

What are Occupational Standards (OS)?

- OS describe what individuals need to do, know and understand in order to carry out a particular job role or function
- OS are performance standards that individuals must achieve when carrying out functions in the workplace, together with specifications of the underpinning knowledge and understanding



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Introduction

Qualifications Pack- Emergency Medical Technician - Basic

SECTOR: HEALTH

SUB-SECTOR: ALLIED HEALTH AND PARAMEDICS

OCCUPATION: EMERGENCY MEDICAL TECHNICIAN - BASIC

REFERENCE ID: HSS/ Q 2301

ALIGNED TO: NCO-2004/NIL

Emergency Medical Technician (EMT) in the Healthcare Industry is also known as a lifesaver or paramedic.

Brief Job Description: Individuals at this job need to provide emergency medical support and care to individuals who are critically ill or injured and transport them to a medical facility within stipulated time limits.

Personal Attributes: This job requires individuals to work in a team and be comfortable in making decisions pertaining to their area of work. Individuals should be able to maintain composure in extremely stressful conditions in order to assess medical situations and perform emergency lifesaving procedures according to the methods in which training has been imparted to them. Individuals must always perform their duties in a calm, reassuring and efficient manner. The individual must be able to lift between 45 – 99 kilograms of weight with a partner, as the weight of patients will typically fall within that range. The fitness of the individual should be assessed using the Defence Man & Wom guidelines.

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|--|--|---|-------------------------|-----------------|
| Job Details | Qualifications Pack Code | HSS/ Q 2301 | | |
| | Job Role | Emergency Medical Technician - Basic | | |
| | Credits (NSQF) | TBD | Version number | 1.0 |
| | Industry | Health | Drafted on | 12/05/13 |
| | Sub-sector | <u>ALLIED HEALTH AND PARAMEDICS</u> | Last reviewed on | 22/05/13 |
| | Occupation | Emergency Medical Technician - Basic | Next review date | 22/05/15 |
| | Job Role | Emergency Medical Technician - Basic | | |
| Role Description | Providing emergency medical support and care to individuals who are critically ill or injured and transporting them to a medical facility within stipulated time limits. | | | |
| NSQF level | 4 | | | |
| Minimum Educational Qualifications | Class XII | | | |
| Maximum Educational Qualifications | Not Applicable | | | |
| Training (Suggested but not mandatory) | Relevant professional qualification | | | |
| Experience | Not Applicable | | | |
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| <p>Occupational Standards (OS)</p> | <p>HSS/ N 2301: Respond to emergency calls</p> <p>HSS/ N 2302: Size up the scene at the site</p> <p>HSS/ N 2303: Follow evidence based protocol while managing patients</p> <p>HSS/ N 2304: Assess patient at the site</p> <p>HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness</p> <p>HSS/ N 2306: Manage cardiovascular emergency</p> <p>HSS/ N 2307: Manage cerebrovascular emergency</p> <p>HSS/ N 2308: Manage allergic reaction</p> <p>HSS/ N 2309: Manage poisoning or overdose</p> <p>HSS/ N 2310: Manage environmental emergency</p> <p>HSS/ N 2311: Manage behavioural emergency</p> <p>HSS/ N 2312: Manage obstetrics/gynaecology emergencies</p> <p>HSS/ N 2313: Manage bleeding and shock</p> <p>HSS/ N 2314: Manage soft tissue injuries and burns</p> <p>HSS/ N 2315: Manage musculoskeletal injuries</p> <p>HSS/ N 2316: Manage injuries to head and spine</p> <p>HSS/ N 2317: Manage infants, neonates and children</p> <p>HSS/ N 2318: Manage respiratory emergency</p> <p>HSS/ N 2319: Manage severe abdominal pain</p> <p>HSS/ N 2320: Manage mass casualty incident</p> <p>HSS/ N 2321: Select the proper provider institute for transfer</p> <p>HSS/ N 2322: Transport patient to the provider institute</p> <p>HSS/ N 2323: Manage patient handover to the provider institute</p> <p>HSS/ N 2324: Manage diabetes emergency</p> <p>HSS/ N 9601: Collate and communicate health information</p> <p>HSS/ N 9603: Act within the limits of one’s competence and authority</p> <p>HSS/ N 9604: Work effectively with others</p> <p>HSS/ N 9605: Manage work to meet requirements</p> <p>HSS/ N 9606: Maintain a safe, healthy, and secure working environment</p> <p>HSS/ N 9607: Practice code of conduct while performing duties</p> <p>HSS/ N 9609: Follow biomedical waste disposal protocols</p> <p>HSS/ N 9610: Follow infection control policies and procedures</p> <p>HSS/ N 9611: Monitor and assure quality</p> |
| <p>Performance Criteria</p> | <p>Optional : N.A</p> <p>As described in the relevant OS units</p> |

