

EMR Instructional Guidelines	
<p data-bbox="188 317 350 348">Preparatory</p> <p data-bbox="188 512 367 543">EMS Systems</p> <p data-bbox="188 863 310 894">Research</p> <p data-bbox="188 1094 440 1272">NM EMS Licensing, NM EMS Bureau and Regional information</p>	<p data-bbox="488 317 1430 422">Uses simple knowledge of the EMS system, safety/well-being of the EMR, medical/legal issues at the scene of an emergency while awaiting a higher level of care.</p> <ul data-bbox="537 474 1325 663" style="list-style-type: none"> • Simple depth, simple breadth • Roles/ responsibilities/ professionalism of EMS personnel • Quality improvement • Patient safety • Quality improvement <p data-bbox="488 863 878 894">Simple depth, simple breadth</p> <ul data-bbox="537 905 1000 978" style="list-style-type: none"> • Impact of research on EMR care • Data collection <ul data-bbox="537 1104 1382 1776" style="list-style-type: none"> • 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.

<p>Workforce Safety and Wellness</p>	<p>Fundamental depth, foundational breadth</p> <ul style="list-style-type: none"> • Simple depth, simple breadth • Standard safety precautions • Personal protective equipment • Stress management • Dealing with death and dying • Prevention of response- related injuries • Lifting and moving patient <p>Lab: (C/P)-Displays knowledge of body mechanics, lifting and carrying techniques, principles of moving patients, and demonstrates appropriate use of equipment.</p>
<p>Documentation</p>	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Recording patient finding <p>(C)-Accurately and concisely documents patient care encounters using standardized charting methodology.</p>
<p>EMS System Communication</p>	<p>Simple depth, simple breadth</p> <p>Communication needed to</p> <ul style="list-style-type: none"> • Call for resources • Transfer care of the patient • Interact within the team structure
<p>Therapeutic Communication</p>	<p>Simple depth, simple breadth</p> <p>Principles of communicating with patients in a manner that achieves a positive relationship</p> <ul style="list-style-type: none"> • Interviewing technique

	<p>(C/A)-Demonstrates effective verbal communication, interpersonal communication, and therapeutic communication including patients of special population groups, culturally diverse populations and with communication impairment.</p> <ul style="list-style-type: none">• Adjusting communication strategies for age, stage of development, patients with special needs, and differing cultures
<p>Medical/Legal and Ethics</p> <p>NM Specific Medical/Legal and Ethics</p>	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none">• Consent/refusal of care• Confidentiality• Advanced directive<ul style="list-style-type: none">• Tort and criminal action• Evidence preservation• Statutory responsibilities• Mandatory reporting• Ethical principles/moral obligations• End-of life issues <p>1. Identify the New Mexico agency responsible for EMS related training, quality assurance, and curriculum development of the EMR program.</p> <p>2. Identify the agencies that are responsible for administering examinations and also issues the NREMT certification and New Mexico state EMR license.</p> <p>3. List the training requirements and the length of the New Mexico EMR course.</p> <p>4. Discuss and explain the details of initial licensing and recertification process including time frames.</p> <p>5. List the EMS regional offices in New Mexico and discuss their functions.</p> <p>6. Identify and discuss the types of consent and the methods for obtaining each.</p> <p>7. Identify how to assess the competency of a patient who is refusing care and the legal implications of the patient who refuses care.</p> <p>8. Define standard of care and how it relates to the EMR.</p> <p>9. Define abandonment and discuss the implications of abandonment.</p> <p>10. Define negligence and identify the necessary components for a successful negligence lawsuit.</p> <p>11. State the conditions necessary for the EMR to have a duty to act.</p> <p>12. Explain the importance and legality of patient confidentiality.</p> <p>13. Discuss the actions an EMR should take to preserve a crime scene.</p>

