

Lesson 1-1 Introduction to EMS Systems

Substantial
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Education
Needed

COGNITIVE OBJECTIVES

			1-1.1	Define the components of Emergency Medical Services (EMS) systems. (C-1)
			1-1.2	Differentiate the roles and responsibilities of the First Responder from other out-of-hospital care providers. (C-3)
			1-1.3	Define medical oversight and discuss the First Responder's role in the process. (C-1)
			1-1.4	Discuss the types of medical oversight that may affect the medical care of a First Responder. (C-1)
			1-1.5	State the specific statutes and regulations in your state regarding the EMS system. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			1-1.6	Accept and uphold the responsibilities of a First Responder in accordance with the standards of an EMS professional. (A-3)
			1-1.7	Explain the rationale for maintaining a professional appearance when on duty or when responding to calls. (A-3)
			1-1.8	Describe why it is inappropriate to judge a patient based on a cultural, gender, age, or socioeconomic model, and to vary the standard of care rendered as a result of that judgement. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

None identified for this unit.

Lesson 1-2 The Well-Being of the First Responder

COGNITIVE OBJECTIVES

			1-2.1	List possible emotional reactions that the First Responder may experience when faced with trauma, illness, death, and dying. (C-1)
			1-2.2	Discuss the possible reactions that a family member may exhibit when confronted with death and dying. (C-1)
			1-2.3	State the steps in the First Responder's approach to the family confronted with death and dying. (C-1)
			1-2.4	State the possible reactions that the family of the First Responder may exhibit. (C-1)
			1-2.5	Recognize the signs and symptoms of critical incident stress. (C-1)
			1-2.6	State possible steps that the First Responder may take to help reduce/alleviate stress. (C-1)
			1-2.7	Explain the need to determine scene safety. (C-2)

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			1-2.8	Discuss the importance of body substance isolation (BSI). (C-1)
			1-2.9	Describe the steps the First Responder should take for personal protection from airborne and bloodborne pathogens. (C-1)
			1-2.10	List the personal protective equipment necessary for each of the following situations:(C-1)
				- Hazardous materials
				- Rescue operations
				- Violent scenes
				- Crime scenes
				- Electricity
				- Water and ice
				- Exposure to bloodborne pathogens
				- Exposure to airborne pathogens
COMMENTS				

AFFECTIVE OBJECTIVES

			1-2.11	Explain the importance for serving as an advocate for the use of appropriate protective equipment. (A-3)
			1-2.12	Explain the importance of understanding the response to death and dying and communicating effectively with the patient's family.
			1-2.13	Demonstrate a caring attitude towards any patient with illness or injury who requests emergency medical services. (A-3)
			1-2.14	Show compassion when caring for the physical and mental needs of patients. (A-3)
			1-2.15	Participate willingly in the care of all patients. (A-3)
			1-2.16	Communicate with empathy to patients being cared for, as well as with family members, and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			1-2.17	Given a scenario with potential infectious exposure, the First Responder will use appropriate personal protective equipment. At the completion of the scenario, the First Responder will properly remove and discard the protective garments. (P-1,2)
			1-2.18	Given the above scenario, the First Responder will complete disinfection/cleaning and all reporting documentation. (P-1,2)
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Lesson 1-3 Legal and Ethical Issues

COGNITIVE OBJECTIVES

			1-3.1	Define the First Responder scope of care. (C-1)
			1-3.2	Discuss the importance of Do Not Resuscitate [DNR] (advance directives) and local or state provisions regarding EMS application. (C-1)
			1-3.3	Define consent and discuss the methods of obtaining consent. (C-1)
			1-3.4	Differentiate between expressed and implied consent. (C-3)
			1-3.5	Explain the role of consent of minors in providing care. (C-1)
			1-3.6	Discuss the implications for the First Responder in patient refusal of transport. (C-1)
			1-3.7	Discuss the issues of abandonment, negligence, and battery and their implications to the First Responder. (C-1)
			1-3.8	State the conditions necessary for the First Responder to have a duty to act. (C-1)
			1-3.9	Explain the importance, necessity and legality of patient confidentiality. (C-1)
			1-3.10	List the actions that a First Responder should take to assist in the preservation of a crime scene. (C-3)
			1-3.11	State the conditions that require a First Responder to notify local law enforcement officials. (C-1)
			1-3.12	Discuss issues concerning the fundamental components of documentation. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			1-3.13	Explain the rationale for the needs, benefits and usage of advance directives. (A-3)
			1-3.14	Explain the rationale for the concept of varying degrees of DNR. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

None identified for this unit.