Definitions

| Keywords /Terms | Description |
|---------------------------------------|---|
| Core Skills/Generic Skills | Core Skills or Generic Skills are a group of skills that are essential to learning and working in today's world. These skills are typically needed in any work environment. In the context of the OS, these include communication related skills that are applicable to most job roles. |
| Description | Description gives a short summary of the unit content. This would be helpful to anyone searching on a database to verify that this is the appropriate OS they are looking for. |
| Function | Function is an activity necessary for achieving the key purpose of the sector, occupation, or area of work, which can be carried out by a person or a group of persons. Functions are identified through functional analysis and form the basis of OS. |
| Job role | Job role defines a unique set of functions that together form a unique employment opportunity in an organisation. |
| Knowledge and Understanding | Knowledge and Understanding are statements that together specify the technical, generic, professional and organisational specific knowledge that an individual needs in order to perform to the required standard. |
| National Occupational Standards (NOS) | NOS are Occupational Standards that apply uniquely in the Indian context. |
| Occupation | Occupation is a set of job roles, which perform similar/related set of functions in an industry. |
| Occupational Standards (OS) | OS specify the standards of performance an individual must achieve when carrying out a function in the workplace, together with the knowledge and understanding they need to meet that standard consistently. Occupational Standards are applicable both in the Indian and global contexts. |
| Organisational Context | Organisational Context includes the way the organisation is structured and how it operates, including the extent of operative knowledge managers have of their relevant areas of responsibility. |
| Performance Criteria | Performance Criteria are statements that together specify the standard of performance required when carrying out a task. |
| Qualifications Pack Code | Qualifications Pack Code is a unique reference code that identifies a qualifications pack. |
| Qualifications Pack(QP) | Qualifications Pack comprises the set of OS, together with the educational, training and other criteria required to perform a job role. A Qualifications Pack is assigned a unique qualification pack code. |
| Scope | Scope is the set of statements specifying the range of variables that an individual may have to deal with in carrying out the function which have a critical impact on the quality of performance required. |
| Sector | Sector is a conglomeration of different business operations having similar businesses and interests. It may also be defined as a distinct subset of the economy whose components share similar characteristics and interests. |

| Sub-functions | Sub-functions are sub-activities essential to fulfil the achieving the objectives of the function. |
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| Sub-sector | Sub-sector is derived from a further breakdown based on the characteristics and interests of its components. |
| Technical Knowledge | Technical Knowledge is the specific knowledge needed to accomplish specific designated responsibilities. |
| Unit Code | Unit Code is a unique identifier for an OS unit, which can be denoted with 'N'. |
| Unit Title | Unit Title gives a clear overall statement about what the incumbent should be able to do. |
| Vertical | Vertical may exist within a sub-sector representing different domain areas or the client industries served by the industry. |
| Keywords /Terms | Description |
| ALS | Advanced Life Support |
| EMT | Emergency Medical Technician |
| MHRD | Ministry of Human Resource Development |
| NOS | National Occupational Standard(s) |
| NVEQF | National Vocational Education Qualifications Framework |
| NVQF | National Vocational Qualifications Framework |
| OS | Occupational Standard(s) |
| PCR | Patient Care Report |
| QP | Qualifications Pack |
| SALT | Sort, Assess, Lifesaving interventions, Treat and Transport |
| START | Simple triage and rapid treatment |
| UGC | University Grants Commission |

Acronyms

HSS/ N 2301: Respond to emergency calls

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to respond to a call received from the Dispatch and prepare to move to the emergency site.

HSS/ N 2301: Respond to emergency calls

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| National Occupational Standard | Unit Code | HSS/ N 2301 |
| | Unit Title (Task) | Respond to Emergency Calls |
| | Description | This OS unit is about the EMT’s first response to a call received from the dispatch and preparing to move to the emergency site. |
| | Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Responding to emergency calls from the dispatch centre , Collecting information about the type of emergency from the dispatch centre , Preparing oneself for an emergency , Preparing the ambulance with required equipment |
| | Performance Criteria (PC) wrt the Scope | |
| | Element | Performance Criteria |
| | | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Understand the emergency codes used in the hospital for emergency situations</p> <p>PC2. Reflect professionalism through use of appropriate language while speaking to the dispatch team</p> <p>PC3. Use communication equipment such as mobile phones, radio communication equipment, megaphones and other equipment as required by the EMS provider</p> <p>PC4. Evaluate the situation of the patient(s) on the basis of the call with the dispatch centre</p> <p>PC5. Demonstrate teamwork while preparing for an emergency situation with a fellow EMT and/or a nurse</p> <p>PC6. Recognise the boundary of one’s role and responsibility and seek supervision from the medical officer on duty when situations are beyond one’s competence and authority</p> <p>PC7. Prepare for the emergency by practicing Body Substance Isolation (BSI). This includes putting on:</p> <ol style="list-style-type: none"> Hospital Gowns Medical Gloves Shoe Covers Surgical Masks Safety Glasses Helmets Reflective Clothing <p>PC8. Prepare the ambulance with the required medical equipment and supplies as per the medical emergency. A large selection of equipment and supplies specialised for Emergency Medical Services include diagnostic kits, disposables, and patient care products. The EMT should ensure all materials, supplies, medications and other items required for Basic Life Support (BLS) have been stocked in the Ambulance</p> |
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HSS/ N 2301: Respond to emergency calls