	<p>14. Give the purpose of the Good Samaritan Statute, whom it protects, and what actions would negate protection of the Good Samaritan Statute.</p> <p>15. List the incidents that an EMR is required by law to report to the authorities.</p> <p>16. Explain the New Mexico Emergency Transport Act of 1993. Discuss when and how it may be utilized.</p> <p>17. Describe the Tort Claims Act and what it provides to the EMR.</p> <p>18. Define the terms and how they relate to the EMR.</p> <ul style="list-style-type: none">• Assault• Battery• False imprisonment• Slander• Libel <p>19. Define Do Not Resuscitate (DNR) orders and explain the significance to EMS.</p> <p>20. Distinguish which patients a DNR is designed to address, and the resuscitative measures that may be withheld.</p> <p>21. List the treatment strategies not affected by a New Mexico DNR.</p> <p>22. List the settings in which a New Mexico DNR applies.</p> <p>23. Indicate who may execute a New Mexico DNR. Discuss the steps necessary for execution.</p> <p>24. Identify who may initiate a New Mexico DNR if the patient is unable to respond or is a minor.</p> <p>25. State what would make a New Mexico DNR invalid and what can cause it to be revoked, and who may revoke it.</p> <p>26. Identify the situations that would allow an EMR to terminate resuscitative efforts or withhold care.</p> <p>27. Identify the benefits and usage of advanced directives.</p> <p>28. Identify the roles and responsibilities of medical control and how it relates to the EMR.</p> <p>29. Explain the importance of written documentation and the legal implications.</p>
<p>Pharmacology:</p> <p>Medication</p>	<p>Applies fundamental knowledge of the medications that the EMR may assist/administer to a patient during an emergency.</p> <p>Simple depth, simple breadth</p> <ul style="list-style-type: none">• Medication safety• Kinds of medications used during an emergency

<p>Administration</p>	<p>Simple depth, simple breadth Within the scope of practice of the EMR, how to Medication Administration</p> <ul style="list-style-type: none"> • Self-administer medication • Peer-administer medication
<p>Emergency Medications</p>	<p>Simple depth, simple breadth Within the scope of practice of the EMR</p> <ul style="list-style-type: none"> • Names • Effects • Indications • Routes of administration • Dosages for the medications administered <p>(C)-Perform medication calculations.</p> <p>(P)-Administer medications through routes defined by the NM Scope of Practice for the EMR level utilizing safe administration and disposal techniques.</p>
<p>NM Pharmacology</p>	<p>The student will demonstrate basic knowledge of pharmacology, providing a foundation for the administration of medications given by EMR and those used to assist a patient with self-administration regarding the following medications in the NM EMS Scope of practice :</p> <p>allowable drugs:</p> <p>oral glucose preparations;</p> <p>(ii)</p>

	<p>aspirin PO for adults with suspected cardiac chest pain; (iii) atropine and pralidoxime via IM auto-injection for treatment of chemical or nerve agent exposure; (iv) albuterol (including isomers) via inhaled administration; (v) naloxone via nasal mucosal atomizer (MA) or IM delivery system; (vi) epinephrine via auto-injection device; (d) patient’s own medication that may be administered: (i) bronchodilators using pre-measured or metered dose inhalation device;</p>
<p>Airway Management, Respiration and Artificial Ventilation</p>	<p>Applies knowledge (fundamental depth, foundational breadth) of general anatomy and physiology to assure a patent airway, adequate mechanical ventilation, and respiration while awaiting additional EMS response for patients of all ages.</p> <p>Fundamental depth, simple breadth Within the scope of practice of the EMR Airway Management</p> <ul style="list-style-type: none"> • Airway anatomy • Airway assessment • Techniques of assuring a patent airway <p>(C)-Identify the need to secure an airway using advanced airways as defined by NM Scope of Practice. Within the scope of practice of the EMR</p> <ul style="list-style-type: none"> • Airway anatomy • Airway assessment • Techniques of assuring a patent airway <p>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:</p>

