



ALBERTA COLLEGE OF PARAMEDICS
CONTINUING COMPETENCY PROFILE
EMERGENCY MEDICAL RESPONDER
(EMR)

Competency Profile for Alberta College of Paramedics

Alberta Occupational Competency Profile

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Acknowledgements

The Alberta Occupational Competency Profile (AOCP) was developed to comply with the requirements of the Health Professions Act. The AOCP originated with the hard work and determination of a small group of Paramedicine practitioners of the Alberta College of Paramedics along with the support of Dr. Bill DuPerron of Alberta Health and Wellness in the fall of 1999. Following the development of the AOCP an Advisory Committee was struck to develop an assessment tool for practitioners. As a result of the continuous review of the AOCP document a number of revisions were made to the document. The College would like to acknowledge the efforts of the individuals who were instrumental in the development and completion of the Continuing Competency Program.

Your hard work and dedication are greatly appreciated. Thank you.

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There are many other individuals who played an integral role in the development and enhancement of these profiles which represent the scopes of practice for the EMR, EMT, and the EMT-Paramedic. These individuals are too numerous to name individually, yet they were instrumental in the validation and assessment of the AOCP. Your hard work and dedication are greatly appreciated. Thank you.

A special thank you goes out to Lori Jewel – Director of Operations, and Laurie Mitchell - Registration Division Leader, who provided their expertise in the completion of this document.

To the many Counsellors' who have represented the Alberta College of Paramedics from 1999 throughout 2004. Thank you for your time and input into this document.

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Originating Committee: Continuing Competence Project Committee

Revision Summary

January 2007

1. H-17-3

~~Describe the~~ Knowledge and ability to understand ~~develop and integrate a treatment plan for a~~ the special needs patient including, but not limited to:

- Foley catheters;
- Hemodialysis fistula;
- G-tubes
- Tracheostomy tube (EMR's CANNOT TRANSPORT THIS PATIENT)

June 2005.

1. A-5-4

State the relevance and application of the ~~Highway~~ Traffic Safety Act.

2. A-5-5

Demonstrate Knowledge of the ~~Child Welfare Act.~~ Child, Youth & Family Enhancement Act.

3. A-5-6

Demonstrate knowledge of the Protection of Persons in Care Act.

4. A-5-8

Demonstrate knowledge of the Freedom of Information and Protection of Privacy Act.

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Factor Rating / Rating Scale

Factor Rating

1 – Mandatory

Competencies that are critical to the triage, treatment and transport of patient care. The competency directly affects patient care. The patient requires this service from the EMR/EMT/Paramedic to survive. The delineation of the competency as mandatory has been approved by the Council and is consistent with the level of education and skill of the practitioner as outlined in the Alberta Occupational Competency Profile

2 – Recommended

Competencies that are primarily knowledge, which are important to providing triage, treatment and transport. The competency indirectly affects but is a necessary support to patient care. The competency affects how the EMR/EMT/Paramedic provides care. The delineation of the competency as recommended has been approved by Council and is consistent with the level of education and skill of the practitioner as outlined in the Alberta Occupational Competency Profile

3 – Variable

Competencies that include the knowledge, skills, attitudes and judgment that enhance triage, treatment and transport, but vary from situation to situation, service to service and patient to patient. The competency may affect how the EMR/EMT/Paramedic provides patient care. The delineation of the competency as variable has been approved by the Council and is consistent with the level of education and skill of the practitioner as outlined in the Alberta Occupational Competency Profile

Rating Scale

1 - The practitioner does not have the knowledge, skills, attitudes, or judgements to perform the competency in a safe manner.

1

2 - The practitioner is new to the competency, or is developing the knowledge, skills, attitude, or judgements described in the competency.

2

3 – The practitioner meets the basic expectations of the knowledge, skills, attitudes, or judgements described in the competency.

3

4 – The practitioner exceeds the basic expectations of the knowledge, skills, attitudes, or judgements described in the competency.

4

5 – The practitioner is recognized as having exceptional knowledge, skills, attitudes, or judgements in the performance of the competency.

5

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Emergency Medical Responder - Competency Profile

A. Core Knowledge

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B. Safety

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Emergency Medical Responder - Competency Profile

C. Communications and Interpersonal Skills

C-1	1	C-2	1	C-3	1	C-4	1
Communicate	2	Assess and	2	Operate	2	Knowledge of	2
Effectively	3	Control	3	Communication	3	Medical	3
	4	Situations	4	Devices	4	Dispatch	4
1	5	1	5	2	5	3	5

C-5	1	C-6	1	C-7	1
Knowledge of	2	Awareness of	2	Demonstrate	2
Cultural	3	Patients	3	Documentation	3
Diversity	4	Special Needs	4	And Reporting	4
3	5	3	5	1	5

D. Patient Assessment

D-1	1	D-2	1	D-3	1	D-4	1
Perform	2	History	2	Perform	2	Perform	2
Primary	3	Gathering	3	Secondary	3	Obstetrical	3
Survey	4		4	Survey	4	Assessment	4
1	5	1	5	1	5	2	5

D-5	1	D-6	1	D-7	1	D-8	1
Perform	2	Perform	2	Perform	2	Perform	2
Neonatal	3	Pediatric	3	Geriatric	3	Psychological	3
Assessment	4	Assessment	4	Assessment	4	/ Behavioural	4
1	5	1	5	1	5	1	5

E. Ability to Perform Patient Systems Assessment

E-1	1	E-2	1	E-3	1	E-4	1
Perform	2	Perform	2	Perform	2	Perform	2
Neurological	3	Respiratory	3	Cardiovascular	3	GI/GU	3
Assessment	4	Assessment	4	Assessment	4	Assessment	4
1	5	1	5	1	5	2	5

E-5	1	E-6	1
Perform	2	Perform	2
Integumentary	3	Musculoskeletal	3
Assessment	4	Assessment	4
2	5	1	5

Alberta College of Paramedics

Emergency Medical Responder - Competency Profile

F. Perform and Interpret Diagnostic Testing

F-1	1	F-2	1	F-3	1
Perform	2	Perform	2	Perform	2
Vital Signs	3	Oximetry	3	Glucometric	3
	4	Testing	4	Testing	4
1	5	1	5	1	5

G. Medication Administration

G-1	1	G-2	1	G-3	1	G-4	1
Medication	2	Administration	2	Administration	2	Administration	2
Administration	3	via Oral Route	3	via Inhalation	3	via	3
	4		4		4	Intramuscular	4
1	5	1	5	1	5	1	5
						Route	5

H. Clinical Decision Making

H-1	1	H-2	1	H-3	1	H-4	1
Principles of	2	Determine Care	2	Determine Care	2	Determine Care	2
Effective	3	for Neurological	3	for Respiratory	3	for	3
Decision	4	Alterations	4	Alterations	4	Cardiovascular	4
1	5	1	5	1	5	1	5
Making						Alterations	5

H-5	1	H-6	1	H-7	1	H-8	1
Determine Care	2	Determine Care	2	Determine Care	2	Determine Care	2
for GI / GU	3	for	3	for Endocrine /	3	for	3
Alterations	4	Musculoskeletal	4	Immune	4	Integumentary	4
2	5	1	5	1	5	1	5
		Alterations		Alterations		Alterations	

H-9	1	H-10	1	H-11	1	H-12	1
Determine Care	2	Determine Care	2	Determine Care	2	Determine Care	2
for Poisoning or	3	for Extremes of	3	for Behavioural	3	for Obstetric /	3
Overdose	4	Temperature	4	Crises	4	Gynecological	4
1	5	1	5	1	5	1	5
						Patients	

H-13	1	H-14	1	H-15	1	H-16	1
Determine Care	2	Determine Care	2	Determine Care	2	Determine Care	2
for Neonatal	3	for Pediatric	3	for Geriatric	3	for Physically	3
Patients	4	Patients	4	Patients	4	Challenged	4
1	5	1	5	2	5	2	5
				Patients		Patients	

H-17	1	H-18	1
Determine Care	2	Multiple	2
for Special	3	Casualty	3
Needs Patients	4	Incident (MCI)	4
2	5	1	5

Alberta College of Paramedics

Emergency Medical Responder - Competency Profile

I. Patient Management Skills

I-1		1
Perform Airway Management		2
		3
		4
1		5

I-2		1
Perform Oxygen Therapy		2
		3
		4
1		5

I-3		1
Perform Patient Ventilation		2
		3
		4
1		5

I-4		1
Perform Cardio-pulmonary Resuscitation (CPR)		2
		3
		4
1		5

I-5		1
Perform Automated Defibrillation		2
		3
		4
1		5

I-6		1
Perform External Hemorrhage Control		2
		3
		4
1		5

I-7		1
Perform Bandaging and Wound Care		2
		3
		4
1		5

I-8		1
Perform Spinal Motion Restriction		2
		3
		4
1		5

I-9		1
Perform Splinting		2
		3
		4
1		5

J. Patient Transport

J-1		1
Have a Working Understanding of Ground Transport		2
		3
		4
1		5

J-2		1
Have a Working Understanding of Fixed Wing Transport		2
		3
		4
2		5

J-3		1
Have a Working Understanding of Rotor Wing Transport		2
		3
		4
2		5

J-4		1
Have a Working Understanding of Marine Transport		2
		3
		4
3		5

J-5		1
Safely Convey Patients		2
		3
		4
1		5

K. Professionalism

K-1		1
Knowledge of Alberta Occupational Competency Profile		2
		3
		4
1		5

K-2		1
Knowledge of Standards of Practice		2
		3
		4
1		5

K-3		1
Knowledge of Code of Ethics		2
		3
		4
1		5

K-4		1
Maintain Currency in Professional Development		2
		3
		4
1		5

K-5		1
Maintain Personal Well-being		2
		3
		4
2		5

K-6		1
Ability to Work Effectively in Multi-disciplinary Environments		2
		3
		4
2		5

K-7		1
Demonstrate Leadership Skills		2
		3
		4
1		5

Major Competency Area: **A**

A. Core Knowledge

Priority: **Two**

Competency: **A-1**

A-1 Knowledge of Medical Terminology

An EMR will:

- A-1-1 Identify and define commonly used root words, prefixes, suffixes and abbreviations.**
- A-1-2 Identify and use an accepted standard of medical symbols and acronyms.**
- A-1-3 Recognize and use terminology related to specific body systems and their diseases.**
- A-1-4 Use appropriate medical terminology in reporting and documentation.**

Major Competency Area: A

Core Knowledge

Priority: **One**

Competency: **A-2**

A-2 Knowledge of Anatomy and Physiology

An EMR will:

A-2-1 Define and explain the relationship between anatomy and physiology as a basis for understanding the human body:

- Define anatomy and physiology and how they relate to each other;
- Identify the principle systems of the human body, list the representative organs for each system, and describe the function of each system;
- Define the anatomical positions and compare common and anatomical terms used to describe various regions of the human body;
- Define the anatomical planes that may be passed through the human body;
- Define directional terms used in association with the human body;
- List by name and location the principle body cavities and the organs contained within them;
- Explain how the abdominopelvic cavity is divided into nine regions and into quadrants.