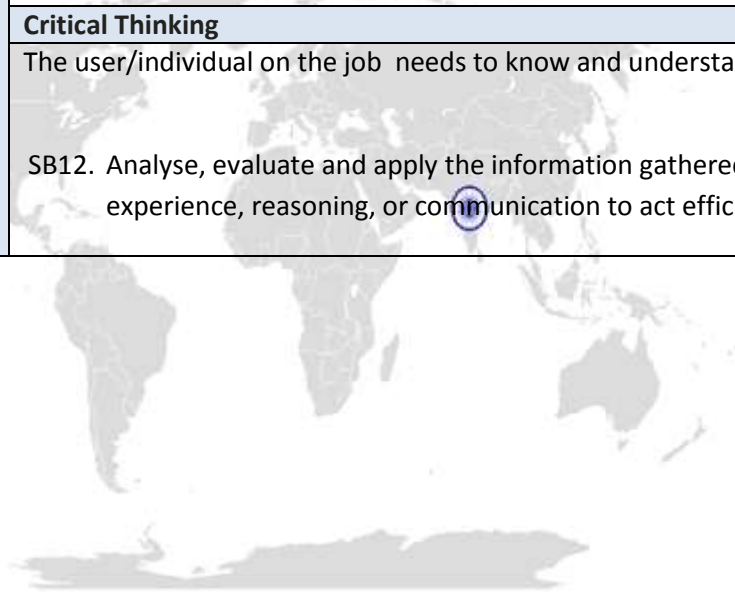
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| | <p>PC9. Demonstrate active listening in interactions with the dispatch team, colleagues and the medical officer</p> <p>PC10. Establish trust and rapport with colleagues</p> <p>PC11. Maintain competence within one’s role and field of practice</p> <p>PC12. Promote and demonstrate good practice as an individual and as a team member at all times</p> <p>PC13. Identify and manage potential and actual risks to the quality and safety of practice</p> <p>PC14. Evaluate and reflect on the quality of one’s work and make continuing improvements</p> <p>PC15. Understand basic medico-legal principles</p> <p>PC16. Function within the scope of care as defined by state, regional and local regulatory agencies</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Codes used in the hospital for all emergency situations</p> <p>KA2. Relevant legislation, standards, policies, and procedures followed in the hospital</p> <p>KA3. How to engage with the medical officer for support in case the situation is beyond one’s competence</p> <p>KA4. The role and importance of the EMT in supporting hospital operations</p> <p>KA5. How to dress appropriately as per the healthcare provider rules during an emergency situation</p> <p>KA6. Response times decided by the EMS provider/ state government in which EMT operates</p> <p>KA7. Protocols designed by the state or EMS providers</p> |
| <p>B Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Relevant medical equipment used in different types of emergencies</p> <p>KB2. Basic medical terms and principles to evaluate the patient’s condition</p> <p>KB3. How to prepare for dealing with different types of hazardous materials like nuclear, radioactive, biological, chemical and explosive substances</p> |
| Skills (S) (Optional) | |
| <p>A. Core Skills/ Generic Skills</p> | <p style="text-align: center;">Writing Skills</p> |
| | <p>The user/ individual on the job needs to know and understand how to</p> <p>SA1. Write the Patient Care Report (PCR)</p> <p>SA2. Capture information from the dispatch centres</p> |
| | <p style="text-align: center;">Reading Skills</p> |

HSS/ N 2301: Respond to emergency calls

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| | <p>The user/individual on the job needs to know and understand how to</p> <p>SA3. Read written instructions for specific emergency situations, briefs from the dispatch centre and other important communiques</p> <p>SA4. Keep abreast of the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Collect all necessary information regarding the patient(s) through the dispatch centre</p> <p>SA6. Discuss requirements with colleagues</p> <p>SA7. Interact with a supervisor if required</p> <p>SA8. Avoid using jargon, slang or acronyms when communicating with the dispatch centre, colleagues or the medical officer</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions on medical equipment and supplies to stock based on information received from the dispatch centre</p> <p>SB2. Make decisions on routes to take and preparations to make based on information received from the dispatch centre</p> |
| | <p>Plan and Organise</p> |
| | <p>The user/individual on the job needs to know and understand how to :</p> <p>SB3. Plan and organise activities required to respond to an emergency call</p> <p>SB4. Stage an ambulance and manage crowds</p> |
| | <p>Patient Centricity</p> |
| <p>The user/individual on the job needs to know and understand how to:</p> <p>SB5. Communicate effectively with the dispatch team, patients and their family, physicians, and other members of the health care team</p> <p>SB6. Maintain patient confidentiality</p> <p>SB7. Respect the rights of the patient(s)</p> <p>SB8. Cope with stress on the job without affecting job quality</p> | |
| <p>Problem Solving</p> | |
| <p>The user/individual on the job needs to:</p> <p>SB9. Have strong problem-solving skills</p> <p>SB10. They must evaluate patients' symptoms and administer the appropriate</p> | |

HSS/ N 2301: Respond to emergency calls

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| | treatments |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB11. Resolve the problem and make decisions based on the information captured from dispatch centres |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB12. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |



HSS/ N 2301: Respond to emergency calls

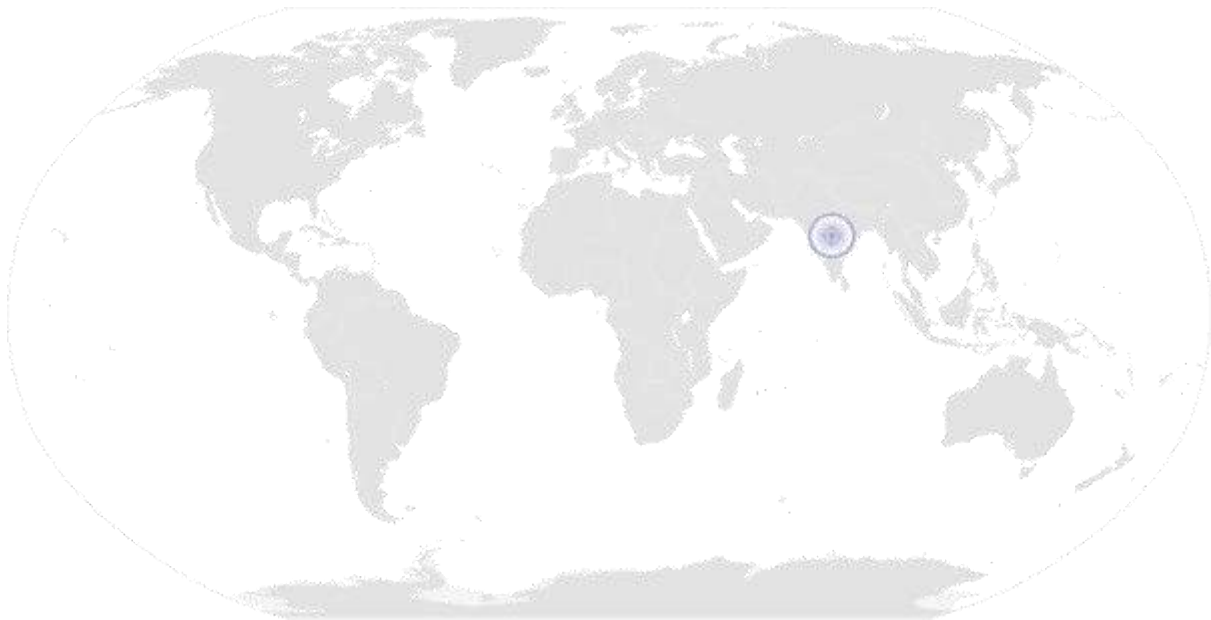
NOS Version Control

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| NOS Code | HSS/ N 2301 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |



HSS/ N 2302: Size up the scene at the site

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to decide on action to be taken upon arrival at the emergency scene to evaluate the situation and ensure the safety of patient(s) and others.

HSS/ N 2302: Size up the scene at the site

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| National Occupational Standard | Unit Code | HSS/ N 2302 |
| | Unit Title (Task) | Size up the scene at the site |
| | Description | This OS unit is about the EMT’s response upon arrival at the emergency scene, evaluating the situation and ensuring the safety of the patient(s) and others. |
| | Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Summing up the scene quickly and ensuring that it is safe by taking appropriate measures , Collaborating with other emergency response agencies, if required, Estimating the total number of patient(s) involved and calling for backup, if required |
| | Performance Criteria (PC) wrt the Scope | |
| | Element | Performance Criteria |
| | | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Ensure that all safety precautions are taken at the scene of the emergency</p> <p>PC2. Introduce themselves to patient(s) and ask for their consent to any treatment</p> <p>PC3. Understand the implications of nuclear, radioactive, biological, chemical and explosive incidents and take appropriate action</p> <p>PC4. Collaborate effectively with other emergency response agencies and explain the situation clearly to them. This includes bomb disposal squads, fire departments, chemical, biological and nuclear agencies</p> <p>PC5. Reassure patient(s) and bystanders by working in a confident, efficient manner</p> <p>PC6. Work expeditiously while avoiding mishandling of patient(s) and undue haste</p> <p>PC7. Recognise and react appropriately to persons exhibiting emotional reactions</p> <p>PC8. Interact effectively with the patient(s), relatives and bystanders who are in stressful situations</p> <p>PC9. Obtain information regarding the incident through accurate and complete scene assessment and document it accordingly</p> <p>PC10. Evaluate the scene and call for backup if required</p> <p>PC11. Recognise the boundary of one’s role and responsibility and seek supervision when situations are beyond one’s competence and authority</p> <p>PC12. Maintain competence within one’s role and field of practice</p> <p>PC13. Collaborate with the law agencies at a crime scene</p> <p>PC14. Promote and demonstrate good practice as an individual and as a team member at all times</p> <p>PC15. Identify and manage potential and actual risks to the quality and safety of work done</p> <p>PC16. Evaluate and reflect on the quality of one’s work and make continuing improvements</p> <p>PC17. Understand basic medico-legal principles</p> <p>PC18. Function within the scope of care defined by state, regional and local regulatory</p> |
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HSS/ N 2302: Size up the scene at the site

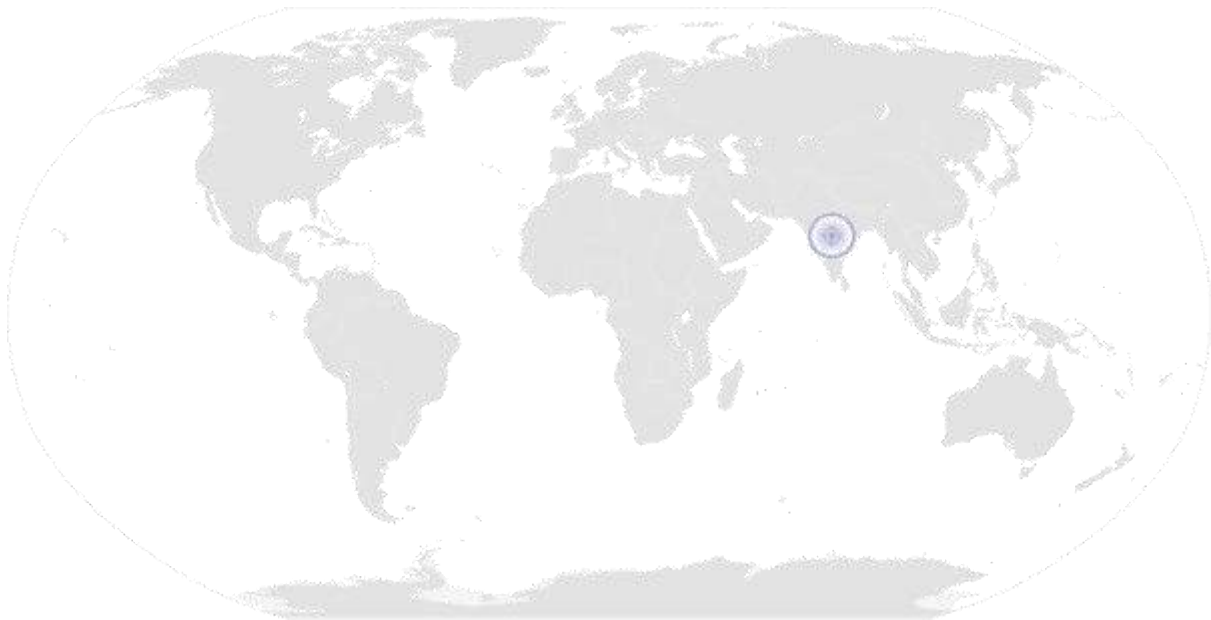
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| | agencies |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. The importance of health, safety, and security protocols followed by the health care provider at the emergency scene</p> <p>KA2. Relevant information on health, safety, and security that applies to the emergency scene</p> <p>KA3. The healthcare provider’s emergency procedures and responsibilities in nuclear, radioactive, biological, chemical and explosive incidents</p> <p>KA4. What constitutes a hazard encountered at the scene and how to report the hazard to the competent authority</p> <p>KA5. Codes used in the hospital for all emergency situations</p> <p>KA6. Relevant legislation, standards, policies, and procedures followed in the hospital</p> <p>KA7. How to engage with the medical officer for support in case the situation is beyond one’s competence</p> <p>KA8. Role and importance of the EMT in supporting hospital operations</p> <p>KA9. Protocols designed by the state or EMS providers</p> |
| B Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to create a safe environment around the patient(s) and others</p> <p>KB2. The importance of being alert to health, safety, and security hazards at the emergency site</p> <p>KB3. The common health, safety, and security hazards that affect people working at the emergency site</p> <p>KB4. How to identify health, safety, and security hazards</p> <p>KB5. The importance of warning others about hazards and what to do until the hazard is dealt with</p> <p>KB6. How to work efficiently in a team to ensure patient safety</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know :</p> <p>SA1. The information regarding the incident through accurate and complete scene assessment and how to document it accordingly</p> |
| | Reading skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA2. Read about changes in legislations and organisational policies with respect to safety procedures at emergency or crime scenes</p> <p>SA3. Keep abreast of the latest knowledge by reading internal communications and</p> |