Lesson 1-4 The Human Body

COGNITIVE OBJECTIVES

			1-4.1	Describe the anatomy and function of the respiratory system. (C-1)
			1-4.2	Describe the anatomy and function of the circulatory system. (C-1)

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			1-4.3	Describe the anatomy and function of the musculoskeletal system. (C-1)
			1-4.4	Describe the components and function of the nervous system. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

None identified for this unit.

PSYCHOMOTOR OBJECTIVES

None identified for this unit.

Lesson 1-5 Lifting and Moving Patients

COGNITIVE OBJECTIVES

			1-5.1	Define body mechanics. (C-1)
			1-5.2	Discuss the guidelines and safety precautions that need to be followed when lifting a patient. (C-1)
			1-5.3	Describe the indications for an emergency move. (C-1)
			1-5.4	Describe the indications for assisting in non-emergency moves. (C-1)
			1-5.5	Discuss the various devices associated with moving a patient in the out-of-hospital arena. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			1-5.6	Explain the rationale for properly lifting and moving patients. (A-3)
			1-5.7	Explain the rationale for an emergency move. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			1-5.8	Demonstrate an emergency move. (P-1,2)
			1-5.9	Demonstrate a non-emergency move. (P-1,2)
			1-5.10	Demonstrate the use of equipment utilized to move patient's in the out-of-hospital arena. (P-1,2)

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COMMENTS		
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Lesson 2-1 Airway

COGNITIVE OBJECTIVES

			2-1.1	Name and label the major structures of the respiratory system on a diagram. (C-1)
			2-1.2	List the signs of inadequate breathing. (C-1)
			2-1.3	Describe the steps in the head-tilt chin-lift. (C-1)
			2-1.4	Relate mechanism of injury to opening the airway. (C-3)
			2-1.5	Describe the steps in the jaw thrust. (C-1)
			2-1.6	State the importance of having a suction unit ready for immediate use when providing emergency medical care. (C-1)
			2-1.7	Describe the techniques of suctioning. (C-1)
			2-1.8	Describe how to ventilate a patient with a resuscitation mask or barrier device. (C-1)
			2-1.9	Describe how ventilating an infant or child is different from an adult. (C-1)
			2-1.10	List the steps in providing mouth-to-mouth and mouth-to-stoma ventilation. (C-1)
			2-1.11	Describe how to measure and insert an oropharyngeal (oral) airway. (C-1)
			2-1.12	Describe how to measure and insert a nasopharyngeal (nasal) airway. (C-1)
			2-1.13	Describe how to clear a foreign body airway obstruction in a responsive adult. (C-1)
			2-1.14	Describe how to clear a foreign body airway obstruction in a responsive child with complete obstruction or partial airway obstruction and poor air exchange. (C-1)
			2-1.15	Describe how to clear a foreign body airway obstruction in a responsive infant with complete obstruction or partial airway obstruction and poor air exchange. (C-1)
			2-1.16	Describe how to clear a foreign body airway obstruction in a unresponsive adult. (C-1)
			2-1.17	Describe how to clear a foreign body airway obstruction in a unresponsive child. (C-1)
			2-1.18	Describe how to clear a foreign body airway obstruction in a unresponsive infant. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			2-1.19	Explain why basic life support ventilation and airway protective skills take priority over most other basic life support skills. (A-3)
			2-1.20	Demonstrate a caring attitude towards patients with airway problems who request emergency medical services. (A-3)
			2-1.21	Place the interests of the patient with airway problems as the foremost consideration when making any and all patient care decisions. (A-3)

