

***Emergency Care, 14e (Limmer/O'Keefe/Dickinson)***  
**Chapter 1 Introduction to Emergency Medical Services**

1) Which of the following refers to a program or process for evaluating and improving the effectiveness of an EMS system?

- A) Quality improvement
- B) System effectiveness management
- C) Process Improvement Plan (PIP)
- D) Total quality system

Answer: A

Explanation: A) CORRECT. Quality improvement (QI) consists of continuous self-review with the purpose of identifying aspects of the EMS system that require improvement, with subsequent action plans to make necessary changes.

B) INCORRECT. System effectiveness management does not refer to a program of evaluating and improving an EMS system.

C) INCORRECT. A program or process for evaluating and improving the effectiveness of an EMS system is not referred to as a Process Improvement Program.

D) INCORRECT. The term "total quality system" does not refer to a program for improving the effectiveness of EMS systems.

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Objective: 1.2

2) Which of the following groups is credited with developing the earliest documented emergency medical service?

- A) The Spanish
- B) The Egyptians
- C) The Mayans
- D) The French

Answer: D

Explanation: A) INCORRECT. The Spanish did not develop the first documented emergency medical service; the French did in the 1700s.

B) INCORRECT. Although known for progress in technical areas, the Egyptians were not responsible for the first documented emergency medical service. In 1790, the French first began transporting wounded soldiers away from battlefields and to waiting medical care.

C) INCORRECT. The earliest documented emergency medical service was in France in 1790, nearly a thousand years after the Mayan civilization disappeared.

D) CORRECT. The earliest documented emergency medical service was in 1790 when the French began transporting wounded soldiers from the scenes of battle to waiting physicians.

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Objective: 1.1

3) In 1966 the National Highway Safety Act charged which of the following agencies with the development of emergency medical service standards?

- A) U.S. Department of Transportation
- B) U.S. Department of the Interior
- C) U.S. Department of Health Services
- D) U.S. Department of Homeland Security

Answer: A

Explanation: A) CORRECT. In 1966 the National Highway Safety Act charged the United States Department of Transportation (DOT) with developing EMS standards and assisting the states to upgrade the quality of their prehospital emergency care.

B) INCORRECT. The U.S. Department of the Interior is charged with the management and conservation of federal land and the country's natural resources. The Department of Transportation was charged with developing EMS standards.

C) INCORRECT. Although the U.S. Department of Health and Human Services is charged with protecting the health of all Americans, the United States Department of Transportation was assigned the task of developing emergency medical service standards.

D) INCORRECT. Although the U.S. Department of Homeland Security is tasked with protecting the nation from threats, it was established in 2002 and did not exist in 1966. It was the U.S. Department of Transportation that was charged with developing EMS standards.

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Objective: 1.1

4) Centralized coordination of emergency medical access, transportation, and care most refers to which of the following?

- A) Emergency preparedness plan
- B) Trauma system
- C) Resource management
- D) Central deployment

Answer: C

Explanation: A) INCORRECT. Emergency preparedness plans are usually developed to guide the actions of a specific group of people at the outset of an emergency, with the goal of protecting people and/or property. They generally will not address the specifics of medical care or transport.

B) INCORRECT. A trauma system is an organized, coordinated effort between facilities and responders within a defined geographic area to deliver a full range of care to injured patients. It does not address the coordination of basic (non-trauma) emergency care or transportation.

C) CORRECT. Resource management refers to the centralized coordination of an emergency response so that all victims have equal access to basic emergency care and are transported by certified personnel, in a licensed and equipped ambulance, to an appropriate facility.

D) INCORRECT. The centralized coordination of emergency medical access, transportation, and care within an EMS system is not referred to as central deployment.

Page Ref: 4

Objective: 1.1

5) Which of the following agencies is responsible for establishing EMS system assessment programs?

- A) Department of Health and Human Services (HHS)
- B) National Transportation Safety Board (NTSB)
- C) National Highway Traffic Safety Administration (NHTSA)
- D) United States Health Services Agency (HSA)

Answer: C

Explanation: A) INCORRECT. The Department of Health and Human Services (HHS) is not responsible for EMS system assessment programs.

B) INCORRECT. The National Transportation Safety Board (NTSB) does not establish EMS system assessment programs.

C) CORRECT. The National Highway Traffic Safety Administration (NHTSA) Technical Assistance Program has established assessment programs with set standards for EMS systems.

D) INCORRECT. The United States Department of Health and Human Services has no oversight of EMS systems.