HSS/ N 2302: Size up the scene at the site

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| | legal framework changes related to actions to be taken at the scene of an emergency |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: SA4. Interact with the patient(s) SA5. Communicate with other people around the patient(s) and give them clear instructions for their safety SA6. Communicate clearly with other emergency response agencies if required SA7. Discuss the scene with colleagues to express views and opinions SA8. Avoid using jargon, slang or acronyms when communicating with the patient(s) SA9. Interact effectively with the patient(s), relatives and bystanders who are in stressful situations SA10. Shout assertively in case the patient does not respond SA11. Collect all necessary information regarding the patient's condition SA12. Collect personal information regarding the patient like his/her address |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to the scene and actions to be taken |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: SB2. Plan and organise activities to be carried out at the scene in order to be rapid and effective without compromising on safety or patient care SB3. How to stage an ambulance and manage crowds |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB4. Communicate effectively with patients and their family, bystanders and members of other emergency response teams SB5. Be aware of the immediate needs of the patient and their family and balance that with the healthcare actions to be taken SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job should be able to: SB8. Identify immediate or temporary solutions to resolve delays SB9. Foresee and arrange for backups or other emergency response agencies |
| | Analytical Thinking |

HSS/ N 2302: Size up the scene at the site

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| | The user/individual on the job needs to know and understand how to: |
| | SB10. Analyse the situation at the scene and map out the best possible course of action while integrating all essential stakeholders |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| | SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. |



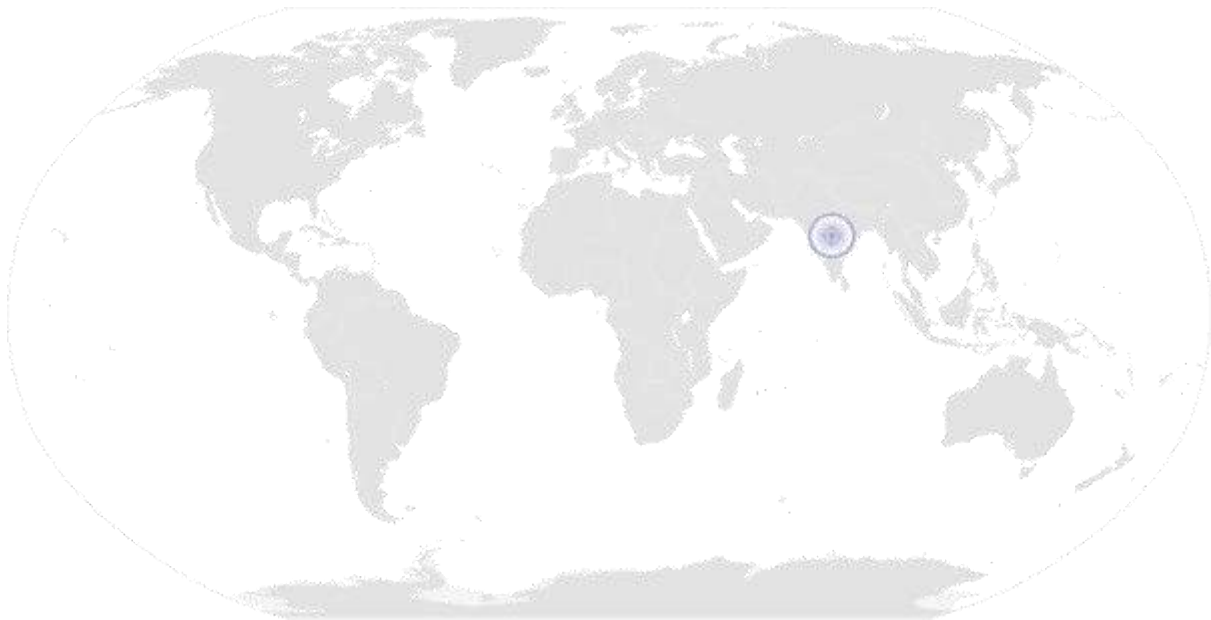
HSS/ N 2302: Size up the scene at the site

NOS Version Control

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| NOS Code | HSS/ N 2302 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2303: Follow evidence based protocol while managing patients

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to follow standardised procedures and provide an acceptable standard of care. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients while on a call.