A-2-2 Demonstrate an understanding of the nervous system:

- Identify the principle parts of the brain;
- Describe how the brain is protected;
- Explain how the spinal cord is protected;
- Identify the functions of the spinal cord;
- Describe the gross anatomical features of the spinal cord;
- Describe spinal cord injury and list the immediate and long-range effects.

A-2-3 Demonstrate an understanding of the endocrine system:

- Discuss the functions of the endocrine system in maintaining homeostasis;
- Define the term hormone;
- Discuss the location and function of the following endocrine glands: pituitary gland, thyroid gland, parathyroid gland, pancreas, adrenal gland, ovaries, and testes.

An EMR will:

A-2-4 Demonstrate an understanding of the respiratory system:

- Identify the organs of the respiratory system;
- Compare the structure and function of the external and internal nose;
- Identify the regions of the pharynx and describe their roles in respiration;
- Describe the structure of the larynx and explain its function in respiration and voice production;
- Explain the structure and function of the trachea;
- List the events involved in inspiration and expiration;
- Explain how compliance and airway resistance relate to breathing;
- Describe how the oxygen-carrying capacity of the blood is affected by oxygen and carbon dioxide.

A-2-5 Demonstrate an understanding of the cardiovascular system:

- Contrast the general roles of blood, lymph, and interstitial fluid in maintaining homeostasis;
- Define the principle physical characteristics of blood and its functions in the body;
- Explain how the body attempts to prevent blood loss;
- Describe the location of the heart and identify its borders;
- Describe the structure of the pericardium;
- Compare the structure and function of arteries, arterioles, capillaries, venules, and veins;
- Define pulse and identify the arteries where a pulse may be palpated;
- Define systolic, diastolic, and pulse pressures;
- Identify the principle arteries and veins of systemic circulation;
- Identify the major blood vessels of pulmonary circulation;
- Explain the effects of exercise on the cardiovascular system;
- Describe the effects of aging on the cardiovascular system.

A-2-6 Demonstrate an understanding of the musculoskeletal system:

- Discuss the components and functions of the skeletal system;
- Explain the effects of aging on the skeletal system;
- Define the principle types of bones;
- List the components of the axial skeleton;
- List the components of the appendicular skeleton;
- List the characteristics and functions of muscle tissue;
- Describe the relationship between bones and skeletal muscles in producing body movements.

Competency: **A-2**

Knowledge of Anatomy and Physiology

Page: 3

An EMR will:

A-2-7 Demonstrate an understanding of the gastrointestinal and genitourinary systems:

- Identify the gross anatomical features of the kidneys;
- Discuss the structure of the ureters;
- Describe the structure of the urinary bladder;
- Explain the physiology of the micturition reflex;
- Explain the structure of the urethra.

A-2-8 Demonstrate an understanding of the process of pregnancy:

- Identify the location and function of ovaries, fallopian tubes, uterus, endometrium, cervix, vagina, perineum, labia.

A-2-9 Demonstrate an understanding of the integumentary system:

- Define integumentary system;
- Describe the specific tissue types composing the epidermis and dermis;
- Describe the different functions of the skin, and discuss how these functions are accomplished by the various skin components;
- Explain why a serious burn represents a loss of homeostasis and a threat to life;
- Explain the importance of body temperature regulation.

Major Competency Area: A

Core Knowledge

Priority: **One**

Competency: **A-3**

A-3 Knowledge of Pathophysiology

An EMR will:

A-3-1 Define pathophysiology as the study of disease processes.

A-3-2 Identify and describe basic pathophysiological processes:

- Etiology;
- Pathophysiology;
- Manifestations;
- Complications;
- Chronic versus acute condition/disorders.

A-3-3 Describe common body responses to disease:

- Level of organization;
 - cellular
 - tissue
 - organ
 - system
- Immunity;
- Inflammation;
- Stress;
- Carcinogenesis;
- Psychological.

Competency: **A-3**

Knowledge of Pathophysiology

Page: 2

An EMR will:

A-3-4 Identify the etiology, pathophysiology, presentations and common complications related to the following systems:

- Central nervous;
- Respiratory;
- Cardiovascular;
- Lymphatic;
- Immune;
- Endocrine;
- Gastrointestinal;
- Genitourinary;
- Musculoskeletal;
- Integumentary System.

Major Competency Area: A
Core Knowledge

Priority: One

Competency: A-4
A-4 Knowledge of Pharmacology

An EMR will:

- A-4-1 Differentiate trade and generic names.**
- A-4-2 Distinguish among drug preparations.**
- A-4-3 Explain the meaning of drug terms necessary to safely interpret information in drug-reference sources:**
 - Half-life;
 - Therapeutic index;
 - Peak level;
 - Lethal Dose;
 - Onset of action, duration, agonist, antagonist.
- A-4-4 Discuss factors that influence drug absorption, metabolism, distribution, and elimination.**
 - Age of patient, body mass, physical condition, drug action and interaction.
- A-4-5 Demonstrate a working knowledge of major effects and side effects of medications and drug families including, but not limited to:**
 - Bronchodilators;
 - Salbutamol
 - Ipratropium Bromide
 - Adrenergic agonists;
 - Epinephrine
 - Platelet Inhibitors;
 - Acetylsalicylic acid
 - Anti-hypoglycemic agents;
 - Oral glucose gel
- A-4-6 Describe how drugs react with receptors to produce the desired effects.**
- A-4-7 Calculate and correctly measure or infuse the correct volume of drug to be administered for a given situation (specific to EMR medications).**
- A-4-8 Demonstrate a working knowledge of the “Compendium of Pharmaceuticals and Specialties” and other drug reference material.**

Major Competency Area: A

Core Knowledge

Priority: **Three**

Competency: **A-5**

A-5 Knowledge of Governing Legislation

An EMR will:

- A-5-1 State the relevance and application of the *Health Disciplines Act*:**
- EMT Regulation.
- A-5-2 State the relevance and application of the *Ambulance Services Act*:**
- Confidentiality;
 - Staff, Equipment and Maintenance.
- A-5-3 State the relevance and application of the *Health Professions Act*:**
- Paramedic Regulation.

Provincial Legislation - www.qp.gov.ab.ca/catalogue/catalog_results.cfm

- A-5-4 State the relevance and application of the *Traffic Safety Act*.**
- A-5-5 Demonstrate knowledge of the *Child, Youth & Family Enhancement Act*.**
- A-5-6 Demonstrate knowledge of the *Protection of Persons in Care Act*.**
- A-5-7 Demonstrate knowledge of the *Fatality Inquiries Act*.**
- A-5-8 Demonstrate knowledge of the *Freedom of Information and Protection of Privacy Act*.**
- A-5-9 Demonstrate knowledge of the *Emergency Medical Aid Act*.**
- A-5-10 Demonstrate knowledge of the *Limitations Act*.**
- A-5-11 Demonstrate knowledge of the *Mental Health Act*.**
- A-5-12 Demonstrate knowledge of the *Personal Directives Act*.**
- A-5-13 Demonstrate knowledge of the *Occupational Health and Safety Act*.**
- A-5-14 Demonstrate knowledge of the *Health Information Act*.**

Federal Legislation - [/laws.justice.gc.ca/en/title/A.html](http://laws.justice.gc.ca/en/title/A.html)

- A-5-15 Demonstrate knowledge of the *Controlled Drugs and Substances Act*.**
- A-5-16 Demonstrate knowledge of the *Transportation of Dangerous Goods Act*.**
- A-5-17 Demonstrate knowledge of the *Charter of Rights and Freedoms*.**

Major Competency Area: A

Core Knowledge

Priority: **One**

Competency: **A-6**

A-6 Knowledge of Ambulance Equipment

An EMR will:

- A-6-1 Identify the standards of ambulance equipment and supplies for, including, but not limited to, safe patient transport.**
- A-6-2 Identify equipment required for spinal motion restriction, including, but not limited to:**
- Spine boards;
 - Head motion restriction devices;
 - Cervical collars;
 - Straps;
 - Upper body motion restriction devices.
- A-6-3 Identify equipment required for splinting, including, but not limited to:**
- Air splint;
 - Vacuum splint;
 - Rigid splint;
 - Malleable splint.
- A-6-4 Identify equipment required for wound care, including, but not limited to:**
- Dressings;
 - Bandages;
 - Tweezers.
- A-6-5 Identify equipment required for patient movement, including, but not limited to:**
- Ambulance stretcher;
 - Chair stretcher;
 - Portable stretcher;
 - Scoop stretcher;
 - Basket stretcher;
 - Spine boards.

