recommended, 2 mannequin based encounters are acceptable
Scene Safety	Ensure the safety of the rescuer and others during an emergency (C)-Demonstrate the ability to evaluate a scene for potential hazards, determine by the number of patients if additional help is necessary, and evaluate mechanism of injury or nature of illness. (NSC Lesson 3-1) **Lab:** (P)-scene safety, body substance isolation (BSI), personal protection

	equipment (PPE), and safety precautions that can be taken prior to performing the role of an AEMT. (NSC Lesson 1-2) C)-Recognize the importance of the dynamic nature of the scene and impact on provider safety. (NSC Lesson 3-6)
Hospital/Clinical Experience	Students should observe emergency department operations for a period of time sufficient to gain an appreciation for the continuum of care Students must perform ten patient assessments. These can be performed in an emergency department, ambulance, clinic, nursing home, doctor's office, etc. or on standardized patients if clinical settings are not available. ??????? The student must demonstrate the ability to safely administer medications (the student should safely, and while performing all steps of each procedure, properly administer medications at least 15 times to live patient). The student must demonstrate the ability to safely gain vascular access (the student should safely, and while performing all steps of each procedure, successfully access the venous circulation at least 25 times on live patients of various age groups). The student should demonstrate the ability to effectively ventilate unintubated patients of all age groups (the student should effectively, and while performing all steps of each procedure, ventilate at least 20 live patients of various age groups) The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for patients with chest pain. The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for patients with respiratory distress. The student must demonstrate the ability to perform an adequate assessment and formulate and implement a treatment plan for patients with altered mental status. The student must demonstrate the ability to perform an adequate assessment on pediatric, adult and geriatric patients.

	****The patient encounters are preferred to be live patient encounters, or standardized patients as defined the National EMS Education standards are acceptable. If the event that the above are not available, use of mannequins at a 2 to 1 rations is acceptable. For example, for every 1 live patient encounter recommended, 2 mannequin based encounters are acceptable
Field Experience	The student must participate in and document team leadership in a field experience approved by the medical director and program director.

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