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Objective: 1.1

6) Why is research published in a medical journal more authoritative than the information in a typical article published in an EMS magazine?

- A) Research in medical journals is original and peer reviewed.
- B) EMS magazine articles tend to be poorly researched.
- C) EMS articles are generally opinion pieces.
- D) Medical journals don't rely on advertising revenue as EMS magazines do.

Answer: A

Explanation: A) CORRECT. The research that is published in medical journals is peer reviewed. This means that the research was submitted to a professional journal and reviewed by several of the researcher's peers. This process helps to ensure that the research methods and results are accurate and high quality. This research is published in peer-reviewed journals. Articles in EMS magazines do not present original, peer-reviewed research.

B) INCORRECT. EMS magazine articles may be well researched.

C) INCORRECT. An EMS magazine article may not be an opinion piece.

D) INCORRECT. Reliance on advertising revenue, or lack thereof, is not what makes the research presented in medical journals authoritative.

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Objective: 1.4

- 7) What has the modern emergency medical services (EMS) system been developed to provide?
- A) Hospital-quality care at the emergency scene and during transport
  - B) Prompt emergency response to the scene regardless of risk
  - C) Safe emergency transportation that postpones care to arrival
  - D) Trained medical personnel who can manage emergencies entirely at the scene

Answer: A

Explanation: A) CORRECT. In 1966 the National Highway Safety Act charged the United States Department of Transportation (DOT) with assisting the states in upgrading the quality of their prehospital emergency care.

B) INCORRECT. Prompt responses are an important part of any EMS system, but not only that, and not regardless of risk.

C) INCORRECT. Safe emergency transportation is only part of what modern EMS systems were developed for, and not postponing care to arrival.

D) INCORRECT. Modern EMS systems were designed to provide more than just trained medical personnel, and care that continues during transport to the hospital.

Page Ref: 4

Objective: 1.1

- 8) Which of the following is the most common gateway for hospital services for patients who need emergency medical assistance?

- A) Emergency department
- B) Emergency medical services system
- C) Surgical services department
- D) Emergency medical dispatch center

Answer: A

Explanation: A) CORRECT. The emergency department serves as the gateway for the rest of the services offered by a hospital.

B) INCORRECT. The EMS system is not generally involved with hospital services other than the emergency department.

C) INCORRECT. Although an important component of a hospital's services, not all emergency medical patients will require surgery.

D) INCORRECT. An emergency medical dispatch center coordinates transports to the hospitals, but is not involved in determining or promoting specific hospital services.

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Objective: 1.1

9) Which of the following *best* describes a communication system capable of identifying the number and location of the phone from which a caller is calling?

- A) Data display 911
- B) Priority dispatch 911
- C) Enhanced 911
- D) Advanced 911

Answer: C

Explanation: A) INCORRECT. Data display 911 does not refer to a system capable of identifying a caller's location.

B) INCORRECT. Priority dispatch 911 would refer more to an internal communication center protocol than a system for displaying locations and phone numbers.

C) CORRECT. An enhanced 911 system has the capability of automatically identifying the caller's phone number and location.

D) INCORRECT. Advanced 911 is an emergency texting system rather than a system for locating callers.

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Objective: 1.1

10) What is the minimum level of certification required of ambulance personnel responsible for direct patient care?

- A) Emergency Medical Technician
- B) Emergency Medical Responder
- C) Advanced EMT
- D) Emergency Ambulance Driver

Answer: A

Explanation: A) CORRECT. In most areas, the Emergency Medical Technician (EMT) is considered the minimum level of certification for ambulance personnel.

B) INCORRECT. An Emergency Medical Responder (EMR) is below the EMT certification level, and below the minimum usually expected for ambulance personnel.

C) INCORRECT. Advanced EMTs have a higher level of certification than what is commonly required as the minimum for ambulance personnel.

D) INCORRECT. Most ambulance personnel are expected to be at the EMT level or higher.

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Objective: 1.2

11) What *best* describes the level of EMS training that emphasizes activation of the EMS system and provides immediate care for life-threatening problems?

- A) Emergency Medical Dispatcher
- B) Cardiac care responder
- C) EMT
- D) Emergency Medical Responder

Answer: D

Explanation: A) INCORRECT. The Emergency Medical Dispatcher is responsible for coordinating the appropriate EMS response and potentially providing important instructions to the person calling for assistance.

B) INCORRECT. A cardiac care responder is not a recognized level of EMS training.