An EMR will:

A-6-6 Identify equipment required for airway management, including, but not limited to:

- Oxygen tanks;
- Oxygen delivery devices;
- Oxygen regulators;
- Suction devices;
- Oropharyngeal airway;
- Positive pressure ventilation device ;
- Pocket mask;
- Nasopharyngeal airway.

A-6-7 Identify equipment required for medication administration, including, but not limited to:

- Nebulizers;
- Syringes;
- Needles;
- Sharps container.

A-6-8 Identify equipment required for patient comfort, including, but not limited to:

- Urinal;
- Bedpan;
- K-basins;
- Facial tissue;
- Blankets, pillows, etc.

Major Competency Area: **A**

Core Knowledge

Priority: **One**

Competency: **A-7**

A-7 Knowledge of Instrumentation

An EMR will:

A-7-1 Demonstrate knowledge and use of instrumentation, including, but not limited to:

- Blood pressure cuff:
 - automatic
 - manual
- Stethoscope;
- Glucometer;
- Thermometer;
- Penlight;
- Automated / semi-automated external defibrillator;
- Pulse oximeter.

Major Competency Area: A

Core Knowledge

Priority: **Three**

Competency: **A-8**

A-8 Knowledge of EMS Systems and Health Care

An EMR will:

- A-8-1 Outline key historical events that influenced the development of the EMS profession.**
- A-8-2 Differentiate among the three identified levels of care: EMR, EMT, and EMT-P.**
- A-8-3 Identify various models for EMS delivery in the Province of Alberta.**
- A-8-4 List and define the components of an EMS system.**
- A-8-5 Discuss the responsibilities of the physician medical director regarding on-line and off-line medical control.**
- A-8-6 Describe public involvement in an EMS system, with regard to system access, recognition of an emergency, and initiation of basic life support.**
- A-8-7 Describe the use of patient transfer protocols for ground and air transport services.**
- A-8-8 Describe the categorization of receiving facilities and explain how the coordination of resources is attained.**
- A-8-9 Outline the various designs and financing methods for an EMS system.**

Major Competency Area: **A**

Core Knowledge

Priority: **Two**

Competency: **A-9**

A-9 Knowledge of EMS Resources

An EMR will:

- A-9-1 Identify various resources that may assist the EMS system:**
- Fire Department;
 - Specialized rescue;
 - Hazardous Materials Teams;
 - Law Enforcement;
 - Utilities/Public Works;
 - Crisis Intervention Professionals;
 - Community response agencies;
 - Military;
 - Emergency Management Alberta;
 - Industrial / Industry.
- A-9-2 Identify the components of mutual aid and contractual service agreements.**
- A-9-3 Identify the components of mass-casualty or disaster plans.**

Major Competency Area: A

Core Knowledge

Priority: **Three**

Competency: **A-10**

A-10 Knowledge of Critical Incident Stress Management

An EMR will:

- A-10-1 Define stress and outline the phases of the stress response.**
- A-10-2 Differentiate between normal and detrimental reactions to anxiety and stress:**
 - Physical;
 - Cognitive;
 - Behavioural.
- A-10-3 Describe the management of patients, family members, and bystanders who are encountering a stressful situation.**
- A-10-4 List situations that may provoke job stress.**
- A-10-5 Describe stress-management techniques.**
- A-10-6 Identify various defense mechanisms.**
- A-10-7 Recognize the stages of grief that a patient or significant other may experience during death or dying.**
- A-10-8 Describe the purpose of Critical Incident Stress Management (CISM).**
- A-10-9 Describe appropriate ways to help the patient, family, or significant other deal with a situation in which death is imminent or has occurred.**
- A-10-10 Describe the special needs of children related to their understanding of death and dying.**

Major Competency Area: A

Core Knowledge

Priority: **Two**

Competency: **A-11**

A-11 Knowledge of Medical-Legal Issues

An EMR will:

- A-11-1 Describe the two categories of law in Canada.**
- A-11-2 Define common medical-legal terms that apply to situations involving patient care:**
- Negligence;
 - Duty to act;
 - Abandonment;
 - False imprisonment;
 - Assault;
 - Battery.
- A-11-3 List situations legally required to report.**
- A-11-4 Discuss the concept of “standard of care”.**
- A-11-5 List and define the four components required to prove negligence.**
- A-11-6 Discuss the types of consent: expressed or implied.**
- A-11-7 Describe the process for obtaining consent.**
- A-11-8 Define the term “informed consent” and relate it to provision of care.**
- A-11-9 Discuss the importance of the medical record.**
- A-11-10 List several methods of risk management.**
- A-11-11 Describe responsibilities to maintain patient confidentiality:**
- Understand legal ramifications associated with breach of confidentiality.
- A-11-12 Describe actions to be taken in a refusal-of-care situation:**
- Understand legal ramifications associated with refusal of care situations and appropriate documentation.

Major Competency Area: **B**

B. Safety

Priority: **One**

Competency: **B-1**

B-1 Create and Maintain a Safe Work Environment

An EMR will:

B-1-1 Demonstrate knowledge of a safe work environment:

- Secure access to work environment;
- Fire alarms, extinguishers and exits;
- Spill kits;
- Eye wash stations;
- Communication devices ;
- Signage, i.e. ;
 - wet floor
 - uneven surface
 - emergency power.

Major Competency Area: **B**

Safety

Priority: **Two**

Competency: **B-2**

B-2 Ability to Operate a Vehicle

An EMR will:

B-2-1 Demonstrate knowledge and ability to perform a vehicle safety check:

- Tires;
 - cuts
 - wear bars
 - stone bruises
 - inflation
- Engine compartment;
 - fluids
 - antifreeze
 - power steering
 - oil
 - washer
 - transmission
 - brake
 - leaks
 - battery;
 - corrosion
 - secured
 - belt(s);
 - cracks
 - wear
 - tension
 - hose(s)
 - condition
 - leaks
- Vehicle exterior;
 - physical damage
 - lighting
 - clearance lights

Competency: **B-2**

Ability to Operate a Vehicle

Page: 2

An EMR will:

B-2-1 Demonstrate knowledge and ability to perform a vehicle safety check:

- Vehicle exterior lighting (continued);
 - brake lights
 - signal lights
 - head lights
 - tail lights
 - reverse lights
 - emergency lights
 - four way flasher
 - light bar
 - flashers (primary/secondary }
 - scene lights
 - doors
 - compartments
 - patient loading
 - side
 - driver / passenger
 - wiper blades
- Vehicle interior;
 - cab
 - set mirrors
 - safety belts
 - horn / siren
 - back up alarm
 - gauges
 - fuel
 - oil
 - voltage / amp
 - air
 - temperature
 - seats
 - windows and locks
 - check communication equipment
 - two-way radio
 - cellular phone
 - Global Positioning System (GPS)
 - pagers

- laptop computers

Competency: **B-2**

Ability to Operate a Vehicle

Page: 3

An EMR will:

B-2-1 Demonstrate knowledge and ability to perform a routine vehicle safety check (continued):

- Cab (continued);
 - master power
 - environmental system
 - heating
 - air conditioning
 - other
 - maps
 - hazardous material references
 - portable radio
 - fuel card
 - flashlights
 - insurance / registration
 - secure loose items
 - patient compartment
 - stretcher and mount
 - on-board suction
 - main oxygen system
 - lighting
 - heating / air conditioning
 - restraining devices
 - safety nets
 - seat belts
 - child car seats
 - stretcher restraints
 - portable equipment secured
 - cabinet doors secured

B-2-2 Rolling Check:

- Transmission;
- Steering;
- Braking;
 - antilock braking system (ABS)
- Acceleration / throttle.

An EMR will:

B-2-3 Driving techniques:

- Routine;
 - acceleration
 - braking
 - steering
- Emergency;
 - acceleration
 - braking
 - steering
- Driving elements;
 - rain
 - snow
 - ice
 - wind
 - surface
 - sun
 - night
 - day
 - traffic
 - passengers / pedestrians
 - patients
 - wildlife
- Collision avoidance ;
 - evasive maneuvers
 - driving tactics
 - risk management program
 - staging of vehicles

An EMR will:

B-2-4 Demonstrate knowledge of driving theory and human factors:

- Fatigue ;
- Vision ;
 - colour perception
 - blind spot
 - night vision
 - peripheral vision
- Emotional control;
- Signaling devices;
- Risk management.

B-2-5 Demonstrate understanding of the causes of vehicle collisions.

B-2-6 Maintain appropriate Alberta Driver's License if working for an ambulance service.

Major Competency Area: **B**

Safety

Priority: **One**

Competency: **B-3**

B-3 Knowledge of Personal Protection Equipment

An EMR will:

B-3-1 Demonstrate knowledge and ability to use personal protective equipment while interacting and providing patient care:

- Gloves;
- Masks;
- Face shields;
- Ear protection;
- Gowns and aprons;
- Footwear;
- Appropriate clothing;
 - reflective
 - seasonal
 - turn-out gear
- Head gear;
- Body armor;
- Safety glasses.

B-3-2 Demonstrate knowledge and ability to use protective equipment, such as:

- Biochemical waste disposal;
- Eye wash stations;
- Fire extinguishers;
- Sharps containers;
- Spill kits.