HSS/ N 2303: Follow evidence based protocol while managing patients

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| National Occupational Standard | Unit Code | HSS/ N 2303 |
| | Unit Title (Task) | Follow evidence based Protocol while managing patients |
| | Description | This OS unit is about standardised procedures to be followed and acceptable standards of care required of an EMT. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients while on a call. |
| | Scope | This unit/task covers: <ul style="list-style-type: none"> Following the prescribed procedures and steps involved in an emergency or triage context , Managing cases where the patient refuses treatment |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Understand the appropriate and permissible medical service procedures which may be rendered by an EMT to a patient not in a hospital. For example, steps to be followed for cardiovascular emergencies or emergency of an environmental nature like burns, hypothermia</p> <p>PC2. Understand the communication protocols for medical situations that require direct voice communication between the EMT and the Medical officer prior to the EMT rendering medical services to the patients outside the hospital</p> <p>PC3. Adhere to laws, regulations and procedures relating to the work of an EMT</p> <p>PC4. Demonstrate professional judgement in determining treatment modalities within the parameters of relevant protocols</p> <p>PC5. Understand the universal approach to critical patient care and package-up-patient-algorithm(transport protocol)</p> |
| | Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Health provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Laws and regulations associated with the emergency case. For example, the healthcare provider needs to know in which situations CPR needs to be withheld and in which cases it needs to be given</p> <p>KA2. Emergency protocol terminologies used by the Healthcare Provider and other emergency service providers</p> <p>KA3. Protocol designed by the State or EMS providers</p> | |

HSS/ N 2303: Follow evidence based protocol while managing patients

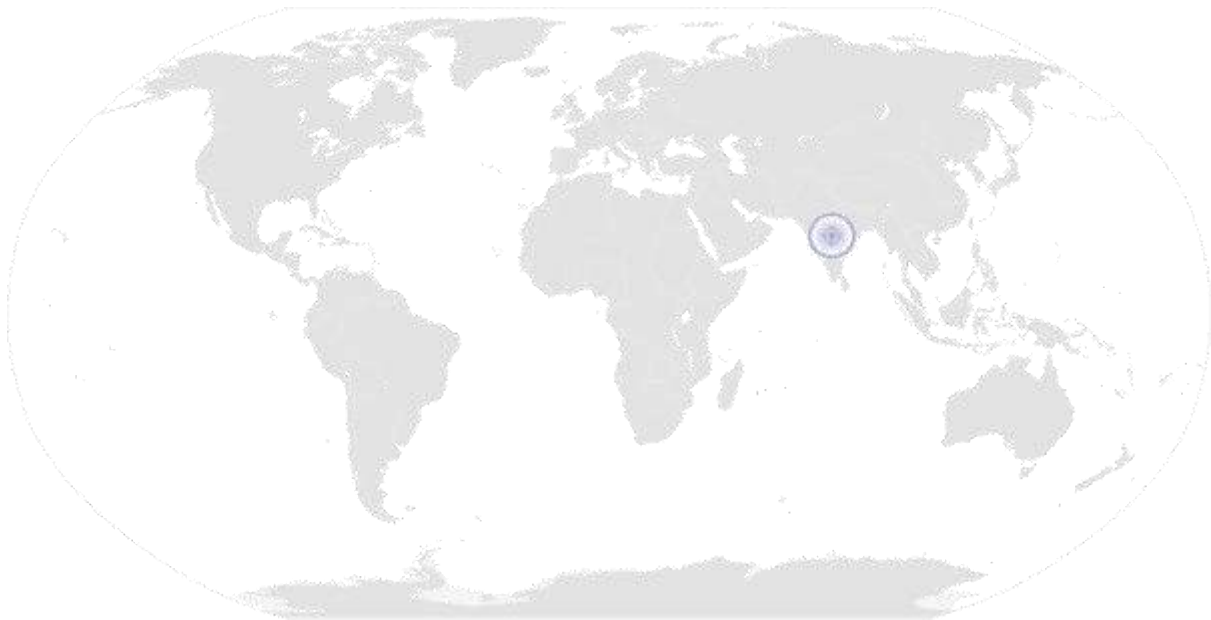
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| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. The steps and procedures required while attending to a patient. For example the following protocols need to be followed in handling an emergency case:</p> <ul style="list-style-type: none"> ○ Observe the patient and take consent before initiating any examination of the patient ○ Examine the patient according to prescribed rules and laws and ensure no further damage is done during examination ○ Share with the patient the options available depending on the severity of the damage and potential risks/ benefits of each ○ Take consent of the patient, or the family members in case the patient is unconscious, to initiate the appropriate treatment ○ Explain to the patient the monetary commitments and insurance procedure, if applicable ○ Complete all paperwork related to PCR, medical history, insurance, transport and transfer ○ Take the consent of the medical officer by sharing a crisp, concise and to the point report ○ Transport the patient to the appropriate hospital based on the kind of care required for the patient <p>KB2. When to contact medical control and manage the emergency with both the medical control and the medical officer</p> <p>KB3. How to communicate with the hospital facility by sharing sharp, concise and to-the-point reports</p> <p>KB4. How to manage cases of treatment-refusal</p> <p>KB5. How to meticulously document cases in which a fully alert patient refuses treatment despite persuasion and consequence sharing</p> <p>KB6. Evidence based protocols for handling the patients</p> <p>KB7. Clinical protocols required for different types of emergencies</p> <p>KB8. Set protocols for lifting and shifting the patients</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | <p>Writing skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share sharp, concise and to the point reports with hospital staff</p> <p>SA2. Share sharp, concise and to the point reports/PCR with the medical officer</p> <p>Reading skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA3. Read about changes in legislations and organisational policies with respect to refusal of treatment, diagnosis of patients at the scene and lifting/ shifting/ moving patients at the scene</p> <p>SA4. Keep abreast of the latest knowledge by reading internal communications and</p> |