C) INCORRECT. EMTs provide basic-level medical and trauma care and transportation to a medical facility.

D) CORRECT. The emphasis of an Emergency Medical Responder is on activating the EMS system and providing immediate care for life-threatening injuries, controlling the scene, and preparing for the arrival of the ambulance.

Page Ref: 7

Objective: 1.2

12) What *best* describes the level of EMS training that emphasizes use of advanced airway devices and *some* prehospital medication administration?

- A) Advanced EMT
- B) Paramedic
- C) Emergency Medical Responder
- D) EMT

Answer: A

Explanation: A) CORRECT. The Advanced EMT (AEMT) provides basic-level care and transportation as well as some advanced-level care, such as use of advanced airway devices and administration of some fluids and medications, which may include intravenous and intraosseous administration.

B) INCORRECT. The Paramedic performs all of the skills of the EMT and AEMT plus advanced-level skills. The Paramedic provides the most advanced level of prehospital care.

C) INCORRECT. The first level of EMS training (Emergency Medical Responder) is primarily focused on activating the EMS system and immediate care for life-threatening injuries.

D) INCORRECT. EMTs provide basic-level medical and trauma care but cannot manage advanced airways or administer medications.

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Objective: 1.2

13) What level of emergency medical training provides the most advanced pre-hospital care?

- A) Advanced EMT
- B) Emergency Medical Responder
- C) Emergency Medical Technician
- D) Paramedic

Answer: D

Explanation: A) INCORRECT. The AEMT provides basic-level care and transportation as well as some advanced-level care in the pre-hospital setting.

B) INCORRECT. Emergency Medical Responders are trained to activate the EMS system, provide immediate care for life-threatening injuries, control the scene, and prepare for the arrival of the ambulance.

C) INCORRECT. EMTs provide basic-level medical and trauma care and transportation to a medical facility.

D) CORRECT. The Paramedic performs all of the skills of the EMT and AEMT plus advanced-level skills. The Paramedic provides the most advanced level of prehospital care.

Page Ref: 8

Objective: 1.2

14) Which of the following is the primary responsibility of the EMT?

- A) Protect and stabilize the patient.
- B) Communicate with other responders on the scene.
- C) Maintain personal health and safety.
- D) Provide emergency care.

Answer: C

Explanation: A) INCORRECT. Although protecting and stabilizing the patient is an important aspect of the EMT's job, maintaining personal health and safety *first* is the priority.

B) INCORRECT. Communicating with other emergency responders is necessary for effective scene safety and coordination, but the *first* priority for any EMT is to ensure their own health and safety.

C) CORRECT. It is not possible to help a patient if you are not physically capable or are injured while performing your job, so your *first* responsibility is to keep yourself healthy and safe.

D) INCORRECT. Providing emergency care is the EMT's *purpose*, but maintaining her own personal health and safety is the EMT's *primary responsibility*.

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Objective: 1.2

15) What *best* defines the evaluation of the patient's condition in order to provide emergency care?

- A) Patient access
- B) Patient assessment
- C) Medical intervention
- D) Patient advocacy

Answer: B

Explanation: A) INCORRECT. Patient access means getting to the patient's location.

B) CORRECT. Patient assessment is used to find out enough about what is wrong with your patient to be able to provide the appropriate emergency care.

C) INCORRECT. A medical intervention is the care provided once what is wrong with the patient has been determined.

D) INCORRECT. Patient advocacy is speaking up for the patient.

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Objective: 1.2

16) Upon arrival at the hospital, the EMT advises hospital personnel of the patient's condition, observations from the scene, treatment rendered, and other pertinent data to assure continuity of care. This process is known as which of the following?

- A) Transfer of care
- B) Breach of duty
- C) Definitive care
- D) Patient advocacy

Answer: A

Explanation: A) CORRECT. Providing the receiving hospital staff with information on the patient's condition, observations of the scene, and other pertinent data so that there will be continuity of care is part of the *transfer of care* process.

B) INCORRECT. A breach of duty occurs when an EMT has a responsibility to care for a patient and does not follow through.

C) INCORRECT. Definitive care refers to the type of care ultimately needed by a patient, not to the process of transferring the patient to hospital staff.

D) INCORRECT. Patient advocacy may be involved in these actions, but it is not the name for this process.

Page Ref: 9

Objective: 1.2



17) Which of the following is a component of patient advocacy?