	<ul style="list-style-type: none"> • basic airway management; • use of basic adjunctive airway equipment; • suctioning; • obstructed airway management; • oxygen; <p>The following require service medical director approval:</p> <ul style="list-style-type: none"> • allowable skills • mechanical positive pressure ventilation utilizing a device that may have controls for rate, tidal volume, FiO₂, and pressure relief/alarm and does not have multiple automatic ventilation modes; • insertion of laryngeal and supraglottic airway devices (examples: king airway, LMA), excluding multi-lumen airways); <p>Lab:</p> <p>(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 EMR-level, and resuscitation devices including variations for infants and children and patients with laryngectomies.</p> <p>(P)-Demonstrate the ability to utilize airway monitoring devices as defined by the NM Scope of Practice for the EMR level.</p>
Artificial Ventilation	<p>Fundamental depth, simple breadth</p> <p>Assessment and management of adequate and inadequate ventilation</p> <ul style="list-style-type: none"> • Artificial ventilation • Minute ventilation • Alveolar ventilation • Effect of artificial ventilation on cardiac output
Respiration	<p>Fundamental depth, simple breadth</p> <ul style="list-style-type: none"> •Anatomy of the respiratory system •Physiology and pathophysiology of respiration <ul style="list-style-type: none"> • Pulmonary ventilation • Oxygenation • Respiration • External • Internal

	<ul style="list-style-type: none"> • Cellular • Assessment and management of adequate and inadequate respiration • Supplemental oxygen therapy
<p>Patient Assessment</p> <p>Scene Size-Up</p> <p>Primary Assessment</p> <p>History Taking</p>	<p>Use scene information and simple patient assessment findings to identify and manage immediate life threats and injuries within the scope of practice of the EMR</p> <p>Fundamental depth, foundational breadth</p> <ul style="list-style-type: none"> • Scene management • Multiple patient situations • Impact of the environment on patient care • Addressing hazards • Violence • Need for additional or specialized resources • Standard precautions <p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Primary assessment for all patient situations <ul style="list-style-type: none"> • Level of consciousness • ABCs • Identifying life threats • Assessment of vital functions • Begin interventions needed to preserve life <p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Determining the chief complaint • Mechanism of injury/nature of illness • Associated signs and symptoms

<p>Secondary Assessment</p>	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Performing a rapid full body scan • Focused assessment of pain • Assessment of vital signs <p>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. (</p> <p>(C/P)-Demonstrate the ability to accurately obtain and record a patient's vital signs and a SAMPLE history.</p>
<p>Monitoring Devices</p>	<ul style="list-style-type: none"> • Glucometry
<p>Reassessment</p>	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • How and when to reassess patients <p>Lab: (C/P)-Displays knowledge and skills required to continue the assessment and treatment of a patient.</p>
<p>Anatomy and Physiology</p>	<p>Uses simple knowledge of the anatomy and function of the upper airway, heart, vessels, blood, lungs, skin, muscles, and bones as the foundation of emergency care</p>

	<p>Lab: (C/P)-Demonstrate the ability to identify major bones and organs and anatomical landmarks on a patient.</p>
Medical Terminology	Uses simple medical and anatomical terms.
Pathophysiology	Uses simple knowledge of shock and respiratory compromise to respond to life threats.
Life Span Development	Uses simple knowledge of age- related differences to assess and care for patients.
Public Health	Have an awareness of local public health resources and the role EMS personnel play in public health emergencies.
Medicine	Recognizes and manages life threats based on assessment findings of a patient with a medical emergency while awaiting additional emergency response.
Medical Overview	<p>Simple depth, simple breadth Assessment and management of a</p> <ul style="list-style-type: none"> • Medical complaint <p>(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.</p> <p>(C/P)-Demonstrates the ability to identify and manage individual system and multi-system related medical emergencies including respiratory, cardiovascular, endocrine, neurological, and behavioral.</p>
Neurology	<p>Simple depth, simple breadth Anatomy, presentations, and management of</p> <ul style="list-style-type: none"> • Decreased level of responsiveness • Seizure • Stroke
Abdominal and Gastrointestinal Disorders	<p>Simple depth, simple breadth Anatomy, presentations and management of shock associated with abdominal emergencies</p> <ul style="list-style-type: none"> • Gastrointestinal bleeding
Immunology	<p>Simple depth, simple breadth Recognition and management of shock and difficulty breathing related</p>