Major Competency Area: **B**

Safety

Priority: **One**

Competency: **B-4**

B-4 Ability to Assess Scene Safety

An EMR will:

B-4-1 Demonstrate knowledge and ability to perform scene assessment:

- Analyze dispatch information;
- Prior to entering scene;
 - power lines
 - fire or threat of fire
 - hazardous fluid / material spills / toxic gases
 - explosion or threat of explosion (primary or secondary)
 - possible structure / area collapse
 - violence or crime
 - animals
 - patient
 - bystanders
 - weapons
 - hostage
 - presence of other emergency agencies
 - environment
 - heat
 - cold
 - low oxygen
 - wind
 - rain
 - snow
 - traffic
 - assess need for additional resources
- Entering scene;
 - approach cautiously
 - plan egress route
 - vehicle
 - personal

Competency: **B-4**

Ability to Assess Scene Safety

Page: 2

An EMR will:

B-4-1 Demonstrate knowledge and ability to perform scene assessment (continued):

- On scene;
 - body fluids
- Emotional state of patient and bystanders ;
- Take precautions to preserve evidence or record location prior to disturbing the area;
- Leaving scene
 - remove bio-hazard materials
 - sharps
 - equipment
 - necessary personal items

Major Competency Area: **B**

Safety

Priority: **One**

Competency: **B-5**

B-5 Practice Safe Lifting and Moving Techniques

An EMR will:

B-5-1 Demonstrate proper body mechanics:

- Body alignment;
- Body balance;
- Base of support;
- Centre of gravity;
- Coordinated body movement;
 - self
 - partner(s)
- Communication with partner.

B-5-2 Demonstrate awareness of potential injuries from poor biomechanics.

Major Competency Area: **B**

Safety

Priority: **Two**

Competency: **B-6**

B-6 Knowledge of Basic Extrication Principles

An EMR will:

B-6-1 Demonstrate knowledge of extrication principles:

- Vehicles;
- Assess need for resources;
 - heavy rescue
 - confined space
 - trench
 - high angle
 - dive / aquatic
- Assess need for rapid extrication;
- Assess need for protection;
 - self
 - partner
 - patient
 - bystanders.

Major Competency Area: **B**

Safety

Priority: **Two**

Competency: **B-7**

B-7 Identify and Resolve Potential Occupational Hazards

An EMR will:

B-7-1 Demonstrate knowledge and ability to recognize:

- When Occupational Health and Safety (OH&S) is required;
 - notification
 - documentation
- Potential hazards of industry;
 - construction
 - petroleum
 - manufacturing
 - agriculture
 - transportation
 - forestry
- When Worker's Compensation Board is required;
 - notification
 - documentation.

Major Competency Area: **B**

Safety

Priority: **One**

Competency: **B-8**

B-8 Apply Infection Control Precautions

An EMR will:

B-8-1 Demonstrate knowledge and ability to use aseptic technique.

B-8-2 Demonstrate knowledge of elements of infection control:

- The infection agent – pathogen;
- Reservoir - pathogen environment;
- Exit from reservoir – vector;
- Transportation (exudate, feces, and needle);
- Entrance (skin, mucous lining or mouth);
- Host (human or animal).

B-8-3 Demonstrate ability to establish isolation / reverse isolation procedures:

- Appropriate protection of self / patient;
- Disposal of utensils, supplies and waste;
- Proper handling of equipment;
- Explanation to patients.

Major Competency Area: **B**

Safety

Priority: **Two**

Competency: **B-9**

B-9 Clean and Disinfect Equipment

An EMR will:

B-9-1 Demonstrate knowledge and ability to properly clean, disinfect or sterilize contaminated equipment:

- Clean visible spills of body fluid;
- Disinfect reusable patient care equipment;
 - low level disinfection for routine housekeeping
 - intermediate level disinfection for surfaces which contact skin
 - high level disinfection for reusable instruments that come into contact with mucous membranes
 - sterile equipment that will be used invasively
- Launder soiled clothing and linen;
- Disposal of infectious waste.

Major Competency Area: **B**

Safety

Priority: **Two**

Competency: **B-10**

B-10 Knowledge and Practice of WHMIS Regulation

An EMR will:

B-10-1 Demonstrate knowledge and ability to apply Workplace Hazardous Materials Information System (WHMIS) guidelines and regulations, such as:

- Location of material safety data sheets;
- Recognition of symbols;
- Appropriate labeling criteria;
- Appropriate packaging of material;
- Appropriate documentation for disposal.

Major Competency Area: **C**

C. Communications and Interpersonal Skills

Priority: **One**

Competency: **C-1**

C-1 Communicate Effectively

An EMR will:

C-1-1 Demonstrate knowledge of environmental impact:

- Location.
- Bystanders.

C-1-2 Demonstrate observation skills by monitoring:

- Patients activity level;
- Physical appearance;
- Body posture;
- Motor activity;
- Verbal interactions.

C-1-3 Establish effective therapeutic relationships using communication techniques:

- Know the concepts within basic communications;
 - feedback
 - non-verbal communications
 - verbal communication
- Identify the common goals of communication;
 - direct
 - entertain
 - explain
 - inform
 - persuade
 - problem solve
- Identify the elements of the communication process;
 - feedback
 - listening
 - message
 - receiver
 - response

- sender

Competency: C-1

Communicate Effectively

Page: 2

An EMR will:

C-1-3 Establish effective therapeutic relationships using communication techniques (continued):

- Identify the components of non-verbal communication when interacting with patients, families, and co-workers;
 - eye contact
 - facial expressions
 - gait
 - gestures
 - posture
 - sign language
 - touch
- Identify the components of verbal communications;
 - listening
 - oral
 - pattern of speech
 - tone of voice
 - appropriate language use
- Identify the influence of common factors on the communication process;
 - culture
 - emotion
 - environment
 - language
 - perception
 - physical
 - psychological
 - religion
 - social
 - special needs
 - stress
- Describe the importance of self-awareness to effective communications;
- Describe the importance of feedback to effective communications;
- Describe the role of effective communications in establishing, maintaining and closing interpersonal relationships;
- Describe how the communication process is used.

Competency: C-1

Communicate Effectively

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An EMR will:

- C-1-4 Demonstrate ability to identify barriers to effective communication with all age groups:**
- Language / socio-cultural;
 - Time;
 - Personal space;
 - Environment;
 - Cognitive abilities;
 - Education.
- C-1-5 Demonstrate the ability to identify the effects of communication techniques which inhibit the interaction or the relationship:**
- Advice giving;
 - Challenging;
 - Defensiveness;
 - Making judgments;
 - Probing;
 - Rejecting;
 - Stereotyping;
 - Testing.
- C-1-6 Have a knowledge of self:**
- Personal biases;
 - Boundaries; personal and professional;
 - Personal limitations.
- C-1-7 Utilizes communication and team building skills to facilitate peer consultation within the health care team and allied services:**
- Identifies functions competently as a member of an interdisciplinary team;
 - Identifies relationship of own role to the health care system;
 - Assumes required leadership roles;
 - identifies own role and roles of other team members in the local community
 - uses appropriate communication channels
 - demonstrates respect for colleagues

Competency: **C-1**

Communicate Effectively

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An EMR will:

- C-1-7 Utilizes communication and team building skills to facilitate peer consultation within the health care team (continued):**
- Identifies programs that meet the community's mental health needs;
 - Identifies components of health care system;
 - Identifies role of employing agency in the health care system;
 - Identifies own role in relation to employing agency;
 - Describes expectations of leadership roles in employing agency;
 - Identifies appropriate situations for assuming leadership role;
 - Demonstrates ability to supervise other staff as appropriate;
- C-1-8 Describe the purpose and use of common communication devices:**
- Braille;
 - Computers;
 - Hearing aids;
 - Picture boards;
 - Telephone / cell phone / pagers;
 - Sign language.
- C-1-9 Demonstrate patient care of the highest calibre through interactions with patients, co-workers and allied health care workers.**

Major Competency Area: C

**Communications and
Interpersonal Skills**

Priority: **One**

Competency: **C-2**

C-2 Assess and Control Situations

An EMR will:

- C-2-1 Demonstrate the knowledge and ability to identify the signs and symptoms of common conflicts:**
- Frustration;
 - Anger;
 - Confusion;
 - Emotional outbursts.
- C-2-2 Demonstrate the knowledge and ability to recognize the common sources of conflict:**
- Beliefs, values, biases;
 - Individual differences;
 - Expectations;
 - Professional roles and beliefs;
 - Financial concerns;
 - Religion;
 - Politics;
 - Sexual orientation;
 - Gender.
- C-2-3 Demonstrate the ability to intervene only in those conflicts that have a direct effect on patient care.**
- C-2-4 Demonstrate the knowledge and ability to report conflicts to supervisor.**
- C-2-5 Demonstrate the ability to manage the conflict by using effective communication techniques to:**
- Include all involved in conflict;
 - Separate fact from fiction;
 - Seek ideas / suggestions for resolution;
 - Select agreed upon solution;
 - Establish measures of success.

Major Competency Area: **C**

**Communications and
Interpersonal Skills**

Priority: **Two**

Competency: **C-3**

C-3 Operate Communication Devices

An EMR will:

C-3-1 Demonstrate knowledge and / or the ability to operate an emergency communication system:

- Radio;
 - base station
 - mobile transmitter / receivers
 - portable transmitter / receivers
 - repeaters
- Cellular phones;
- Pagers;
- Automated vehicle locators;
- Satellite phones;
- Telephone device for hearing impaired (tty);
- Fax;
- Landline phones;
- Computer.

Major Competency Area: **C**

**Communications and
Interpersonal Skills**

Priority: **Three**

Competency: **C-4**

C-4 Knowledge of Medical Dispatch

An EMR will:

- C-4-1 Demonstrate knowledge and ability to understand the concepts of a medical dispatch system:**
- Criteria based medical dispatch;
 - 9-1-1 call answer;
 - Computer aided dispatch systems.

Major Competency Area: **C**

**Communications and
Interpersonal Skills**

Priority: **Three**

Competency: **C-5**

C-5 Knowledge of Cultural Diversity

An EMR will:

C-5-1 Demonstrate knowledge of cultural diversity:

- Ethnic groups;
- Religious beliefs;
- Personal beliefs;
- Social background;
- Economic background.

Major Competency Area: **C**

**Communications and
Interpersonal Skills**

Priority: **Three**

Competency: **C-6**

C-6 Awareness of Patients Special Needs

An EMR will:

C-6-1 Demonstrate the knowledge and ability to adapt communication methods for special needs patients:

- Neonatal;
- Pediatric;
- Obstetric;
- Geriatric;
- Hearing impaired;
- Visually impaired;
- Mentally / physically challenged.