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			2-1.22	Communicate with empathy to patients with airway problems, as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			2-1.23	Demonstrate the steps in the head-tilt chin-lift. (P-1,2)
			2-1.24	Demonstrate the steps in the jaw thrust. (P-1,2)
			2-1.25	Demonstrate the techniques of suctioning. (P-1,2)
			2-1.26	Demonstrate the steps in mouth-to-mouth ventilation with body substance isolation (barrier shields). (P-1,2)
			2-1.27	Demonstrate how to use a resuscitation mask to ventilate a patient. (P-1,2)
			2-1.28	Demonstrate how to ventilate a patient with a stoma. (P-1,2)
			2-1.29	Demonstrate how to measure and insert an oropharyngeal (oral) airway. (P□1,2)
			2-1.30	Demonstrate how to measure and insert a nasopharyngeal (nasal) airway. (P□1,2)
			2-1.31	Demonstrate how to ventilate infant and child patients. (P-1,2)
			2-1.32	Demonstrate how to clear a foreign body airway obstruction in a responsive adult. (C-1)
			2-1.33	Demonstrate how to clear a foreign body airway obstruction in a responsive child. (C-1)
			2-1.34	Demonstrate how to clear a foreign body airway obstruction in a responsive infant. (C-1)
			2-1.35	Demonstrate how to clear a foreign body airway obstruction in an unresponsive adult. (C-1)
			2-1.36	Demonstrate how to clear a foreign body airway obstruction in an unresponsive child. (C-1)
			2-1.37	Demonstrate how to clear a foreign body airway obstruction in an unresponsive infant. (C-1)
COMMENTS				

Lesson 3-1 Patient Assessment

COGNITIVE OBJECTIVES

			3-1.1	Discuss the components of scene size-up. (C-1)
			3-1.2	Describe common hazards found at the scene of a trauma and a medical patient. (C-1)
			3-1.3	Determine if the scene is safe to enter. (C-2)
			3-1.4	Discuss common mechanisms of injury/nature of illness. (C-1)
			3-1.5	Discuss the reason for identifying the total number of patients at the scene. (C-1)
			3-1.6	Explain the reason for identifying the need for additional help or assistance. (C-1)
			3-1.7	Summarize the reasons for forming a general impression of the patient. (C-1)
			3-1.8	Discuss methods of assessing mental status. (C-1)

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			3-1.9	Differentiate between assessing mental status in the adult, child, and infant patient. (C-3)
			3-1.10	Describe methods used for assessing if a patient is breathing. (C-1)
			3-1.11	Differentiate between a patient with adequate and inadequate breathing. (C-3)
			3-1.12	Describe the methods used to assess circulation. (C-1)
			3-1.13	Differentiate between obtaining a pulse in an adult, child, and infant patient. (C-3)
			3-1.14	Discuss the need for assessing the patient for external bleeding. (C-1)
			3-1.15	Explain the reason for prioritizing a patient for care and transport. (C-1)
			3-1.16	Discuss the components of the physical exam. (C-1)
			3-1.17	State the areas of the body that are evaluated during the physical exam. (C-1)
			3-1.18	Explain what additional questioning may be asked during the physical exam. (C-1)
			3-1.19	Explain the components of the SAMPLE history. (C-1)
			3-1.20	Discuss the components of the on-going assessment. (C-1)
			3-1.21	Describe the information included in the First Responder "hand-off" report. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			3-1.22	Explain the rationale for crew members to evaluate scene safety prior to entering. (A-2)
			3-1.23	Serve as a model for others by explaining how patient situations affect your evaluation of the mechanism of injury or illness. (A-2)
			3-1.24	Explain the importance of forming a general impression of the patient. (A-1)
			3-1.25	Explain the value of an initial assessment. (A-2)
			3-1.26	Explain the value of questioning the patient and family. (A-2)
			3-1.27	Explain the value of the physical exam. (A-2)
			3-1.28	Explain the value of an on-going assessment. (A-2)
			3-1.29	Explain the rationale for the feelings that these patients might be experiencing. (A-3)
			3-1.30	Demonstrate a caring attitude when performing patient assessments. (A-3)
			3-1.31	Place the interests of the patient with as the foremost consideration when making any and all patient care decisions during patient assessment. (A-3)
			3-1.32	Communicate with empathy during patient assessment to patients as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			3-1.33	Demonstrate the ability to differentiate various scenarios and identify potential hazards. (P-1)
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			3-1.34	Demonstrate the techniques for assessing mental status. (P-1,2)
			3-1.35	Demonstrate the techniques for assessing the airway. (P-1,2)
			3-1.36	Demonstrate the techniques for assessing if the patient is breathing. (P-1,2)
			3-1.37	Demonstrate the techniques for assessing if the patient has a pulse. (P-1,2)
			3-1.38	Demonstrate the techniques for assessing the patient for external bleeding. (P-1,2)
			3-1.39	Demonstrate the techniques for assessing the patient's skin color, temperature, condition, and capillary refill (infants and children only). (P-1,2)
			3-1.40	Demonstrate questioning a patient to obtain a SAMPLE history.
			3-1.41	Demonstrate the skills involved in performing the physical exam. (P-1,2)
			3-1.42	Demonstrate the on-going assessment (P-1,2)
COMMENTS				

