

# **The Phoenix Document**

## **An Evolution from National Standard Curriculum to the Virginia EMS Education Standards**

Training Levels Included:

- Emergency Medical Responder (EMR)



### **Introduction:**

This document identifies the differences in essential knowledge content between the National Standard Curricula/Virginia Standard Curricula and the 2010 Virginia EMS Education Standards (VEMSES). **EMS Instructors and Coordinators should use this document as a tool in conjunction with the specific *Instructor Guidelines (IG)* for the certification level(s) that are being instructed and the *Virginia Scope of Practice – Procedures & Formulary* to ensure that the required material/skills are appropriately covered by the instructor/coordinator.**

Instructor/Coordinators may also use this document to identify topics for continuing education programs to assure current certified Virginia Providers meet the same knowledge competencies of Virginia Providers certified after the implementation of the VEMSES.

### **Emergency Medical Responder (EMR)**

See the Instructor Guidelines for the Emergency Medical Responder (129 pages) at: <http://www.ems.gov/pdf/811077b.pdf>

#### **Knowledge and Skill Comparison**

The order of content is not meant to imply the order of delivery.

a. Emergency Medical Responder: New Course Considerations

When planning and conducting a new EMR course, the Program Director or Course Coordinator must consider the following:

- Instructional resources
- Instructor qualifications
- Medical director oversight
- Review and verify integration of the clinical behavior/judgment section of the Education Standards, particularly related to lab and clinical and field activities.
- Include affective evaluation and professional behavior in student assessment
- Program effectiveness evaluation

b. Emergency Medical Responder: Skills

For a current First Responder (based on 1995 First Responder National Standard Curriculum) transitioning to Emergency Medical Responder (EMR), the following skills are no longer taught:

- Insertion of a nasopharyngeal airway
- Pressure points and elevation for hemorrhage control

For a current 1995 First Responder transitioning to 2009 Emergency Medical Responder, the following skills were optional in 1995 First Responder National Standard Curriculum with State approval, they are now required:

- Use of supplemental oxygen
- Use of nasal cannula
- Use of non-rebreather face mask
- Use of the automated external defibrillator (AED)

For a current 1995 First Responder transitioning to 2009 Emergency Medical Responder, the following skills are **new**:

- Use of a bag-valve-mask
- Use of an auto-injector (self or peer)
- Obtaining manual blood pressures
- Performing eye irrigation

c. Emergency Medical Responder: Content

**Preparatory**

- EMS Systems - there is more content about quality improvement here than in the First Responder curriculum; contains section on required affective/behavioral characteristics
- Research – extremely limited information, but new to this level
- EMS System Communication – addition of fundamental information about transferring patient care to incoming EMTs
- Therapeutic Communications – addition of fundamental information about improving communication with the patient
- Medical/Legal/Ethics – Health Insurance Portability and Accountability Act (HIPAA) did not exist when the First Responder curriculum was authored; includes a brief discussion on living wills, surrogate decision makers, and civil and criminal court cases; in the discussion on advanced directives, the reference to International Liaison Committee on Resuscitation (ILCOR) should have been removed.

### **Anatomy and Physiology**

- Brief discussion on the life support chain focusing on oxygenation and perfusion

### **Medical Terminology**

- This content is new to this level

### **Pathophysiology**

- This content is new to this level but only focuses on respiratory dysfunction and shock

### **Life-Span Development**

- Minimal new information at this level

### **Public Health**

- Minimal new information at this level

### **Pharmacology**

- Medication administration – discussion focuses on the use of an auto-injector for self-preservation or for use on one’s peers (chemical attack)
- Emergency Medications – chemical antidote auto-injector only

### **Airway Management, Respiration, and Oxygenation**

- Anatomy and Physiology – more detailed than in the previous First Responder curriculum, especially in the area of respiratory physiology. The increases in this area are related to enhanced skills in scope of practice and new evidence that demonstrates the important interrelationship between ventilation and circulation.
- Respiration - more detailed than in the previous First Responder curriculum
- Artificial Ventilation - more detailed than in the previous First Responder curriculum
  - Patient Assessment
- Scene Size-Up – no new information here but a re-emphasis on the need for scene safety for everyone present
- Primary Assessment - new terminology that more closely mimics other health care professionals

- History Taking - new terminology that more closely mimics other health care professionals; some content specific to geriatrics added
- Secondary Assessment - new terminology that more closely mimics other health care professionals; more thorough than in the previous curriculum; blood pressure assessment added to this level
- Reassessment - blood pressure reassessment added to this level

