

Scenario Evaluation Guidelines

Physician guide for evaluating the advanced level EMSP's patient treatment and State protocols

Protocol verification is a combination of physical skills and scenario competency testing.

The EMSP should progress through the following steps with each scenario.

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| <ol style="list-style-type: none">1. Determines and describes scene management<ol style="list-style-type: none">a. scene considerationsb. patient locationc. visual appearanced. age, gender, weighte. immediate surroundings2. Performs patient assessment<ol style="list-style-type: none">a. chief complaintb. history of present illnessc. patient responses, symptoms, and pertinent negativesd. past medical historye. medications & allergiesf. social/family concernsg. examination findings<ol style="list-style-type: none">vital signsrespiratorycardiovasculargastrointestinalgenitourinarymusculoskeletal | <ol style="list-style-type: none"><ol style="list-style-type: none">neurologicintegumentaryhematologicimmunologicendocrinepsychiatric3. Describes patient management<ol style="list-style-type: none">a. initial stabilizationb. treatmentc. monitoringd. additional resourcese. patient response to interventionsf. transport decision4. Concludes with summary<ol style="list-style-type: none">a. describes correct field impressionb. gives rationale for field impressionc. describes related pathophysiologyd. gives verbal report for correct treatment and protocol |
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Example Scenario (Abdominal Pain)

You are an Intermediate EMSP/Paramedic on a non-transporting, fire-based unit in an urban EMS System. You are 10 minutes from the nearest hospital.

At 1400 hours, you are dispatched to an elementary school for stomach pains. The weather is hot and humid with a temperature of 92° F. A transporting unit is en route and is expected to arrive in 3 minutes. Upon arrival you are greeted by the school principal who directs you to the school nurse's station. You approach an 11-year-old who is lying on a cot in the fetal position. The child is grimacing and quietly moaning.

Refer to the Guideline Criteria

- The advanced level EMSP should first determine and describe scene management. (The EMSP should briefly verbalize scene management and safety considerations.)
- The advanced level EMSP should then perform a patient assessment. (As the EMSP proceeds through the assessment, the physician should include information that would reflect the incident.)

Example: chief complaint – abdominal pain; medical history – none; patient responses – severe pain RLQ and nausea; examination findings – rebound pain and emesis is a green sputum; vital signs – BP: 118/70, P: 100, R: 28, etc.)

- The advance level EMSP should then describe patient management. (The EMSP should verbalize initial treatment, stabilization, monitoring, etc.)
- The advanced level EMSP should conclude the scenario by summarizing treatment and protocols. (The EMSP should give a report summarizing field impression, rationale for impression, describe any related pathophysiology, and treatment performed per protocol.)

The EMSP's interventions must not exceed care provisions outlined in the protocols. The protocols **do** provide direction for further interventions through the on-line medical director. The idea of the scenarios is to determine if the EMSP has the knowledge to perform the appropriate patient interventions before contacting medical control through the approved protocols. It is not to determine if the EMSP can call out a specific protocol by name. An example of EMSPs trying to do this might occur when specific information is lacking and could confuse the EMSP as to which protocols name should be called, i.e., altered mental status, without sufficient information could be from stroke, hypoglycemia, head injury, or drug overdose.

Listed below are the specific skills that each level should be evaluated on by a Medical Director or Training Officer during their licensure period to determine proficiency.

PROTOCOL SKILLS VERIFICATION

PARAMEDIC

Blind Insertion Airway Devices
Cardioversion
Chest Decompression
Continuous Positive Airway Pressure (CPAP)
ECG (12-Lead)
Endotracheal Intubation
External Pacing
Hemostatic Agents
Intraosseous Therapy

INTERMEDIATE

Blind Insertion Airway Devices
Cardioversion
Continuous Positive Airway Pressure (CPAP)
ECG (12-Lead)
Endotracheal Intubation
External Pacing

Hemostatic Agents
Intraosseous Therapy

ADVANCED EMT

Blind Insertion Airway Devices
Continuous Positive Airway Pressure (CPAP)
Hemostatic Agents
Intraosseous Therapy
Cardiac Arrest Management

EMT

Cardiac Arrest Management
Spinal Immobilization (seated patient)
Spinal Immobilization (supine patient)
Bleeding Control/Shock Management
Long Bone Immobilization
Joint Immobilization