Lesson 4-1 Circulation

COGNITIVE OBJECTIVES

			4-1.1	List the reasons for the heart to stop beating (C-1)
			4-1.2	Define the components of cardiopulmonary resuscitation (C-1)
			4-1.3	Describe each link in the chain of survival and how it relates to the EMS system. (C-2)
			4-1.4	List the steps of one-rescuer adult CPR (C-1)
			4-1.5	Describe the technique of external chest compressions on an adult patient. (C-1)
			4-1.6	Describe the technique of external chest compressions on an infant. (C-1)
			4-1.7	Describe the technique of external chest compressions on a child. (C-1)
			4-1.8	Explain when the First Responder is able to stop CPR. (C-2)
			4-1.9	List the steps of two-rescuer adult CPR (C-1)
			4-1.10	List the steps of infant CPR (C-1)
			4-1.11	List the steps of child CPR (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			4-1.12	Respond to the feelings that the family of a patient may be having during a cardiac event. (A-3)
			4-1.13	Demonstrate a caring attitude towards patients with cardiac events who request emergency medical services. (A-3)

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			4-1.14	Place the interests of the patient with a cardiac event as the foremost consideration when making any and all patient care decisions. (A-3)
			4-1.15	Communicate with empathy with family members and friends of the patient with a cardiac event. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			4-1.16	Demonstrate the proper technique of chest compressions on an adult. (P-1,2)
			4-1.17	Demonstrate the proper technique of chest compressions on a child. (P-1,2)
			4-1.18	Demonstrate the proper technique of chest compressions on an infant. (P-1,2)
			4-1.19	Demonstrate the steps of adult one rescuer CPR. (P-1,2)
			4-1.20	Demonstrate the steps of adult two rescuer CPR. (P-1,2)
			4-1.21	Demonstrate child CPR. (P-1,2)
			4-1.22	Demonstrate infant CPR. (P-1,2)
COMMENTS				

Lesson 5-1 Medical Emergencies

COGNITIVE OBJECTIVES

			5-1.1	Identify the patient who presents with a general medical complaint. (C-1)
			5-1.2	Explain the steps in providing emergency medical care to a patient with a general medical complaint. (C-1)
			5-1.3	Identify the patient who presents with a specific medical complaint of altered mental status. (C-1)
			5-1.4	Explain the steps in providing emergency medical care to a patient with an altered mental status. (C-1)
			5-1.5	Identify the patient who presents with a specific medical complaint of seizures. (C-1)
			5-1.6	Explain the steps in providing emergency medical care to a patient with seizures. (C-1)
			5-1.7	Identify the patient who presents with a specific medical complaint of exposure to cold. (C-1)
			5-1.8	Explain the steps in providing emergency medical care to a patient with an exposure to cold. (C-1)
			5-1.9	Identify the patient who presents with a specific medical complaint of exposure to heat. (C-1)
			5-1.10	Explain the steps in providing emergency medical care to a patient with an exposure to heat. (C-1)
			5-1.11	Identify the patient who presents with a specific medical complaint of behavioral change. (C-1)
			5-1.12	Explain the steps in providing emergency medical care to a patient with a behavioral change. (C-1)
			5-1.13	Identify the patient who presents with a specific complaint of a psychological crisis. (C-1)
			5-1.14	Explain the steps in providing emergency medical care to a patient with a psychological crisis. (C-1)