- A) Immobilizing the neck of a patient with a possible spinal injury
- B) Granting patient wishes and not reporting spousal abuse to the authorities
- C) Building rapport with the patient during transport to the hospital
- D) Providing oxygen to a patient that is short of breath

Answer: C

Explanation: A) INCORRECT. This is simply an example of patient care. Advocacy is working to *understand* the patient so that the EMT can speak up for them and promote their needs.

B) INCORRECT. Patient advocacy is *not* supporting a patient whose wishes will ultimately be harmful or against the law.

C) CORRECT. Building rapport with the patient is a critical component of advocacy. Without it, the EMT won't be able to know the patient's needs or challenges enough to effectively speak on their behalf.

D) INCORRECT. Advocacy is about truly understanding the patient and speaking up for them to promote the best care possible, not simply providing an intervention.

Page Ref: 9

Objective: 1.2

18) Who is responsible for on-scene safety of EMS providers?

- A) Traffic director
- B) Law enforcement
- C) All crew members
- D) Triage officer

Answer: C

Explanation: A) INCORRECT. The on-scene safety of EMS providers is not the responsibility of a traffic director.

B) INCORRECT. Law enforcement personnel can be an important part of scene safety, but they are not necessarily responsible for the safety of EMS crews.

C) CORRECT. It is the responsibility of all EMS crew members to keep themselves, the patient(s), and bystanders safe.

D) INCORRECT. The triage officer is not solely responsible for the on-scene safety of EMS providers.

Page Ref: 9

Objective: 1.2

19) Which of the following *best* describes a person who speaks up on behalf of the patient and supports his cause?

- A) Guardian
- B) Assistant
- C) Advocate
- D) Representative

Answer: C

Explanation: A) INCORRECT. A guardian is generally someone who is legally responsible for a patient, whether or not they support or advocate for them.

B) INCORRECT. A person who assists a patient with tasks may not necessarily speak up for the patient or support them in seeking better care.

C) CORRECT. EMTs should be advocates for their patients, speaking up for them and supporting them in getting appropriate care.

D) INCORRECT. The term "representative" does not indicate the same level of personal involvement in a patient's care and outcome as an "advocate" has. EMTs should always see themselves as advocates for their patients.

Page Ref: 9

Objective: 1.2

20) To be compassionate and empathetic, to be accurate with interviews, and to inspire confidence are all examples of which of the personal traits of a quality EMT?

- A) Able to listen to others
- B) Pleasant
- C) Judgmental but fair
- D) Emotionally stable

Answer: A

Explanation: A) CORRECT. To be compassionate and empathetic, to be accurate with interviews, and to inspire confidence are examples of the ability to listen to others.

B) INCORRECT. Inspiring confidence and helping to calm the sick and injured are examples of being pleasant.

C) INCORRECT. Being nonjudgmental and fair means treating all patients equally regardless of race, religion, or culture.

D) INCORRECT. Emotional stability is the ability to overcome the unpleasant aspects of an emergency so that needed care may be rendered and any uneasy feelings that exist afterward may be resolved.

Page Ref: 11

Objective: 1.2

21) Which of the following is a physical trait necessary for performing the duties of an EMT?

- A) Nonjudgmental and fair
- B) Ability to lift and carry 200 pounds
- C) Ability to speak clearly
- D) Ability to remain calm in stressful situations

Answer: C

Explanation: A) INCORRECT. Being nonjudgmental and fair are important personal attributes for an EMT to have, but they are not physical traits.

B) INCORRECT. An EMT would not be expected to lift or carry over 125 pounds, so it would not be considered a necessary ability to carry 200 pounds.

C) CORRECT. An important requirement of an EMT is to have the physical ability to give and receive oral and written instructions.

D) INCORRECT. An EMT's ability to remain calm in stressful situations is a critical personal trait.

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Objective: 1.2

22) Which of the following is a personality trait required of EMTs?

- A) Ability to lift and carry 125 pounds
- B) Awareness of problems with color vision
- C) Ability to dominate the patient
- D) Control of personal habits

Answer: D

Explanation: A) INCORRECT. A physical ability is not a personality trait.

B) INCORRECT. Awareness of a physical problem, such as color vision, is not related to the qualities that make up a person's character.

C) INCORRECT. Although the ability to dominate others may be considered a personality trait, it is not one required to be an EMT.

D) CORRECT. To reduce the chances of providing improper care or causing patient discomfort, EMTs should be able to control their personal habits appropriately.

Page Ref: 11

Objective: 1.2

23) Which of the following best describes training that supplements the EMT's original training and that is usually taken in regular intervals?