Major Competency Area: **C**

**Communications and
Interpersonal Skills**

Priority: **One**

Competency: **C-7**

C-7 Demonstrate Documentation and Reporting Skills

An EMR will:

C-7-1 Demonstrate the knowledge and ability to document and report patient care by:

- Recording observations and actions in a timely manner;
- Using appropriate medical terminology;
- Maintaining accurate records;
- Following agency policies / procedures;
- Identifying and using appropriate lines of authority and communication;
- Participating in the orientation and supervision of new staff;
- Using effective time management skills;
- Functioning cooperatively as a member of a multidisciplinary team;
- Directing and coordinating actions of others in emergency situations;
- Documenting and reporting high risk and / or potential legal situation;
 - substance abuse
 - suicidal risk
 - homicidal risk
 - medical conditions
 - resuscitation categories / personal directive
 - physical abuse
 - sexual abuse
 - elder abuse
 - child maltreatment
 - verbal abuse
- 24 hour clock;
- Metric system;
- Unusual incidents (occurrence) and follow-up;
 - weapons
 - volatile situations
 - Response to treatment.

Competency: **C-7**

**Demonstrate Documentation
and Reporting Skills**

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An EMR will:

C-7-2 Demonstrate the ability to follow appropriate documentation procedures to ensure accurate, complete and quality documentation for the purpose of:

- Audit;
- Education;
- Quality assurance monitoring;
- Research;
 - patient outcome
- Statistics;
- Risk management;
- Response to treatment.

Major Competency Area: **D**

D. Patient Assessment

Priority: **One**

Competency: **D-1**

D-1 Perform Primary Survey

An EMR will:

D-1-1 Perform a primary survey:

- Scene survey;
- Mechanism of injury;
- Chief complaint;
- Level of consciousness;
- Spinal precautions;
- Airway;
 - patency
- Breathing;
 - adequacy
- Circulation;
 - perfusion assessment
 - bleeding
 - skin condition
- Physical assessment;
 - head
 - neck
 - chest
 - abdomen
 - pelvis
 - extremities
 - back
- Transport decision.

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-2**

D-2 History Gathering

An EMR will:

D-2-1 Evaluate a chief complaint including as a minimum:

- Onset;
- Provocation;
- Quality;
- Radiation / region;
- Severity;
- Time;
- Associated symptoms.

D-2-2 Obtain a patient history including as a minimum:

- Allergies;
- Medications;
- Past medical history;
- Last meal;
- Events preceding.

D-2-3 Demonstrate the ability to obtain a general and focused history.

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-3**

D-3 Perform Secondary Survey

An EMR will:

D-3-1 Perform a secondary survey:

- Vital signs;
 - pulse
 - respirations
 - blood pressure
 - temperature
 - pulse oxymetry
 - blood glucose level (BGL)
- Physical assessment;
 - head
 - neck
 - chest
 - abdomen
 - pelvis
 - extremities
 - back

Major Competency Area: **D**

Patient Assessment

Priority: **Two**

Competency: **D-4**

D.4 Perform Obstetrical Assessment

An EMR will:

D-4-1 Describe the components of an obstetrical history:

- Multiparity;
- Estimated date of confinement;
- Last normal menstrual period;
- Meconium staining;
- Bleeding;
- Mucous plug;
- Membranes ruptured;
- Pre-natal care;
- Presence of contractions;
 - onset
 - frequency
 - duration
 - strength
- Para / gravida;
- Maternal medications;
- Maternal risk factors.

D-4-2 Describe the components of an obstetrical assessment:

- Visual examination;
 - crowning
 - show
 - membranes (intact / ruptured)
 - meconium staining.

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-5**

D-5 Perform Neonatal Assessment

An EMR will:

D-5-1 List the components of a neonatal history:

- Pre-natal care;
- Delivery complications;
- Gestational age;
- APGAR scores.

D-5-2 List the components of a neonatal assessment:

- Assess resuscitative efforts;
- APGAR score;
 - taken at 1 minute and 5 minutes after birth
 - scoring criteria
 - Appearance
 - Pulse
 - Grimace
 - Activity
 - Respirations

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-6**

D-6 Perform Pediatric Assessment

An EMR will:

D-6-1 Adapt approach to patient:

- Infant;
- Toddler;
- Child;
- Adolescent.

D-6-2 Adapt physical assessment to patient:

- Developmental characteristics.

D-6-3 Adapt patient history gathering techniques to patient.

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-7**

D-7 Perform Geriatric Assessment

An EMR will:

D-7-1 Adapt approach to patient.

D-7-2 Adapt physical assessment to patient considering the changes that occur due to the aging process.

D-7-3 Adapt history gathering techniques to patient.

Major Competency Area: **D**

Patient Assessment

Priority: **One**

Competency: **D-8**

D-8 Perform Psychological / Behavioural Assessment

An EMR will:

- D-8-1 Demonstrate knowledge of psychological / behavioural events, including, but not limited to:**
- Psychiatric emergencies;
 - Suicide;
 - Death and dying;
 - Sexual assault;
 - Child maltreatment;
- D-8-2 Define the term crisis and define why stress is different from a crisis.**
- D-8-3 Describe the characteristics of a crisis.**
- D-8-4 Describe the stages / phases of a crisis:**
- Pre-crisis phase;
 - Impact phase;
 - Crisis phase;
 - Resolution phase;
 - Post-crisis phase.
- D-8-5 Demonstrate the ability to implement an organized and systematic approach to a patient experiencing psychological or behavioural emergency.**
- D-8-6 Demonstrate the ability to control a situation while performing an assessment:**
- Ensure safety of self/team;
 - Ensure safety of patient;
 - Apply restraint techniques;
 - physical
 - Bystander control.

Competency: **D-8**

**Perform Psychological / Behavioural
Assessment**

Page: 2

An EMR will:

D-8-7 Describe the “Dual Action Approach”.

- Assess;
- Control;
- Treat;
- Inform;
- Okay;
- Notate;

- Attitudes;
- Concern;
- Thinking ability;
- Interactions;
- Objectivity;
- Needs.

D-8-8 Describe communication techniques used in managing a patient presenting with a crisis:

- Interviewing techniques;
 - Position
 - Posture
 - Observe
 - Listen
- Empathic attitude;
 - Reflecting
- Adapt specific communication based upon age.

Major Competency Area: **E**
E. Ability to Perform Patient Systems Assessment

Priority: **One**

Competency: **E-1**
E-1 Perform Neurological Assessment

An EMR will:

E-1-1 Demonstrate knowledge and ability to assess the level of consciousness:

- AVPU;
 - Alert
 - Verbal
 - Painful
 - Unresponsive
- Person;
- Place;
- Time;
- Event.

E-1-2 Demonstrate knowledge and ability to assess the patient by using, but not limited to, the acronym:

- AEIOU TIPS;
 - alcohol, apnea, anaphylaxis
 - epilepsy, environmental (heat / cold)
 - insulin (diabetes)
 - overdose
 - uremia
 - trauma
 - infection
 - psychiatric, poisoning
 - stroke, shock.

E-1-3 Demonstrate knowledge and ability to use a cerebral vascular accident assessment scale:

- Cincinnati Stroke Scale.

Major Competency Area: **E**

**Ability to Perform
Patient Systems Assessment**

Priority: **One**

Competency: **E-2**

E-2 Perform Respiratory Assessment

An EMR will:

E-2-1 Demonstrate knowledge and ability to visually assess the chest:

- Chest shape and scarring;
- Identify rate, quality and depth of respiration;
- Identify equal bilateral chest expansion;
- Identify accessory muscle use;
- Identify tracheal tug / tracheal deviation / intercostal indrawing.

E-2-2 Demonstrate knowledge and ability to identify abnormal sounds of breathing:

- Stridor;
- Snoring;
- Gurgles;

E-2-3 Demonstrate knowledge and ability to identify breath sounds via auscultation:

- Of the lung fields;
 - apices / bases
 - bilateral
- Normal breath sounds;
- Adventitious sounds;
 - wheezes
 - crackles.

E-2-4 Demonstrate knowledge and ability to palpate the chest:

- Identify fractures, flail segments, subcutaneous emphysema.

Major Competency Area: **E**

**Ability to Perform
Patient Systems Assessment**

Priority: **One**

Competency: **E-3**

E-3 Perform Cardiovascular Assessment

An EMR will:

- E-3-1 Demonstrate knowledge and ability to identify rate, rhythm, and quality of pulses:**
- Central;
 - Peripheral.
- E-3-2 Demonstrate knowledge and ability to identify jugular venous distention (JVD).**
- E-3-3 Demonstrate knowledge and ability to consider a differential diagnosis of chest pain, including, but not limited to:**
- Angina;
 - Myocardial infarction;
 - Pleurisy;
 - Pneumonia;
 - Pulmonary embolism;
 - Aortic aneurysm;
 - Chest wall;
 - Congestive heart failure;
 - Pulmonary edema;
 - Thoracic trauma.
- E-3-4 Demonstrate knowledge and ability to identify signs and symptoms of shock:**
- Hypovolemic;
 - Cardiogenic;
 - Neurogenic;
 - Septic;
 - Anaphylactic.
- E-3-5 Demonstrate knowledge and ability to identify peripheral edema:**
- Pitting;
 - Non-pitting.

Major Competency Area: **E**

**Ability to Perform
Patient Systems Assessment**

Priority: **Two**

Competency: **E-4**

E-4 Perform Gastrointestinal / Genitourinary Assessment

An EMR will:

E-4-1 Demonstrate knowledge and ability to assess abdomen:

- Distention;
- Trauma;
- Scars / needle marks;
- Pulsating masses.

E-4-2 Demonstrate knowledge and ability to consider a differential diagnosis of abdominal pain:

- Location;
- Strength;
- Radiation;
- Mechanism.