HSS/ N 2303: Follow evidence based protocol while managing patients

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| | <p>legal framework changes related to roles and responsibilities</p> <p>SA5. Read new clinical protocols and orders given by medical officer or any other provider institute</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA6. Interact with the patient</p> <p>SA7. Give clear instructions to the patient</p> <p>SA8. Shout assertively in case the patient does not respond</p> <p>SA9. Collect all necessary information regarding the patient's condition, address</p> <p>SA10. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA11. Communicate with other people around the patient</p> |
| B. Professional Skills | <p>Decision making</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment</p> <p>SB2. Act decisively by balancing protocols and the emergency at hand</p> <p>SB3. Manage situations where minors or self-harming patients are involved</p> |
| | <p>Plan and Organise</p> <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities at the scene in order to be efficient and rapid without compromising on patient care</p> |
| | <p>Patient centricity</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB6. Employ effective non-verbal behaviour with the patient(s) if required</p> <p>SB7. Maintain patient confidentiality</p> <p>SB8. Respect the rights of the patient(s)</p> |
| | <p>Problem solving</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB9. Tackle the situation in case of treatment-refusal</p> <p>SB10. Reach the patient by taking the most efficient route considering the traffic and provide aid</p> |
| | <p>Analytical thinking</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB11. Employ skills and knowledge at his or her disposal to judge the criticality of a patient's condition and decide on a course of action</p> |
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HSS/ N 2303: Follow evidence based protocol while managing patients

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| | Critical thinking |
| | The user/individual on the job needs to know and understand how to: SB12. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. |



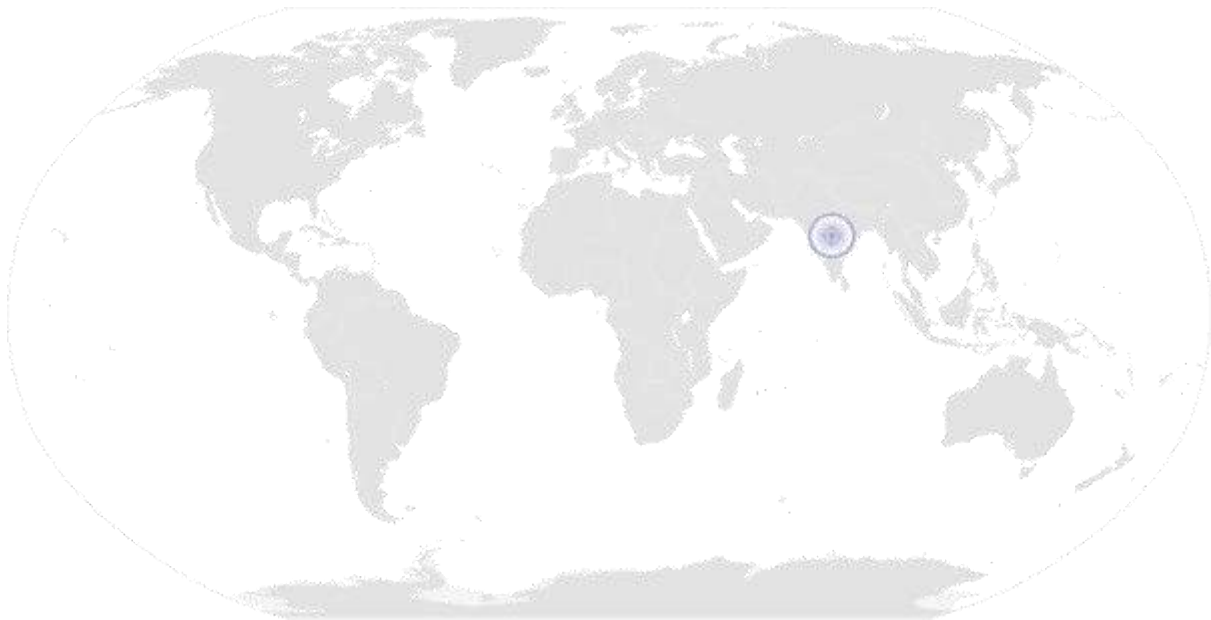
HSS/ N 2303: Follow evidence based protocol while managing patients

NOS Version Control

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| NOS Code | HSS/ N 2303 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2304: Assess patient at the site

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to assess the condition of the patients in an emergency.