- A) Distance education
- B) EMT training program
- C) Recertification
- D) Continuing education

Answer: D

Explanation: A) INCORRECT. Distance education refers to the *way* training or courses are delivered, not specifically to the topic.

B) INCORRECT. An EMT training program is the initial certification course, not the supplemental training that follows it.

C) INCORRECT. Recertification refers to the renewal of an EMT certificate, not specifically to regular ongoing training.

D) CORRECT. Ongoing education that supplements an EMT's original training is called continuing education.

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Objective: 1.2

24) During the new employee orientation, the training officer meets with the new EMTs and explains to them the monthly training schedule and the classes they must attend for EMT recertification. One of the new EMTs asks the training officer why they have to keep taking EMT courses if they already passed the EMT examination. What is the best answer?

- A) The state requires the training.
- B) EMTs forget everything once they pass the EMT exam.
- C) It looks good to a jury should the service be sued.
- D) EMS is constantly evolving in response to evidence-based research.

Answer: D

Explanation: A) INCORRECT. Although continuing education is mandated by most states, it is not the reason continuing education is performed.

B) INCORRECT. Continuing education does provide EMTs with a good review of rarely used material; however, it is not accurate that EMTs forget everything once they pass the EMT exam.

C) INCORRECT. Although continuing education can demonstrate to a jury that the service is providing adequate training, one of the goals of continuing education is to prevent lawsuits from happening in the first place, rather than to look good once a lawsuit has been filed.

D) CORRECT. Evidence-based scientific research is what drives changes in EMS. New and improved treatment techniques are derived from this research and the EMT needs to keep abreast of these dynamic changes to his profession.

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Objective: 1.2

25) Which of the following is a personal trait an EMT should demonstrate?

- A) Self-starter
- B) Strong student
- C) Strong communication
- D) Good eyesight

Answer: A

Explanation: A) CORRECT. One of the personal traits of an effective EMT is that of being a self-starter.

B) INCORRECT. Being a strong student is a good quality, but *personal traits* relate to the behavior and demeanor of the EMT, not her strength in a particular task.

C) INCORRECT. Strong communication is obviously important for an EMT, but it is the *result* of certain personal traits (respectful, able to listen, controlled in tone, etc.) – not a personal trait itself.

D) INCORRECT. Good eyesight is a critical *physical* trait for an EMT to have.

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Objective: 1.2

26) What is *not* one the common settings that an EMT may work in?

- A) Rural/wilderness settings
- B) Ambulance services
- C) Hospitals
- D) Fire departments

Answer: C

Explanation: A) INCORRECT. One common setting that EMTs work in is rural/wilderness settings.

B) INCORRECT. One common setting that EMTs work in is ambulance services.

C) CORRECT. EMTs do not work in a hospital.

D) INCORRECT. One common setting that EMTs work in is fire departments.

Page Ref: 12

Objective: 1.2

27) The National Registry of Emergency Medical Technicians (NREMT) was founded to establish which of the following?

- A) An education curriculum for EMT courses
- B) Quality oversight of emergency medical services practices
- C) National standards for emergency medical services personnel
- D) Quality improvement and quality assurance programs for emergency medical services

Answer: C

Explanation: A) INCORRECT. Although EMT course curricula are based on the standards provided by the NREMT, the National Registry was not founded to create them.

B) INCORRECT. The NREMT created the standards used for modern EMS, but the organization does not oversee or determine the quality of provided services.

C) CORRECT. In 1970, the National Registry of Emergency Medical Technicians (NREMT) was founded to establish national standards within the industry.

D) INCORRECT. The NREMT developed the professional standards for emergency care personnel, but is not involved in quality improvement or any assurance of the care provided.

Page Ref: 4

Objective: 1.2

28) You have just come on duty. The EMT on the previous shift complains to you that the QI manager was giving him grief because he did not document three sets of vital signs on the patient record. The EMT is angry and does not understand why documenting three sets of vital signs is so important. What is the best answer you could give him?

- A) Vital signs are something you have to fill out because the state requires it.
- B) The recording of three sets of vital signs demonstrates that you were trending the patient's condition.
- C) It is important you show the QI manager that you are a team player.
- D) The report looks better when all the boxes are filled out.

Answer: B

Explanation: A) INCORRECT. The local or state governmental authority may or may not require three sets of vital signs; regardless, this should not be the primary reason to document them.