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AFFECTIVE OBJECTIVES

			5-1.15	Attend to the feelings of the patient and/or family when dealing with the patient with a general medical complaint. (A-3)
			5-1.16	Attend to the feelings of the patient and/or family when dealing with the patient with a specific medical complaint. (A-3)
			5-1.17	Explain the rationale for modifying your behavior toward the patient with a behavioral emergency. (A-3)
			5-1.18	Demonstrate a caring attitude towards patients with a general medical complaint who request emergency medical services. (A-3)
			5-1.19	Place the interests of the patient with a general medical complaint as the foremost consideration when making any and all patient care decisions. (A-3)
			5-1.20	Communicate with empathy to patients with a general medical complaint, as well as with family members and friends of the patient. (A-3)
			5-1.21	Demonstrate a caring attitude towards patients with a specific medical complaint who request emergency medical services. (A-3)
			5-1.22	Place the interests of the patient with a specific medical complaint as the foremost consideration when making any and all patient care decisions. (A-3)
			5-1.23	Communicate with empathy to patients with a specific medical complaint, as well as with family members and friends of the patient. (A-3)
			5-1.24	Demonstrate a caring attitude towards patients with a behavioral problem who request emergency medical services. (A-3)
			5-1.25	Place the interests of the patient with a behavioral problem as the foremost consideration when making any and all patient care decisions. (A-3)
			5-1.26	Communicate with empathy to patients with a behavioral problem, as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			5-1.27	Demonstrate the steps in providing emergency medical care to a patient with a general medical complaint. (C-1)
			5-1.28	Demonstrate the steps in providing emergency medical care to a patient with an altered mental status. (C-1)
			5-1.29	Demonstrate the steps in providing emergency medical care to a patient with seizures. (C-1)
			5-1.30	Demonstrate the steps in providing emergency medical care to a patient with an exposure to cold. (C-1)
			5-1.31	Demonstrate the steps in providing emergency medical care to a patient with an exposure to heat. (C-1)
			5-1.32	Demonstrate the steps in providing emergency medical care to a patient with a behavioral change. (C-1)
			5-1.33	Demonstrate the steps in providing emergency medical care to a patient with a psychological crisis. (C-1)

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Lesson 5-2 Bleeding and Soft Tissue Injuries

COGNITIVE OBJECTIVES

			5-2.1	Differentiate between arterial, venous, and capillary bleeding. (C-3)
			5-2.2	State the emergency medical care for external bleeding. (C-1)
			5-2.3	Establish the relationship between body substance isolation and bleeding. (C-3)
			5-2.4	List the signs of internal bleeding. (C-1)
			5-2.5	List the steps in the emergency medical care of the patient with signs and symptoms of internal bleeding. (C-1)
			5-2.6	Establish the relationship between body substance isolation (BSI) and soft tissue injuries. (C-3)
			5-2.7	State the types of open soft tissue injuries. (C-1)
			5-2.8	Describe the emergency medical care of the patient with a soft tissue injury. (C-1)
			5-2.9	Discuss the emergency medical care considerations for a patient with a penetrating chest injury. (C-1)
			5-2.10	State the emergency medical care considerations for a patient with an open wound to the abdomen. (C-1)
			5-2.11	Describe the emergency medical care for an impaled object. (C-1)
			5-2.12	State the emergency medical care for an amputation. (C-1)
			5-2.13	Describe the emergency medical care for burns. (C-1)
			5-2.14	List the functions of dressing and bandaging. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			5-2.15	Explain the rationale for body substance isolation when dealing with bleeding and soft tissue injuries. (A-3)
			5-2.16	Attend to the feelings of the patient with a soft tissue injury or bleeding. (A-3)
			5-2.17	Demonstrate a caring attitude towards patients with a soft tissue injury or bleeding who request emergency medical services. (A-3)
			5-2.18	Place the interests of the patient with a soft tissue injury or bleeding as the foremost consideration when making any and all patient care decisions. (A-3)
			5-2.19	Communicate with empathy to patients with a soft tissue injury or bleeding, as well as with family members and friends of the patient. (A-3)