E-4-3 Demonstrate knowledge and ability to interpret visual findings and abnormalities of:

- Emesis;
- Stools;
- Urine.

E-4-4 Demonstrate the knowledge and ability to palpate the abdomen:

- Rigidity;
- Guarding;
- Pulsating masses / tenderness.

E-4-5 Demonstrate knowledge and ability to identify trauma / medical complications of pregnancy.

E-4-6 Demonstrate knowledge and ability to identify trauma / medical complications of male / female genitalia.

Major Competency Area: **E**

**Ability to Perform
Patient Systems Assessment**

Priority: **Two**

Competency: **E-5**

E-5 Perform Integumentary Assessment

An EMR will:

- E-5-1 Demonstrate knowledge and ability to interpret skin color, condition and temperature.**
- E-5-2 Demonstrate knowledge and ability to interpret burns by degree and rule of nines:**
- Adult;
 - Pediatric.
- E-5-3 Demonstrate knowledge and ability to identify causes of burns:**
- Thermal;
 - Chemical;
 - Radiation;
 - Electrical.
- E-5-4 Demonstrate knowledge and ability to identify abnormalities in the integumentary system:**
- Anatomical location and distribution;
 - Lesions;
 - Urticaria;
 - Parasitic infestations;
 - Soft tissue injuries.

Major Competency Area: **E**

**Ability to Perform
Patient Systems Assessment**

Priority: **One**

Competency: **E-6**

E-6 Perform Musculoskeletal Assessment

An EMR will:

- E-6-1 Demonstrate knowledge and ability to assess limitations to the range of motion and instability.**
- E-6-2 Demonstrate knowledge and ability to identify swelling, tenderness, inflammation, pain, crepitus, and deformity.**
- E-6-3 Demonstrate knowledge and ability to identify motor and sensory function:**
 - Symmetry;
 - Compartment syndrome.
- E-6-4 Demonstrate knowledge and ability to identify open and closed fractures.**

Major Competency Area: **F**

F. Perform and Interpret Diagnostic Testing

Priority: **One**

Competency: **F-1**

F-1 Perform Vital Signs

An EMR will:

F-1-1 Perform and interpret:

- Respiration;
 - rate
 - quality
 - rhythm
- Pulse (presence, rate, pattern);
 - carotid
 - brachial
 - apical
 - radial
 - femoral
 - popliteal
 - ulnar
 - dorsalis pedis
 - posterior tibialis
- Blood pressure;
 - auscultation
 - palpation
- Temperature;
 - oral
 - rectal
 - tympanic
 - axilla
 - dermal sensor.

Major Competency Area: **F**

**Perform and Interpret
Diagnostic Testing**

Priority: **One**

Competency: **F-2**

F-2 Perform Oximetry Testing

An EMR will:

F-2-1 Demonstrate knowledge of inclusion criteria:

- Altered mental status;
- Hemodynamic instability;
- Priority symptoms;
- History of cardiac / pulmonary disease;
- Use of sedative / narcotic drugs, etc.

F-2-2 Demonstrate knowledge of pulse oximetry technology.

F-2-3 Demonstrate knowledge of limitations:

- Environmental;
 - large amounts of ambient light interference
- Equipment;
 - optical shunt
 - using improper size sensor for patient, improper sensor positioning, patient movements
 - electrical interference
 - motion / artifact
- Patient influences;
 - cold extremities
 - peripheral vaso-constriction
 - impeded venous return
 - blood pressure cuff / tourniquet
 - hemodynamic compromise
 - poor peripheral circulation
- Edema;
- Movement;
- Clenched fists or hypertonicity of arm muscles;
- Dysfunctional hemoglobin (Hb);
 - carbon monoxide poisoning
 - anemia
- Dark nail polish;

- Medications.

Competency: **F-2**

Perform Oximetry Testing

Page: 2

An EMR will:

F-2-4 Demonstrate knowledge to record and interpret:

- Record time;
- Location of pulse;
- Reading on room air vs. Supplemental oxygen;
- Compare saturation levels to patients condition and treatment.

Major Competency Area: **F**

**Perform and Interpret
Diagnostic Testing**

Priority: **One**

Competency: **F-3**

F-3 Perform Glucometric Testing

An EMR will:

F-3-1 Perform glucometric testing by:

- Select and prepare site for sample;
- Lance;
- Obtain capillary blood sample.

F-3-2 Interpret findings:

- Normal blood glucose values;
- Hypoglycemia blood glucose values;
- Hyperglycemia blood glucose values.

F-3-3 Demonstrate knowledge, ability and understanding of glucometer testing equipment and sources of error.

Major Competency Area: **G**
G. Medication Administration

Priority: **One**

Competency: **G-1**
G-1 Medication Administration

An EMR will:

- G-1-1 Demonstrate the ability to prepare medication for administration:**
- Verify local protocol/physician order;
 - Assess appropriateness of medication for the condition;
 - Contraindications, age, weight, allergies, clinical condition, concurrent medication.
- G-1-2 Demonstrate the ability to apply guidelines for medication administration:**
- Right medication;
 - Right dosage;
 - Right route;
 - Right time;
 - Right patient;
 - Right documentation;
 - Expiry date;
 - Packaging integrity;
 - Absence of precipitate;
 - Clarity.
- G-1-3 Demonstrate knowledge to follow specific legislation and local protocol.**
- G-1-4 Demonstrate knowledge and ability to provide proper documentation:**
- Document administration of medication immediately after dispensing;
 - time
 - dose
 - route
 - effect.
- G-1-5 Provide patient information regarding medication:**
- Indications;
 - Effects;
 - Side effects.
- G-1-6 Demonstrate knowledge to evaluate patient for changes following administration:**
- Action of the medication;
 - Side effects;
 - Adverse effects.

Major Competency Area: **G**
Medication Administration

Priority: **One**

Competency: **G-2**

G-2 Administration via Oral Route

An EMR will:

- G-2-1 Demonstrate knowledge of oral route for Acute Coronary Syndrome and Hypoglycemia:**
- Rate of absorption;
 - Patient clinical condition – consciousness;
 - Properties of medication.
- G-2-2 Confirm findings, history and indications for the use of the medication for:**
- Acute Coronary Syndrome (ACS);
 - Hypoglycemia.
- G-2-3 Select the supply of the prescribed medication:**
- Acetylsalicylic Acid (ASA);
 - Oral glucose.
- G-2-4 Confirm correct medication.**
- G-2-5 Administer medication:**
- The pill, tablet, capsule or gel should be placed in the patient’s mouth;
 - Swallow with enough fluid to ensure medication reaches the stomach.
- G-2-6 Monitor patient:**
- Document effect.

Major Competency Area: **G**
Medication Administration

Priority: **One**

Competency: **G-3**

G-3 Patient Assist Administration via Inhalation

An EMR will:

G-3-1 Demonstrate knowledge of inhalation route:

- Rate of absorption;
- Patient clinical condition;
- Properties of medication.

G-3-2 Confirm findings, history and indications for the use of the medication for:

- Asthma;
- COPD.

G-3-3 Select the supply of the prescribed medication:

- Salbutamol;
- Ipratropium Bromide.

G-3-4 Confirm correct medication.

G-3-5 Prepare delivery equipment.

G-3-6 Administer medication:

- Self administration;
- Assisted administration.

G-3-7 Monitor patient:

- Document effect;

Major Competency Area: **G**
Medication Administration

Priority: **One**

Competency: **G-4**

G-4 Patient Assist Administration via Intramuscular Route

An EMR will:

- G-4-1 Demonstrate knowledge for reasons for intramuscular injection based on:**
- Rate of absorption;
 - Volume to be administered;
 - Patient clinical condition;
 - Properties of medication.
- G-4-2 Confirm findings, history and indications for the use of the medication for:**
- Anaphylaxis;
 - Special circumstance medications as introduced by Emergency Preparedness Canada.
- G-4-3 Select the supply of the prescribed medication:**
- Epinephrine (pre-filled, pre-measured);
 - Special circumstance medications as introduced by Emergency Preparedness Canada.
- G-4-4 Confirm correct medication.**
- G-4-5 Prepare site:**
- Cleanse the site.
- G-4-6 Administer medication:**
- Insert needle into intramuscular tissue;
 - Inject medication;
 - Remove the needle;
 - Dispose of needle in supplied sharps container;
 - Cover the puncture site;
 - Massage gently to facilitate absorption.
- G-4-7 Monitor patient:**
- Document effect.

Major Competency Area: **H**
H. Clinical Decision Making

Priority: **One**

Competency: **H-1**

H-1 Principles of Effective Decision Making

An EMR will:

- H-1-1 Demonstrate the ability to apply the principles of programmed decision-making:**
- Memorization;
 - Protocols.
- H-1-2 Demonstrate the ability to apply the principles of critical decision-making:**
- Task experience;
 - Tacit knowledge;
 - Experience-based clinical judgment.
- H-1-3 Identify and differentiate between normal and abnormal presentations.**
- H-1-4 Apply a comparative analysis to a given situation or problem.**
- H-1-5 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-1-6 Demonstrate the ability to formulate a clinical impression or hypothesis.**
- H-1-7 Demonstrate the ability to apply the clinical decision in a given situation.**
- H-1-8 Demonstrate the ability to evaluate the decision and reevaluate or redirect as necessary.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-2**

H-2 Determine Care for Neurological Alterations

An EMR will:

- H-2-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the nervous system.**
- H-2-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-2-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the nervous system, including, but not limited to:**
- Seizure Disorders;
 - Grand mal
 - Petit mal
 - Jacksonian
 - Brain injury;
 - Traumatic Brain Injury
 - Cerebrovascular Accident
 - Transient Ischemic Attack
 - Neurogenic shock;
 - Eye / Ear alterations.
- H-2-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the nervous system.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-3**

H-3 Determine Care for Respiratory Alterations

An EMR will:

H-3-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the respiratory system.