### **Medicine**

- Medical Overview – re-use of the new assessment terminology
- Neurology – stroke discussion is new information at this level
- Abdominal and Gastrointestinal Disorders – minimal new information at this level
- Immunology - minimal new information at this level
- Infectious Diseases – two definitions added and a brief discussion about transmission routes
- Endocrine – a brief discussion about diabetes, more detailed than in the previous curriculum
- Psychiatric – includes new material, a brief discussion on the assessment for suicide risk
- Cardiovascular – deeper discussion on chest pain and heart attack
- Toxicology – new information at this level; discussion on the use of chemical antidote auto-injector
- Respiratory – deeper discussion on respiratory distress
- Genitourinary/Renal – discussion focuses on hemodialysis
- Gynecology – discussion focuses on vaginal bleeding
- Diseases of Eyes, Ears, Nose, and Throat – focuses on nosebleed

### **Shock and Resuscitation**

- New section that combines the CPR information from the old curriculum with more detail and a discussion on the use of the AED; more detailed shock information

### **Trauma**

- Overview – discussion on the Centers for Disease Control (CDC) Field Triage Decision Scheme: The National Trauma Triage Protocol
- Orthopedic Trauma - The terms fracture and dislocation appear here; they did not appear in the previous First Responder National Standard Curriculum
- Soft Tissue Trauma – brief discussion added about foreign bodies in the eye; assessment information added about the extent of burns.
- Head, Facial, Neck, and Spine Trauma – elaboration on special management situations

- Special Considerations in Trauma – added discussion on the elderly and the pregnant patient
- Environmental – AEDs mentioned, brief discussion on submersions added
- Multi-system Trauma – new material at this level
- Special Patient Populations
- Pregnant Patient – vaginal bleeding discussion added, the term Braxton Hicks did not appear in the previous First Responder National Standard Curriculum
- Pediatrics – pediatric assessment triangle included; discussion of shock in the pediatric patient in the previous curriculum, it was called circulatory failure
- Geriatrics – all new section for this level
- Patients with Special Challenges – elder abuse added

### **EMS Operations**

- Principles of Safely Operating a Ground Ambulance - increased depth of discussion on the risks of emergency response and leaving the scene
- Incident Management – references the incident management system and the federal requirements for compliance
- Air Medical – new material at this level; patient transfer issues, interaction with flight personnel, scene safety, landing zone selection/prep
- Vehicle Extrication – added discussion on situational safety and the use of simple hand tools
- Hazardous Materials Awareness – references Hazardous Waste Operations and Emergency Response (HAZWOPER) standard
- Mass Casualty Incidents Due to Terrorism or Disaster – all new material at this level

## **Appendix A: Common Drug List**

The drugs listed in this appendix MUST be covered as an educational minimum as indicated by the level of certification being instructed.

DRUG	EMR	EMT	AEMT	I	P
OXYGEN	•	•	•	•	•
ORAL GLUCOSE		•	•	•	•
EPI PEN		•	•	•	•
NITRO (Patient Assist)		•	•	•	•
INHALED BRONCHODILATORS		•	•	•	•
NITROUS OXIDE			•	•	•
ALBUTEROL			•	•	•
ATROPINE				•	•
DEXTROSE 50%			•	•	•
DIPHENHYDRAMINE				•	•
EPINEPHRINE 1:10,000				•	•
FUROSEMIDE				•	•
GLUCAGON			•	•	•
MAGNESIUM SULFATE				•	•
NALOXONE			•	•	•
NITROGLYCERIN TABS/SPRAY/PASTE			•	•	•
ADENOSINE				•	•
DIAZEPAM				•	•
EPINEPHRINE 1:1,000			•	•	•
MORPHINE				•	•
AMIODARONE				•	•
ASPIRIN		•	•	•	•
IPRATROPIUM					•
MIDAZOLAM					•
LIDOCAINE				•	•
DOPAMINE				•	•
THIAMINE				•	•
ACTIVATED CHARCOAL					•
AMYL NITRITE					•
FENTANYL					•
OXYTOCIN					•
PROMETHAZINE					•
LORAZEPAM					•
DILTIAZEM					•

## **Appendix B: Virginia Scope of Practice – Procedures & Formulary**

The Virginia Scope of Practice demonstrates the “practice maximum” for each certification level established by the Virginia Office of EMS. Please utilize this document when instructing EMS programs.

- To link to the Procedures click on the following web link:  
[http://www.vdh.virginia.gov/OEMS/Files\\_page/Training/ScopeOfPractice-Procedures.pdf](http://www.vdh.virginia.gov/OEMS/Files_page/Training/ScopeOfPractice-Procedures.pdf)
- To link to the Formulary click on the following web link:  
[http://www.vdh.virginia.gov/OEMS/Files\\_page/Training/ScopeOfPractice-Formulary.pdf](http://www.vdh.virginia.gov/OEMS/Files_page/Training/ScopeOfPractice-Formulary.pdf)

## **Appendix C: PES Practice Analysis**

- To link to the PES Practice Analysis click on the following web link:  
[http://www.vdh.virginia.gov/OEMS/Files\\_page/Training/PESPracticeAnalysis.pdf](http://www.vdh.virginia.gov/OEMS/Files_page/Training/PESPracticeAnalysis.pdf)