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PSYCHOMOTOR OBJECTIVES

			5-2.20	Demonstrate direct pressure as a method of emergency medical care for external bleeding. (P-1,2)
			5-2.21	Demonstrate the use of diffuse pressure as a method of emergency medical care for external bleeding. (P-1,2)
			5-2.22	Demonstrate the use of pressure points as a method of emergency medical care for external bleeding. (P-1,2)
			5-2.23	Demonstrate the care of the patient exhibiting signs and symptoms of internal bleeding. (P-1,2)
			5-2.24	Demonstrate the steps in the emergency medical care of open soft tissue injuries. (P-1,2)
			5-2.25	Demonstrate the steps in the emergency medical care of a patient with an open chest wound. (P-1,2)
			5-2.26	Demonstrate the steps in the emergency medical care of a patient with open abdominal wounds. (P-1,2)
			5-2.27	Demonstrate the steps in the emergency medical care of a patient with an impaled object. (P-1,2)
			5-2.28	Demonstrate the steps in the emergency medical care of a patient with an amputation. (P-1,2)
			5-2.29	Demonstrate the steps in the emergency medical care of an amputated part. (P-1,2)
COMMENTS				

Lesson 5-3 Injuries to Muscles and Bones

COGNITIVE OBJECTIVES

			5-3.1	Describe the function of the musculoskeletal system. (C-1)
			5-3.2	Differentiate between an open and a closed painful, swollen, deformed extremity. (C-1)
			5-3.3	List the emergency medical care for a patient with a painful, swollen, deformed extremity. (C-1)
			5-3.4	Relate mechanism of injury to potential injuries of the head and spine. (C-3)
			5-3.5	State the signs and symptoms of a potential spine injury. (C-1)
			5-3.6	Describe the method of determining if a responsive patient may have a spine injury. (C-1)
			5-3.7	List the signs and symptoms of injury to the head. (C-1)
			5-3.8	Describe the emergency medical care for injuries to the head. (C-1)
COMMENTS				

AFFECTIVE OBJECTIVES

			5-3.9	Explain the rationale for the feeling patients who have need for immobilization of the painful, swollen, deformed extremity. (A-3)
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			5-3.10	Demonstrate a caring attitude towards patients with a musculoskeletal injury who request emergency medical services. (A-3)
			5-3.11	Place the interests of the patient with a musculoskeletal injury as the foremost consideration when making any and all patient care decisions. (A-3)
			5-3.12	Communicate with empathy to patients with a musculoskeletal injury, as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			5-3.13	Demonstrate the emergency medical care of a patient with a painful, swollen, deformed extremity. (P-1,2)
			5-3.14	Demonstrate opening the airway in a patient with suspected spinal cord injury. (P-1,2)
			5-3.15	Demonstrate evaluating a responsive patient with a suspected spinal cord injury. (P-1,2)
			5-3.16	Demonstrate stabilizing of the cervical spine. (P-1,2)
COMMENTS				

Lesson 6-1 Childbirth

COGNITIVE OBJECTIVES

			6-1.1	Identify the following structures: birth canal, placenta, umbilical cord, amniotic sac. (C-1)
			6-1.2	Define the following terms: crowning, bloody show, labor, abortion. (C-1)
			6-1.3	State indications of an imminent delivery. (C-1)
			6-1.4	State the steps in the pre-delivery preparation of the mother. (C-1)
			6-1.5	Establish the relationship between body substance isolation and childbirth. (C-3)
			6-1.6	State the steps to assist in the delivery. (C-1)
			6-1.7	Describe care of the baby as the head appears. (C-1)
			6-1.8	Discuss the steps in delivery of the placenta. (C-1)
			6-1.9	List the steps in the emergency medical care of the mother post-delivery. (C-3)
			6-1.10	Discuss the steps in caring for a newborn. (C-1)
COMMENTS				