H-3-2 Interpret the clinical findings of the patient:

- Pertinent positives;
- Pertinent negatives.

H-3-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the respiratory system, including, but not limited to:

- Upper Airway Obstruction;
 - anatomical
 - foreign body
- Lower Airway Obstruction;
 - Asthma
 - Chronic bronchitis
 - Emphysema
- Functional Alterations;
 - Pulmonary aspiration
 - Pulmonary embolism
 - Atelectasis
 - Adult Respiratory Distress Syndrome (ARDS)
 - Hemothorax
 - Pneumothorax
 - Toxic inhalation
- Infectious Agents;
 - Tuberculosis
 - Pneumonia.

H-3-4 Evaluate efficacy of applied treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the respiratory system.

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-4**

H-4 Determine Care for Cardiovascular Alterations

An EMR will:

- H-4-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the cardiovascular system.**
- H-4-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-4-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the cardiovascular system, including, but not limited to:**
- Hypertension / Hypotension;
 - Arteriosclerosis;
 - Acute Coronary Syndromes (ACS);
 - Congestive Heart Failure (CHF);
 - Cardiogenic Shock;
 - Cardiac Arrest.
- H-4-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the cardiovascular system.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **Two**

Competency: **H-5**

H-5 Determine Care for Gastrointestinal (GI) and Genitourinary (GU) Alterations

An EMR will:

- H-5-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the GI/GU system.**
- H-5-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-5-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the GI/GU system, including, but not limited to:**
- Aneurysm;
 - Appendicitis;
 - Ectopic Pregnancy;
 - Evisceration;
 - Gynecological Disorders;
 - Hepatitis;
 - Intestinal Obstruction;
 - Ruptured Spleen;
 - Ulcer;
 - Urinary Tract Infection.
- H-5-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the GI/GU system.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-6**

H-6 Determine Care for Musculoskeletal Alterations

An EMR will:

- H-6-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the musculoskeletal system.**
- H-6-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-6-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the musculoskeletal system, including, but not limited to:**
- Traumatic conditions;
 - Fracture
 - Tenderness
 - Instability
 - Crepitation
 - Swelling
 - Open
 - Closed
 - Flail chest
 - Amputation
 - Dislocation
 - Sprains
 - Strains
 - Non-traumatic conditions;
 - Scoliosis
 - Osteoporosis
 - Arthritis
- H-6-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the musculoskeletal system.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-7**

H-7 Determine Care for Endocrine / Immune Alterations

An EMR will:

- H-7-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with alterations of the endocrine or immune system.**
- H-7-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-7-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the endocrine or immune system, including, but not limited to:**
- Hypoglycemia;
 - Hyperglycemia;
 - Allergic Reaction;
 - Anaphylaxis;
 - Acquired Immune Deficiency Syndrome (AIDS).
- H-7-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with alterations of the endocrine or immune system.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-8**
H-8 Determine Care for Integumentary Alterations

An EMR will:

- H-8-1 Demonstrate the ability to apply principles of the clinical decision making to a patient presenting with alterations of the integumentary system.**
- H-8-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-8-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with alterations of the integumentary system, including, but not limited to:**
- Traumatic conditions;
 - Abrasions
 - Penetrations
 - Lacerations
 - Burns
 - Chemical
 - Radiation
 - Thermal
 - Electrical
 - Contusions
 - Amputations
 - Tenderness
 - Swelling
 - Non-traumatic conditions;
 - Itching
 - Pain
 - Rash
 - Blisters
 - Boils
 - Scabies
 - Changes in colour
 - Changes in temperature
 - Hives

Competency: **H-8**

Determine Care for Integumentary Alterations

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An EMR will:

- H-8-4** Evaluate efficacy of treatment plan and re-direct treatment utilizing principles of clinical decision making for the patient presenting with alterations of the integumentary system.

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-9**

H-9 Determine Care for Poisoning or Overdose

An EMR will:

- H-9-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with poisoning or overdose.**
- H-9-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-9-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with poisoning or overdose, including, but not limited to:**
- Ingested;
 - Absorbed;
 - Inhaled;
 - Injected;
 - Radiated.
- H-9-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with poisoning or overdose.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-10**

H-10 Determine Care for Extremes of Temperature

An EMR will:

- H-10-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with extremes of temperature.**
- H-10-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-10-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with extremes of temperature, including, but not limited to:**
- Frostbite;
 - Heat cramp;
 - Heat exhaustion;
 - Heat stroke;
 - Febrile;
 - Hyperthermia;
 - Hypothermia;
 - Cold water submersion.
- H-10-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with extremes of temperature.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-11**

H-11 Determine Care for Behavioural Crises

An EMR will:

- H-11-1 Demonstrate the ability to apply principles of clinical decision making to a patient presenting with behavioural crises.**
- H-11-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-11-3 Demonstrate the ability to develop and integrate a treatment plan for a patient presenting with behavioural crisis, including, but not limited to:**
- Aggression;
 - Alcohol;
 - Alzheimer's Disease;
 - Anxiety;
 - Delirium;
 - Dementia;
 - Depression;
 - Behavioural disorders;
 - Suicidal emergencies;
 - Sexual Assault;
 - Critical Incident Stress.
- H-11-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the patient presenting with behavioural crises.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-12**

H-12 Determine Care for Obstetric / Gynecological Patients

An EMR will:

- H-12-1 Demonstrate the ability to apply principles of clinical decision making to an obstetrical / gynecological patient.**
- H-12-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-12-3 Demonstrate the ability to develop and integrate a treatment plan for an obstetric / gynecological patient, including, but not limited to:**
- Abortion;
 - Abruptio placenta;
 - Breech;
 - Childbirth;
 - First trimester;
 - Multiple gestation;
 - Placenta previa;
 - Post-partum hemorrhage;
 - Sexual assault.
- H-12-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the obstetric / gynecological patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-13**

H-13 Determine Care for Neonatal Patients

An EMR will:

- H-13-1 Demonstrate the ability to apply principles of clinical decision making to a neonatal patient.**
- H-13-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-13-3 Demonstrate the ability to develop and integrate a treatment plan for a neonatal patient, including, but not limited to:**
- Birth trauma;
 - Hypothermia;
 - Meconium/Airway compromise.
- H-13-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the neonatal patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-14**

H-14 Determine Care for Pediatric Patients

An EMR will:

- H-14-1 Demonstrate the ability to apply principles of clinical decision making to a pediatric patient.**
- H-14-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-14-3 Demonstrate the ability to develop and integrate a treatment plan for a pediatric patient, including, but not limited to:**
- Asthma;
 - Child Maltreatment;
 - Child Seizures;
 - Foreign body airway obstruction (FBAO);
 - Febrile;
 - Sudden Infant Death Syndrome (SIDS);
 - Trauma;
 - Respiratory Syncytial Virus (RSV).
- H-14-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the pediatric patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **Two**

Competency: **H-15**

H-15 Determine Care for Geriatric Patients

An EMR will:

- H-15-1 Demonstrate the ability to apply principles of clinical decision making to a geriatric patient.**
- H-15-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-15-3 Demonstrate the ability to develop and integrate a treatment plan for a geriatric patient, including, but not limited to:**
- Alzheimer's Disease;
 - Sensory deficits;
 - Confusion;
 - Dementia;
 - Psychomotor limitations;
 - Depression;
 - Elder Abuse.
- H-15-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the geriatric patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **Two**

Competency: **H-16**

H-16 Determine Care for Physically Challenged Patients

An EMR will:

- H-16-1 Demonstrate the ability to apply principles of clinical decision making to a physically challenged patient.**
- H-16-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-16-3 Demonstrate the ability to develop and integrate a treatment plan for a physically challenged patient, including, but not limited to:**
- Amputations;
 - Chromosomal aberrations;
 - Sensory deficits;
 - Motor limitations;
 - Quadriplegia;
 - Speech;
 - Cerebral Palsy.
- H-16-4 Evaluate efficacy of applied treatment plan and redirect treatment utilizing principles of clinical decision making for the physically challenged patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **Two**

Competency: **H-17**

H-17 Determine Care for Special Needs Patients

An EMR will:

- H-17-1 Demonstrate the ability to apply principles of clinical decision making to a Special Needs patient.**
- H-17-2 Interpret the clinical findings of the patient:**
- Pertinent positives;
 - Pertinent negatives.
- H-17-3 Knowledge and ability to understand the special needs patient including, but not limited to:**
- Shunts;
 - Dialysis;
 - Feeding tubes.
 - Foley catheters;
 - Hemodialysis fistula;
 - G-tubes
 - Tracheostomy tube (**EMR's CANNOT TRANSPORT THIS PATIENT**)
- H-17-4 Evaluate efficacy of treatment plan and redirect treatment utilizing principles of clinical decision making for the Special Needs patient.**

Major Competency Area: **H**
Clinical Decision Making

Priority: **One**

Competency: **H-18**

H-18 Multiple Casualty Incident (MCI)

An EMR will:

- H-18-1 Demonstrate the ability to apply principles of clinical decision making in a multiple casualty incident (MCI).**
- H-18-2 Identify the principles of triage and the necessary components utilizing the Incident Command System:**
- Triage;
 - Treatment;
 - Transportation;
 - Incident Command System (ICS);
 - Communication.
- H-18-3 Demonstrate the ability to assume and function in the various multiple casualty incident roles.**
- H-18-4 Demonstrate knowledge of management of a multiple patient situation.**

Major Competency Area: **I**

I. Patient Management Skills

Priority: **One**

Competency: **I-1**

I-1 Perform Airway Management

An EMR will:

I-1-1 Demonstrate knowledge and ability to perform basic airway management skills:

- Manual maneuvers;
 - head/tilt chin lift
 - modified jaw thrust
 - modified chin lift
- Heimlich maneuver;
- Abdominal thrust;
- Foreign Body Airway Obstruction (FBAO);
- Simple adjuncts;
 - Oropharyngeal Airway (OPA)
 - Nasopharyngeal Airway (NPA)
- Suctioning techniques;
 - oral suctioning
- Chest thrust;
- Back blows (infants only).