	<p>to</p> <ul style="list-style-type: none"> • Anaphylactic reaction
Infectious Diseases	<p>Simple depth, simple breadth</p> <p>Awareness of</p> <ul style="list-style-type: none"> • A patient who may have an infectious disease • How to decontaminate the ambulance and equipment after treating a patient
Endocrine Disorders	<p>Simple depth, simple breadth</p> <p>Awareness that</p> <ul style="list-style-type: none"> • Diabetic emergencies cause altered mental status
Psychiatric	<p>Simple depth, simple breadth</p> <p>Recognition of</p> <ul style="list-style-type: none"> • Behaviors that pose a risk to the EMR, patient or other
Cardiovascular	<p>Simple depth, simple breadth</p> <p>Anatomy, signs, symptoms and management</p> <ul style="list-style-type: none"> • Chest pain • Cardiac arrest
Toxicology	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Recognition and management of <ul style="list-style-type: none"> o Carbon monoxide poisoning o Nerve agent poisoning • How and when to contact a poison control center
Respiratory	<p>Simple depth, simple breadth</p> <p>Anatomy, signs, symptoms and management of respiratory emergencies including those that affect the</p> <ul style="list-style-type: none"> • Upper airway • Lower airway
Hematology	No knowledge related to this competency is applicable at this level
Genitourinary/Renal	<p>Simple depth, simple breadth</p> <ul style="list-style-type: none"> • Blood pressure assessment in hemodialysis patients
Gynecology	<p>Simple depth, simple breadth</p> <p>Recognition and management of shock associated with</p> <ul style="list-style-type: none"> • Vaginal bleeding
Non-Traumatic Musculoskeletal Disorders	No knowledge related to this competency is applicable at this level

Diseases of the Eyes, Ears, Nose, and Throat	Simple depth, simple breadth Recognition and management of <ul style="list-style-type: none">• Nose bleed
Shock and Resuscitation	Uses assessment information to recognize shock, respiratory failure or arrest, and cardiac arrest based on assessment findings and manages the emergency while awaiting additional emergency response. (C/P)-Recognize a patient with internal and external bleeding, signs and symptoms of shock (hypoperfusion), and provide emergency medical care of shock (hypoperfusion) and external bleeding control to include skills approved by the NM Scope of Practice for the EMR level.
Trauma	Uses simple knowledge to recognize and manage life threats based on assessment findings for an acutely injured patient while awaiting additional emergency medical response.
Trauma Overview	<ul style="list-style-type: none">• No knowledge related to this competency is applicable at this level.
Bleeding	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none">• Bleeding
Chest Trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none">• Blunt versus penetrating mechanisms• Open chest wound• Impaled object

Abdominal and Genitourinary Trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Blunt versus penetrating mechanisms • Evisceration • Impaled object
Orthopedic Trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Open fractures • Closed fractures • Dislocations • Amputations
Soft Tissue Trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Wounds • Burns <ul style="list-style-type: none"> o Electrical o Chemical o Thermal • Chemicals in the eye and on the skin <p>P)-Demonstrate the ability to perform all skills associated with managing and treating soft-tissue, burns and musculoskeletal injuries.</p>
Head, Facial, Neck, and Spine trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Life threats • Spine trauma <p>(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.</p>
Nervous System Trauma	No knowledge related to this competency is applicable at this level.

Special Considerations in Trauma	Simple depth, simple breadth Recognition and management of trauma in: <ul style="list-style-type: none"> • Pregnant patient • Pediatric patient • Geriatric patient
Environmental Emergencies	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Submersion incidents • Temperature-related illness
Multi-System Trauma	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Multi-system trauma
Special Patient Populations	Recognizes and manages life threats based on simple assessment findings for a patient with special needs while awaiting additional emergency response. (P)-Demonstrates the ability to provide emergency medical care for at risk populations to include neonate, infant, children, bariatric, technology dependent and geriatric patients.
Obstetrics	Simple depth, simple breadth Recognition and management of: <ul style="list-style-type: none"> • Emergency childbirth • Vaginal bleeding in the pregnant patient
Neonatal care	Simple depth, simple breadth <ul style="list-style-type: none"> • Newborn care • Neonatal resuscitation
Pediatrics	Simple depth, simple breadth Age-related assessment findings, age-related, and developmental stage related assessment and treatment modifications for pediatric specific major diseases and/or emergencies <ul style="list-style-type: none"> • Upper airway obstruction • Lower airway reactive disease • Respiratory distress/failure/arrest • Shock • Seizures