B) CORRECT. Recording three sets of vital signs demonstrates that the EMT is reassessing the patient at the appropriate periodic intervals, which is important when providing care for a patient.

C) INCORRECT. Teamwork is an important trait in an EMT, but is not the driving factor for recording vital signs.

D) INCORRECT. QI is not concerned with how the report looks, but rather that the information in the report is complete and accurate.

Page Ref: 14

Objective: 1.2

29) Why is it important for EMTs to participate in quality improvement programs?

- A) To ensure that individuals making false calls for EMS are prosecuted
- B) To identify problem employees and create a corrective action plan
- C) To identify problems and develop a plan to prevent their recurrence
- D) To ensure adequate personnel are available for emergencies

Answer: C

Explanation: A) INCORRECT. The aim of any EMS quality improvement program is to continually improve the care and operations within the system – not to identify challenges with particular individuals in the community. EMTs play a critical part in quality improvement by identifying areas in need of improvement, participating in the improvement process, and supporting the changes.

B) INCORRECT. EMTs should participate in Quality Improvement (QI) programs to assist in bettering their EMS systems and processes, not to pinpoint and create action plans for specific individuals.

C) CORRECT. EMS quality improvement programs consist of continuous self-review with the purpose of identifying aspects of the system that require improvement. Once a problem is identified, a plan is developed and implemented to prevent further occurrences of the same problem. It is critical that EMTs participate in this process because they usually have the best visibility to challenges within the system and can provide valuable insight into how to improve.

D) INCORRECT. An EMT's participation in an EMS quality improvement program is not necessarily about adequate staffing. It is about the EMT helping to identify and fix *any* components in the system that cause inefficiencies and challenges to patient care.

Page Ref: 13

Objective: 1.2

30) After delivering a patient to the emergency department, you discuss with hospital staff the details of your care and ask for suggestions to improve your care. This is an example of your role in which of the following?

- A) Patient advocacy
- B) Transfer of care
- C) Quality improvement
- D) Continuing education

Answer: C

Explanation: A) INCORRECT. A patient advocate is the person who speaks up for the patient and pleads her cause.

B) INCORRECT. Transfer of care is the process of turning care of a patient over to those with higher levels of training.

C) CORRECT. Continuous self-review through numerous means with the purpose of identifying aspects of the system that require improvement is known as quality improvement.

D) INCORRECT. Continuing education is ongoing structured training designed to supplement the EMT's original course.

Page Ref: 13

Objective: 1.2

31) The EMT's role in the quality improvement process includes becoming involved in the quality process, keeping carefully written documentation, obtaining feedback from patients and the hospital staff, continuing your education, and which of the following?

- A) Writing protocols and standing orders
- B) Maintaining your equipment
- C) Providing quality care
- D) Being a member of the QI committee

Answer: B

Explanation: A) INCORRECT. The Medical Director is responsible for writing protocols and standing orders.

B) CORRECT. Maintaining equipment properly is an important role the EMT plays in the quality improvement process.

C) INCORRECT. Providing quality care is an expectation of all EMTs, but it not part of the quality improvement process.

D) INCORRECT. Although it can be beneficial, being a member of the QI committee is not an expected role for an EMT in the quality improvement process.

Page Ref: 14

Objective: 1.2

32) Which of the following is a role of the EMT in the quality improvement process?

- A) Taking responsibility for the actions of one's partner
- B) Writing complete patient care reports
- C) Critiquing performance of one's partner
- D) Assuring personal safety

Answer: B

Explanation: A) INCORRECT. The primary roles of an EMT in quality improvement include preparing carefully written documentation, involvement in the system's quality improvement process, obtaining feedback from patients and hospital staff, maintaining equipment, and continuing education. Taking responsibility for the actions of others is not a part of the quality improvement process.

B) CORRECT. Because much of an EMS system's clinical quality improvement data comes from patient care documentation, ensuring that each report is complete and accurate is a very important part of an EMT's involvement in quality improvement.

C) INCORRECT. Critiquing the performance of other emergency responders is not a primary role for EMTs in the quality improvement process. An EMT can best assist the process by preparing carefully written documentation, being involved in the system's quality improvement process, obtaining feedback from patients and hospital staff, maintaining equipment, and continuing his education.

D) INCORRECT. Although assuring personal safety is a very important responsibility for EMTs, it is not a role in the quality improvement process. Continuing education, equipment maintenance, gathering feedback from patients and hospital staff, preparing complete and accurate patient documentation, and getting involved in the EMS system's structured quality improvement program are all examples of roles for the EMT in a QI process.