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-2**

I-2 Perform Oxygen Therapy

An EMR will:

- I-2-1 Discuss the indications for oxygen administration and concentration.**
- I-2-2 Demonstrate knowledge and ability to administer oxygen with a nasal cannula.**
- I-2-3 Demonstrate knowledge and ability to administer oxygen using a low concentration mask.**
- I-2-4 Demonstrate knowledge and ability to administer oxygen using a non-rebreather mask.**
- I-2-5 Demonstrate knowledge and ability to administer oxygen using an aerosol mask.**
- I-2-6 Discuss potential complications and safety issues related to oxygen administration.**
- I-2-7 Demonstrate the knowledge and understanding to calculate how long various sizes of oxygen cylinders will last at various flow rates.**
- I-2-8 Demonstrate the knowledge and understanding to discuss differences between portable and fixed oxygen delivery systems.**
- I-2-9 Demonstrate knowledge to setup portable oxygen delivery devices.**

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-3**
I-3 Perform Patient Ventilation

An EMR will:

- I-3-1 Demonstrate knowledge and ability to ventilate a patient, including, but not limited to:**
- Pocket mask;
 - Bag-Valve-Mask (BVM).

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-4**

I-4 Perform Cardiopulmonary Resuscitation (CPR)

An EMR will:

I-4-1 Demonstrate knowledge and ability to perform:

- Infant CPR;
- Child CPR;
- Adult - one and two rescuer CPR.

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-5**

I-5 Perform Automated Defibrillation

An EMR will:

- I-5-1 Demonstrate knowledge and ability to use automated and semi-automated external defibrillation (AED).**
- I-5-2 Demonstrate a basic cardiac life support assessment recognizing cardiac arrest.**
- I-5-3 Describe what an AED does.**
- I-5-4 List and describe the four universal steps of operating an AED.**
- I-5-5 Describe how to attach the AED electrode pads in the correct position.**
- I-5-6 Explain why no person should touch the patient while the AED is analyzing, charging, or shocking the patient.**

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-6**

I-6 Perform External Hemorrhage Control

An EMR will:

I-6-1 Demonstrate the knowledge and ability to control venous / arterial external hemorrhage through use of, including, but not limited to:

- Direct pressure;
- Elevation;
- Pressure dressing;
- Pressure point;
- Cold therapy;
- Tourniquet;
- Patient position – Trendelenburg's.

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-7**

I-7 Perform Bandaging and Wound Care

An EMR will:

I-7-1 Demonstrate the knowledge and ability to apply, including, but not limited to:

- Bandages;
 - Self adhering
 - Gauze roll
 - Triangular
 - Tensor
- Dressings;
 - Pressure
 - Sterile
 - Occlusive
 - Abdominal
 - Field dressing
 - Steri-strips
 - Eye pads
- Cryogenic Therapy;
 - Cold packs

I-7-2 Demonstrate the knowledge and ability to perform wound care using aseptic techniques.

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-8**

I-8 Perform Spinal Motion Restriction

An EMR will:

- I-8-1 Demonstrate the knowledge and ability to perform full spinal motion restriction utilizing appropriate equipment, including, but not limited to:**
- Spine boards;
 - Head restraints;
 - Cervical collars.

Major Competency Area: **I**
Patient Management Skills

Priority: **One**

Competency: **I-9**
I-9 Perform Splinting

An EMR will:

I-9-1 Demonstrate the knowledge and ability to apply splinting, including, but not limited to:

- Traction splints;
- Improvised splints;
 - pillows
 - blankets
 - Kendrick Extrication Device (KED) / XP1
- Sling and swathe;
- Wood splints;
- Vacuum splints;
- Air splints;
- Wire splints;
- Speed splints.

Major Competency Area: **J**

J. Patient Transport

Priority: **One**

Competency: **J-1**

J-1 Have a Working Understanding of Ground Transport

An EMR will:

- J-1-1 Practice safe vehicle operations.**
- J-1-2 Identify geographical area using map reading, Global Positional Systems (GPS), Legal Land Description (LLD), local addressing system.**
- J-1-3 Determine appropriate response and transport modes in conjunction with dispatch, Computer-Aided Dispatch (CAD), Emergency Medical Dispatch (EMD) and patient needs.**
- J-1-4 Adjust driving to ensure safe working environment for attending practitioners.**
- J-1-5 Determine appropriate route and destination facility.**
- J-1-6 Utilize appropriate communications.**
- J-1-7 Utilize appropriate resources.**
- J-1-8 Demonstrate defensive driving techniques.**
- J-1-9 Maintain vehicle in a state of readiness.**

Major Competency Area: **J**

Patient Transport

Priority: **Two**

Competency: **J-2**

J-2 Have a Working Understanding of Fixed Wing Transport (F/W)

An EMR will:

- J-2-1 Determine appropriateness of Fixed Wing transport.**
- J-2-2 Identify safety requirements for air-side operations:**
 - Transport Canada;
 - Air-Side Vehicle Operations Procedure (AVOP);
 - Patient preparation.
- J-2-3 Knowledge and awareness to the approach of a Fixed Wing aircraft.**

Major Competency Area: **J**

Patient Transport

Priority: **Two**

Competency: **J-3**

J-3 Have a Working Understanding of Rotor Wing Transport (R/W)

An EMR will:

J-3-1 Determine appropriateness of Rotor Wing transport.

J-3-2 Identify safety requirements for aircraft operations:

- Landing requirements;
 - zone
 - wind direction
 - lighting.

J-3-3 Identify safety requirements for air-side / proximity operations:

- Transport Canada;
- Air-side Vehicle Operating Procedures (AVOP);
- Patient preparation.

J-3-4 Knowledge and awareness to the approach of a Rotor Wing aircraft.

Major Competency Area: **J**

Patient Transport

Priority: **Three**

Competency: **J-4**

J-4 Have a Working Understanding of Marine Transport

An EMR will:

- J-4-1 Demonstrate the knowledge and ability to determine appropriateness of marine transport.**
- J-4-2 Demonstrate knowledge of water and boating safety.**

Major Competency Area: **J**

Patient Transport

Priority: **One**

Competency: **J-5**

J-5 Safely Convey Patients

An EMR will:

J-5-1 Demonstrate the ability to move a patient, utilizing, but not limited to:

- Extremities carry;
- Chair lift;
- Sheet drag;
- Firefighter's carry;
- One person walking assist;
- Direct carry method.

J-5-2 Demonstrate the ability to move a patient, utilizing, but not limited to:

- Any long spine board;
- Upper body motion restriction device;
- Scoop stretcher;
- Chair (auxiliary) stretcher;
- Basket stretcher;
- Flexible stretcher;
- Smith cot.

J-5-3 Demonstrate the ability to operate an ambulance stretcher.

Major Competency Area: **K**

K. Professionalism

Priority: **One**

Competency: **K-1**

K-1 Knowledge of the Alberta Occupational Competency Profile

An EMR will:

- K-1-1** Have knowledge of the Alberta Occupational Competency Profile.
- K-1-2** Under ongoing medical control and audit will provide services under the EMT Regulation of the *Health Disciplines Act*.
- K-1-3** Under ongoing medical control and audit will provide services under the Paramedic Regulation of the *Health Professions Act*.

Major Competency Area: **K**
Professionalism

Priority: **One**

Competency: **K-2**

K-2 Knowledge of Standards of Practice

An EMR will:

- K-2-1 Demonstrate patient care as outlined in published guidelines for the Standard of Practice.**
- K-2-2 Demonstrate ability to incorporate human values into patient care.**
- K-2-3 Demonstrate responsibility and accountability for one's own practice.**
- K-2-4 Demonstrate ability to function as an advocate for the patient and for the profession.**

Major Competency Area: **K**
Professionalism

Priority: **One**

Competency: **K-3**
K-3 Knowledge of Code of Ethics

An EMR will:

- K-3-1 Demonstrate knowledge of Alberta College of Paramedics (ACP) Code of Ethics.**
- K-3-2 Apply principles of Code of Ethics to personal and professional life.**
- K-3-3 Apply principles of Code of Ethics in relationships with students and co-workers:**
 - Preceptorship;
 - Mentorship.
- K-3-4 Apply principles of Code of Ethics in relation to public perception and image.**

Major Competency Area: **K**
Professionalism

Priority: **One**

Competency: **K-4**

K-4 Maintain Currency in Professional Development

An EMR will:

- K-4-1 Participate in competency maintenance.**
- K-4-2 Accept responsibility for maintaining competence.**
- K-4-3 Participate in continuing education activities.**
- K-4-4 Participate in professional activities.**
- K-4-5 Support continuous quality assurance and quality improvement within the organization.**

Major Competency Area: **K**

Professionalism

Priority: **Two**

Competency: **K-5**

K-5 Maintain Personal Well-being

An EMR will:

K-5-1 Understand application of the components of well-being:

- Emotional;
- Mental;
- Physical;
- Spiritual.

Major Competency Area: **K**
Professionalism

Priority: **Two**

Competency: **K-6**

K-6 Ability to Work Effectively in Multidisciplinary Environments

An EMR will:

- K-6-1 Demonstrate knowledge of the role of the EMR as a team member.**
- K-6-2 Provide patient care as a member of a team based on patient needs, level of care required, and scope and limitations of team members.**
- K-6-3 Follow direction and work collaboratively in the provision of patient care.**

Major Competency Area: **K**
Professionalism

Priority: **One**

Competency: **K-7**

K-7 Demonstrate Leadership Skills

An EMR will:

K-7-1 Demonstrate knowledge of the qualities and principles of leadership.