

EMT Optional Skills Training Requirements

To be used for initial and ongoing training and competency verification of EMT Optional Skills.

1. Use of perilaryngeal airway adjuncts:

(A) Training in the use of perilaryngeal airway adjuncts shall consist of not less than five (5) hours to result in the EMT being competent in the use of the device and airway control. Included in the above training hours shall be the following topics and skills:

1. Anatomy and physiology of the respiratory system.
2. Assessment of the respiratory system.
3. Review of basic airway management techniques, which includes manual and mechanical.
4. The role of the perilaryngeal airway adjuncts in the sequence of airway control.
5. Indications and contraindications of the perilaryngeal airway adjuncts.
6. The role of pre-oxygenation in preparation for the perilaryngeal airway adjuncts.
7. Perilaryngeal airway adjuncts insertion and assessment of placement.
8. Methods for prevention of basic skills deterioration.
9. Alternatives to the perilaryngeal airway adjuncts.

(B) At the completion of initial training a student shall complete a competency-based written and skills examination for airway management which shall include the use of basic airway equipment and techniques and use of perilaryngeal airway adjuncts.

(C) EMT shall demonstrate skills competency at least every two (2) years, or more frequently as determined by the EMSQIP.

2. Administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma:

(A) Training in the administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe for suspected anaphylaxis and/or severe asthma shall consist of no less than two (2) hours to result in the EMT being competent in the use and administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe and managing a patient of a suspected anaphylactic reaction and/or experiencing severe asthma symptoms. Included in the training hours listed above shall be the following topics and skills:

1. Names.
2. Indications.
3. Contraindications.
4. Complications.
5. Side/adverse effects.
6. Interactions.
7. Routes of administration.
8. Calculating dosages.
9. Mechanisms of drug actions.
10. Medical asepsis.
11. Disposal of contaminated items and sharps.
12. Medication administration.

(B) At the completion of this training, the student shall complete a competency based written and skills examination for the use and/or administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe, which shall include:

1. Assessment of when to administer epinephrine.
2. Managing a patient before and after administering epinephrine.
3. Using universal precautions and body substance isolation procedures during medication administration.
4. Demonstrating aseptic technique during medication administration.
5. Demonstrating preparation and administration of epinephrine by prefilled syringe and/or drawing up the proper drug dose into a syringe.
6. Proper disposal of contaminated items and sharps.

3. Administer the medications listed in this subsection:

(A) Using prepackaged products, the following medications may be administered:

1. Atropine.
2. Pralidoxime Chloride.

(B) This training shall consist of no less than two (2) hours of didactic and skills laboratory training to result in competency. In addition, a basic weapons of mass destruction training is recommended.

Training in the profile of medications listed in subsection (A) shall include, but not be limited to:

1. Indications.
2. Contraindications.
3. Side/adverse effects.
4. Routes of administration.
5. Dosages.
6. Mechanisms of drug action.
7. Disposal of contaminated items and sharps.
8. Medication administration.

(C) At the completion of this training, the student shall complete a competency based written and skills examination for the administration of medications listed in this subsection which shall include:

1. Assessment of when to administer these medications.
2. Managing a patient before and after administering these medications.
3. Using universal precautions and body substance isolation procedures during medication administration.
4. Demonstrating aseptic technique during medication administration.
5. Demonstrating the preparation and administration of medications by the intramuscular route.
6. Proper disposal of contaminated items and sharps.

4. Monitor preexisting vascular access devices and intravenous lines delivering fluids with additional medications pre-approved by the Director of the Authority. Approval of such medications includes SLOEMSA applying to EMS Authority and will be obtained pursuant to CCR procedures.