Page Ref: 14

Objective: 1.2



33) Who assumes the ultimate responsibility for patient care rendered by the EMT?

- A) EMS supervisor
- B) EMT
- C) Director of quality assurance
- D) Medical Director

Answer: D

Explanation: A) INCORRECT. Although an EMS supervisor can be involved, the EMS service's Medical Director assumes ultimate responsibility for the care provided by an EMT.

B) INCORRECT. Because every EMT operates under the license of the EMS service's Medical Director, it is the Medical Director, *not the EMT*, who is ultimately responsible for the patient care.

C) INCORRECT. In every EMS service or agency, the Medical Director is ultimately responsible for the patient care provided by the EMTs.

D) CORRECT. The Medical Director of an EMS agency or service is ultimately responsible for all patient care because the EMTs work under the Medical Director's license.

Page Ref: 14

Objective: 1.2

34) The application of oxygen for a patient who is short of breath without having to contact the physician in the emergency department because of existing protocols is an example of which of the following?

- A) On-line medical direction
- B) Standards of care
- C) Standing orders
- D) Breach of duty

Answer: C

Explanation: A) INCORRECT. On-line medical directions are orders from an on-duty physician given by radio or phone.

B) INCORRECT. Standards of care refer to the expected actions of an EMT as compared to a reasonable person with the same level of training and in the same situation. They are not related to the authorization of specific skills.

C) CORRECT. Standing orders are physician-issued policies or protocols that authorize EMTs to perform particular skills in certain situations.

D) INCORRECT. A breach of duty occurs when an EMT has a responsibility to care for a patient and does not follow through.

Page Ref: 14-15

Objective: 1.2

35) Which of the following *best* describes a list of steps the EMT should perform while assessing and managing emergency medical situations?

- A) Standing orders
- B) On-line medical direction
- C) Protocols
- D) Standard operating procedures

Answer: C

Explanation: A) INCORRECT. Standing orders, also called off-line medical direction, are a specific type of protocol that allows EMTs to perform certain skills in certain situations, but not the list of steps that should be performed.

B) INCORRECT. On-line medical direction consists of orders from the on-duty physician given directly to an EMT in the field by radio or telephone.

C) CORRECT. Protocols, which are developed by an agency's Medical Director, are lists of steps for assessment and interventions to be performed in different situations.

D) INCORRECT. Standard operating procedures are a collection of policies around EMS agency operations and generally do not apply specifically to medical assessment or management.

Page Ref: 14

Objective: 1.2

36) A written authorization for an EMS provider to perform a particular skill in a specific situation is a(n):

- A) on-line protocol.
- B) standard of care.
- C) direct medical order.
- D) standing order.

Answer: D

Explanation: A) INCORRECT. Any "on-line" direction indicates a verbal order from a physician to an EMT, usually by phone or radio.

B) INCORRECT. Standard of care refers to the expected actions of an EMT as compared to a reasonable person with the same level of training and in the same situation. It is not related to the authorization of specific skills.

C) INCORRECT. A direct medical order would generally come from a physician in a specific situation and is considered "on-line" direction.

D) CORRECT. A standing order is a policy or protocol issued by a Medical Director that authorizes EMTs and others to perform particular skills in certain situations.

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Objective: 1.2

37) You and another new EMT are studying your local protocols. The other EMT notices that you may give oral glucose without utilizing on-line medical control, but you must get an on-line order from a physician before assisting a patient in taking his nitroglycerin for chest pain. The EMT asks you why some drugs require on-line medical control while others do not. What is the best answer to give him?

- A) Glucose is only sugar so it cannot hurt the patient.
- B) The physician does not trust EMTs.
- C) The patient's nitroglycerin might be expired.
- D) The physician wants to be sure it is appropriate for the patient.

Answer: D

Explanation: A) INCORRECT. Although glucose is sugar and relatively safe, it can be harmful if given to an unresponsive patient. But ultimately, this answer does not explain why nitroglycerin may not be administered without a physician's order.

B) INCORRECT. The reason protocols are written is not because physicians do not trust EMTs; they are written because EMTs do not have the advanced training that physicians have.

C) INCORRECT. Although medications may be expired, this does not require contacting medical control to confirm.

D) CORRECT. Nitroglycerin, although indicated for most chest pain patients, is not appropriate for all cardiac patients. The physician, with his advanced training, is better suited to make that determination.

