

Emergency Medical Responder – Quick Tips



Background

The term “first responder” is commonly used to describe the first person who arrives at the scene of an accident or other incident regardless of the person’s type of credentials.

The term “certified first responder” is used to describe the first medically trained person to arrive at the scene of an accident or other incident. This term is also used when referring to an Emergency Medical Responder (EMR). EMRs have the knowledge and skills needed to provide immediate lifesaving interventions while waiting for additional Emergency Medical Services (EMS) personnel to arrive. Emergency Medical Technicians (EMT) provide out of hospital emergency medical care and transportation for critical and emergent patients who access the EMS system. They perform interventions with the basic equipment typically found on an ambulance and are the critical link between the scene of an emergency and the health care system.

In 1979, the US Department of Transportation (DOT) recognized a gap between basic first aid and Emergency Medical Technician (EMT) level training. Basic first aid as commonly taught by the American Red Cross is covered in 10 hours of training. There are three levels of EMT training:

1. EMT (110-180 hours)
2. Advanced EMT (200-400 hours), and
3. EMT Paramedic (+1,000 hours).

EMRs fill the gap. To become an EMR, one must complete 80-120 hours of first aid training. The training involves seven modules that have been established by a curriculum development group of medical personnel and educators. Input from emergency personnel, physicians and test groups of EMRs was included. The curriculum was developed to create a training system that allows for evaluation of the students as they acquire new skills, as well as testing the medical concepts regarding human physiology and anatomy. The curriculum for EMRs can and does vary by state. Training is often added to respond to patient care issues that arise from field experience and concerns that may have been left out of the core curriculum.

Seven Core Modules

Module 1: Preparatory – Covers the basic concepts and concerns of an EMR. The roles and responsibilities of first responders are discussed, including an overview of the EMS system. Stress management in critical situations, personal protective equipment and scene safety are covered, as well as the legal and ethical issues an EMR may

encounter (such as consent, refusal of treatment and duty to act, confidentiality and crime scenes). Also included in the first module is an overview of body systems, anatomy, physiology, body mechanics and lifting and carrying techniques.

Module 2: Airway – Covers airway anatomy and physiology, how to maintain an open airway, pulmonary resuscitation and the differences in adults and children. This module also includes a practical lab of the techniques discussed regarding barrier devices, suction equipment, airways and the removal of foreign objects from an airway.

Module 3: Patient Assessment – Trains the EMR in patient and scene assessment. This includes evaluating a scene for possible hazards and determining the quantity of patients and the need for additional help. Students also learn to assess the nature of the injury or illness by determining responsiveness, assessing the airway, breathing and circulation.

Module 4: Circulation – This module covers the current American Heart Association standard for cardiopulmonary resuscitation (CPR) and allows for practicing the concepts and skills regarding chest compressions for adults, children and infants. This module also includes the use of AEDs (automatic external defibrillators).

Module 5: Illness and Injury – Covers what is commonly referred to as first aid. This module covers recognition and management of general medical complaints, seizures, altered mental status, environmental emergencies, behavioral emergencies, psychological crisis and typical patient situations. A review of the cardiovascular system is covered to prepare for internal and external bleeding first aid, as well as soft tissue injuries and burns. Dressing and bandaging wounds is also addressed. The final portion of this module covers musculoskeletal injuries, and includes head and spinal injuries.

Module 6: Childbirth and Children – Information is presented in two parts. The first covers the physiological and anatomical changes that occur during pregnancy and demonstrates child delivery and newborn care. The second part presents the differences between children and infants and their common medical and trauma conditions.

Module 7: EMS Operations – A review of the knowledge needed to function as an EMR and an overview of extrication and rescue operations, hazardous materials, mass casualty situations and basic triage.

EMR training is available through most technical colleges as well as some independent training services. Being an EMR has become a requirement for many law enforcement agencies and other emergency personnel. There are also a growing number of EMRs in other fields – teachers, lifeguards, utility workers, bus drivers, hunting and fishing guides and flight attendants are among the growing list.

Certification and Reinstatement

When the 80-120 hours of training are complete, EMR certification lasts for two years. Sometime before the two years expires, a training update course of a minimum of 12 hours is required to maintain certification. The requirements for reinstatement vary by state.

According to the National Registry of Emergency Medical Technicians, should an EMR allow his or her certification to lapse they must complete the following to become reinstated:

- If the EMR license has lapsed within a two-year period or lapsed beyond a two-

year period and state licensure/ certification has been maintained, the candidate must:

- Successfully complete a First Responder Refresher program,
 - Submit a new application and fee, and
 - Successfully complete the National Registry cognitive examination and a practical examination that equals or exceeds the criteria established by the DOT: First Responder Final Practical Skills Exam, Appendix "H"; including One and Two Person CPR, Infant CPR and Unresponsive Adult Obstructed Airway.
- If lapsed beyond a two-year period and state licensure/certification has not been maintained, the candidate must:
 - Successfully complete another entire First Responder Education program,
 - Submit a new application and fee, and
 - Successfully complete the National Registry cognitive examination and a practical examination that equals or exceeds the criteria established by the DOT: First Responder Final Practical Skills Exam, Appendix "H"; including One and Two Person CPR, Infant CPR and Unresponsive Adult Obstructed Airway.

All states are free to make changes as they see fit. Contact your state health department or other applicable agency for details regarding changes for your location.

Frequently Asked Questions

Q: What is the initial requirement? Is it 80 hours? Or 120?

A: Most states are including the advanced skills modules and CPR certification – thus providing about a 100 hour class. States can vary in hours required.

Q: Do you have to have a medical background in order to become an EMR?

A: No, you do not have to have a medical background to become an EMR.

Q: Is there an age limit to start an EMR program?

A: The age limit to start an EMR program varies by state.

Q: Do testing requirements for EMRs vary by state?

A: Yes, testing requirements for EMRs do vary by state.

Sources

For more information please visit:

First Responder: National Standard Curriculum

National Registry of Emergency Medical Technicians

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