	<ul style="list-style-type: none"> • Sudden Infant Death Syndrome
Geriatrics	Simple depth, simple breadth <ul style="list-style-type: none"> • Impact of age-related changes on assessment and care
Patients with Special Challenges	Simple depth, simple breadth <ul style="list-style-type: none"> • Recognizing and reporting abuse and neglect
EMS Operations	Knowledge of operational roles and responsibilities to ensure safe patient, public, and personnel safety
Principles of Safely Operating a Ground Ambulance	Simple depth, simple breadth <ul style="list-style-type: none"> • Risks and responsibilities of transport
Incident Management	Fundamental depth, simple breadth <ul style="list-style-type: none"> • Establish and work within the incident management system
Multiple Casualty Incidents	Simple depth, simple breadth <ul style="list-style-type: none"> • Triage principles • Resource management
Air Medical	Simple depth, simple breadth <ul style="list-style-type: none"> • Safe air medical operations • Criteria for utilizing air medical response
Vehicle Extrication	Simple depth, simple breadth <ul style="list-style-type: none"> • Safe vehicle extrication • Use of simple hand tools
Hazardous Materials Awareness	Simple depth, simple breadth <ul style="list-style-type: none"> • 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	Simple depth, simple breadth <ul style="list-style-type: none"> • Risks and responsibilities of operating on the scene of a natural or man-made disaster <p>(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.</p>

Human Services)	
Clinical Behavior and Judgment Assessment	<p>Communicates to obtain and clearly transmit information with an awareness of cultural differences.</p> <p>Perform a simple assessment to identify life threats, identify injuries requiring immobilization and conditions requiring treatment within the scope of practice of the EMR: including foreign substance in the eyes and nerve agent poisoning</p>
Psychomotor Skills	<p>Safely and effectively perform all psychomotor skills within the National EMS Scope of Practice Model AND New Mexico Scope of Practice at this level.</p> <p>Airway and Breathing:</p> <ul style="list-style-type: none"> • Basic Airway Maneuvers • Head-tilt, chin-lift • Jaw thrust • Modified chin lift • FBAO relief - manual • Oropharyngeal / Nasopharyngeal airway • Positive pressure ventilation devices such as BVM • Suction of the upper airway • Supplemental oxygen therapy <ul style="list-style-type: none"> • Nasal Cannula • Non-rebreather mask Assessment • Manual B/P Pharmacologic interventions • Unit-dose auto-injectors (lifesaving medications intended for self or peer rescue in hazardous materials situation, nerve agent antidote kit) <p>Medical/Cardiac care:</p> <ul style="list-style-type: none"> • Manual CPR • AED • Emergency childbirth • Bleeding control • Emergency moves • Eye irrigation <p>Trauma care</p> <ul style="list-style-type: none"> • Manual stabilization • C-spine injuries • Extremity fractures

	<ul style="list-style-type: none"> • Manual stabilization • C-spine injuries • Extremity fractures • Spinal immobilization • Cervical collars • Seated • Longboard • Rapid extrication • Splinting extremity
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 simple interventions based on assessment findings
Record Keeping	<p>Record simple assessment findings and interventions</p> <p>(C/P)-Recognize the importance of trending, recording changes in the patient's condition, and reassessment of interventions to assure appropriate care.</p>
Patient Complaints	Perform a patient assessment and provide prehospital emergency care for patient complaints: abdominal pain, abuse/neglect, altered mental status/decreased level of consciousness, apnea, back pain, behavioral emergency, bleeding, cardiac arrest, chest pain, cyanosis, dyspnea, eye pain, GI bleeding, hypotension, multiple trauma, pain, paralysis, poisoning, shock, and stridor/drooling.
Scene Leadership	Manage the scene until care is transferred to an EMS team member licensed at a higher level arrives.
Scene Safety	<p>Ensure the safety of the rescuer and others during an emergency</p> <p>(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.</p> <p>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 EMR.</p>

	(C)-Recognize the importance of the dynamic nature of the scene and impact on provider safety.
Hospital/Clinical Experience	None required at this level
Field Experience	• None required at this level

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