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Objective: 1.2

38) What is a public health initiative that is likely to involve the participation of EMTs?

- A) Drafting new safety legislation
- B) Allocation of funds to health improvement programs
- C) Public vaccination programs
- D) Development of standing orders

Answer: C

Explanation: A) INCORRECT. EMTs are unlikely to be involved in the drafting of new legislation.

B) INCORRECT. EMTs are unlikely to be involved in the allocation of funds to health improvement programs.

C) CORRECT. EMTs are likely to be involved in public vaccination programs.

D) INCORRECT. EMTs are unlikely to be involved in the development of standing orders.

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Objective: 1.3

39) A fellow EMT is talking with the Medical Director at a staff meeting. The EMT states that the neighboring ambulance service is carrying special clotting bandages for serious bleeding wounds. The special bandages cost five times as much as the regular bandages, but the EMT claims they work ten times better. The EMT wants the Medical Director to approve the bandages for use in their ambulances. The Medical Director responds to the EMT by saying he will not approve the bandages until he can prove they are worth the additional cost. How can the EMT best prove the worth of the special bandages?

A) Have a member of the other ambulance service call the Medical Director to provide firsthand information on how the special bandages are much better.

B) Call the manufacturer of the special bandage and request literature to give to the Medical Director.

C) Perform a literature search to see what studies have been done on the special bandages and report the findings to the Medical Director.

D) Order a small number of the special bandages and compare them side by side to the regular bandages.

Answer: C

Explanation: A) INCORRECT. Firsthand accounts or anecdotal information do not provide any actual scientific proof that the special bandages are superior.

B) INCORRECT. Literature from the manufacturer is designed to sell the bandages and will only present the positives of the bandages without any negative information.

C) CORRECT. Finding objective, unbiased, evidence-based research that validates the claims of the special bandage is the only way to actually prove that the special bandages are superior.

D) INCORRECT. Product testing of the bandages is a good idea to determine how the bandages will work for that particular service, but does not provide proof that they are actually better.

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Objective: 1.4

40) You and your EMT partner are assigned to spend a day at the senior center where you are to inspect the rooms and common areas for fall hazards. Your partner is upset that he is not in the ambulance where the "action is." He complains that "looking for loose rugs" is a waste of his time. What would be the best response to his complaints?

A) It is good practice for the next emergency call.

B) It makes the taxpayers happy.

C) Injury prevention in the community is an important component of EMS.

D) It minimizes the number of 911 calls late at night.

Answer: C

Explanation: A) INCORRECT. EMTs should already have competency in blood pressure techniques prior to hosting any screening clinics.

B) INCORRECT. Although community relations are important, it is not the primary reason for checking blood pressures.

C) CORRECT. Illness and injury prevention is an important component of EMS because EMTs are always in the field, and the role of EMS in public health is expected to only increase in the future.

D) INCORRECT. Blood pressure screening clinics do not impact the number of late-night 911 calls.

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Objective: 1.3

41) You and your new EMT partner arrive first on the scene of a single car rollover on the shoulder of a busy highway. You pull off in a safe location and just as you stop the ambulance, your partner throws the passenger door open, steps out of the truck, and begins jogging through the scattered debris toward the overturned car. You shout for him to stop and he looks back at you, but then continues to the vehicle and begins assessing the driver. Later, as you are restocking in the ambulance bay of the local trauma center, your partner tells you that he thinks you acted unprofessionally by shouting at him. What is the *best* way to respond?

A) Shouting was an attempt to protect the EMT from a potentially unsafe scene.

B) New EMTs should expect partners to yell at them occasionally.

C) The On-Duty Supervisor should be called.

D) An EMT should never hurry to assist a patient.

Answer: A

Explanation: A) CORRECT. Quickly entering a dangerous scene without taking proper precautions will create additional risks. A professional EMT should always be concerned about the safety of everyone on scene; not just themselves and the patients, but other responders as well. In this case, shouting at the EMT was an appropriate attempt to prevent him from entering an unsafe situation.

B) INCORRECT. Although sometimes the noise level of a situation requires responders to raise their voices to be heard, expecting to be yelled at simply because one is a new EMT is not professional or correct.

C) INCORRECT. It is important for EMT partners to be able to communicate effectively and professionally when debriefing calls. Generally, a Supervisor should only become involved if the EMTs cannot resolve a conflict themselves or if they need a specific question answered.

D) INCORRECT. Emergency medical care sometimes does require responders to act quickly, but never when it places others on scene in danger.

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Objective: 1.2