VT First Responder Competency Checklist

Substantial
 Mastery
 Partial
 Mastery
 Education
 Needed

AFFECTIVE OBJECTIVES

			6-1.11	Explain the rationale for attending to the feeling of a patient in need of emergency medical care during childbirth. (A-2)
			6-1.12	Demonstrate a caring attitude towards patients during childbirth who request emergency medical services. (A-3)
			6-1.13	Place the interests of the patient during childbirth as the foremost consideration when making any and all patient care decisions. (A-3)
			6-1.14	Communicate with empathy to patients during childbirth, as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			6-1.15	Demonstrate the steps to assist in the normal cephalic delivery. (P-1,2)
			6-1.16	Demonstrate necessary care procedures of the fetus as the head appears. (P-1,2)
			6-1.17	Attend to the steps in the delivery of the placenta. (P-1,2)
			6-1.18	Demonstrate the post-delivery care of the mother. (P-1,2)
			6-1.19	Demonstrate the care of the newborn. (P-1,2)
COMMENTS				

Lesson 6-2 Infants and Children

COGNITIVE OBJECTIVES

			6-2.1	Describe differences in anatomy and physiology of the infant, child, and adult patient. (C-1)
			6-2.2	Describe assessment of the infant or child. (C-1)
			6-2.3	Indicate various causes of respiratory emergencies in infants and children. (C-1)
			6-2.4	Summarize emergency medical care strategies for respiratory distress and respiratory failure/arrest in infants and children. (C-1)
			6-2.5	List common causes of seizures in the infant and child patient. (C-1)
			6-2.6	Describe management of seizures in the infant and child patient. (C-1)
			6-2.7	Discuss emergency medical care of the infant and child trauma patient. (C-1)
			6-2.8	Summarize the signs and symptoms of possible child abuse and neglect. (C-1)
			6-2.9	Describe the medical - legal responsibilities in suspected child abuse. (C-1)
			6-2.10	Recognize need for First Responder debriefing following a difficult infant or child transport. (C-1)
COMMENTS				

VT First Responder Competency Checklist

Substantial
 Mastery
 Partial
 Mastery
 Education
 Needed

AFFECTIVE OBJECTIVES

			6-2.11	Attend to the feelings of the family when dealing with an ill or injured infant or child. (A-1)
			6-2.12	Understand the provider's own emotional response to caring for infants or children. (A-1)
			6-2.13	Demonstrate a caring attitude towards infants and children with illness or injury who require emergency medical services. (A-3)
			6-2.14	Place the interests of the infant or child with an illness or injury as the foremost consideration when making any and all patient care decisions. (A-3)
			6-2.15	Communicate with empathy to infants and children with an illness or injury, as well as with family members and friends of the patient. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			6-2.16	Demonstrate assessment of the infant and child. (P-1,2)
COMMENTS				

Lesson 7-1 EMS Operations

COGNITIVE OBJECTIVES

			7-1.1	Discuss the medical and non-medical equipment needed to respond to a call. (C-1)
			7-1.2	List the phases of a out-of-hospital call. (C-1)
			7-1.3	Discuss the role of the First Responder in extrication. (C-1)
			7-1.4	List various methods of gaining access to the patient. (C-3)
			7-1.5	Distinguish between simple and complex access. (C-3)
			7-1.6	Describe what the First Responder should do if there is reason to believe that there is a hazard at the scene. (C-1)
			7-1.7	State the role the First Responder should perform until appropriately trained personnel arrive at the scene of a hazardous materials situation. (C-1)
			7-1.8	Describe the criteria for a multiple-casualty situation. (C-1)
			7-1.9	Discuss the role of the First Responder in the multiple-casualty situation. (C-3)
			7-1.10	Summarize the components of basic triage. (C-1)
COMMENTS				

VT First Responder Competency Checklist

~~Substantial~~
~~Mastery~~
~~Partial~~
~~Mastery~~
~~Education~~
~~Needed~~

AFFECTIVE OBJECTIVES

			7-1.11	Explain the rationale for having the unit prepared to respond. (A-3)
COMMENTS				

PSYCHOMOTOR OBJECTIVES

			7-1.12	Given a scenario of a mass casualty incident, perform triage. (P-2)
COMMENTS				