HSS/ N 2304: Assess patient at the site

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| National Occupational Standard | Unit Code | HSS/ N 2304 |
| | Unit Title (Task) | Assess Patient at the site |
| | Description | This OS unit is about EMT assessing the situation through examination of the patient’s current medical state and extent of damage. This is followed by assessment of the clinical condition |
| | Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> • Assessing the situation and condition of the patient based on an examination and supporting tests , Arriving at a probable diagnosis |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Explain clearly:</p> <ul style="list-style-type: none"> ○ An EMT’s role and scope, responsibilities and accountability in relation to the assessment of health status and needs ○ What information need to be obtained and stored in records ○ With whom the information might be shared ○ What is involved in the assessment <p>PC2. Obtain informed consent of the patient for the assessment process, unless impossible as a consequence of their condition</p> <p>PC3. Conduct all observations and measurements systematically and thoroughly in order of priority (including Airway, Breathing, Circulation)</p> <p>PC4. Respect the patient’s privacy, dignity, wishes and beliefs</p> <p>PC5. Minimise any unnecessary discomfort and encourage the patient to participate as fully as possible in the process</p> <p>PC6. Communicate with the patient clearly and in a manner and pace that is appropriate to:</p> <ul style="list-style-type: none"> ○ Their level of understanding ○ Their culture and background ○ Their need for reassurance and support <p>PC7. Recognise promptly any life-threatening or high risk conditions</p> <p>PC8. Make full and effective use of any protocols, guidelines and other sources of guidance and advice to inform decision making</p> <p>PC9. Assess the condition of the patient by:</p> <ul style="list-style-type: none"> ○ Observing patient position ○ Observing the colour of the skin as well as ease of breathing and paying attention to any signs of laboured breathing or coughing ○ Checking if there is any bleeding from the nose or ears ○ Looking at the pupil dilation/difference in pupil sizes, as it may be |
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HSS/ N 2304: Assess patient at the site

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| | <p>suggestive of concussion</p> <ul style="list-style-type: none"> ○ Checking if the patient is under the effect of alcohol or any other drug ○ Checking the patient's mouth to ensure the airway is clear ○ Gently checking the neck, starting from the back ○ Checking for any swelling or bruises ○ Checking the chest to ascertain if any object is stuck ○ Checking the ribcage for bruising or swelling and the abdomen for any kind of swelling or lumps ○ Checking for any damage to the pelvis ○ Asking the victim if they are able to feel their legs ○ Observing the colour of toes to check for any circulation problems <p>PC10. Use appropriate equipment if required</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <ul style="list-style-type: none"> KA1. Why it is important to establish informed consent for the assessment to be made and how to proceed when consent cannot be, or is not provided KA2. Methods of obtaining consent and how to ensure that sufficient information has been provided on which to base judgment KA3. The importance of clear communication in clinical situations KA4. The importance of recording information clearly, accurately and legibly KA5. The importance of health, safety, and security at the emergency scene KA6. The basic requirements of the health and safety and other legislations and regulations that apply to the scene KA7. Relevant information on health, safety, and security that applies to the emergency scene KA8. The steps which need to be taken to ensure that the privacy, dignity, wishes and beliefs of the adult are respected and maintained where possible KA9. How to recognise hazards when encountered at the scene and how to report the hazard to the competent authority KA10. The organisation's emergency procedures and responsibilities in nuclear, radioactive, biological, chemical and explosive incidents |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <ul style="list-style-type: none"> KB1. How to examine a patient whose current medical condition is unclear. For example, ability to know how to practice caution with a patient who may have suffered a back injury. KB2. The variation in approach for patient assessment between medical and trauma emergency cases KB3. Clinical norms for adults and children with regard to: <ul style="list-style-type: none"> a. Temperature b. Pulse c. Respiration d. Blood pressure (non-invasive) e. Oxygen saturation level |

HSS/ N 2304: Assess patient at the site

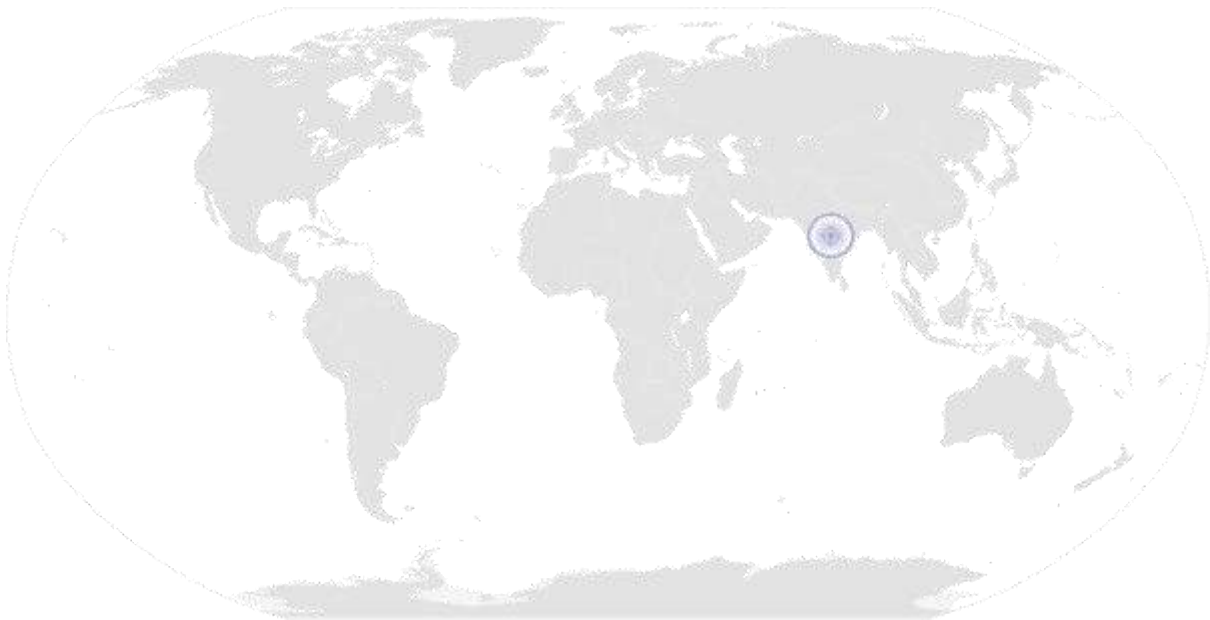
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| | <ul style="list-style-type: none"> f. AVPU scale g. Glasgow Coma Scale h. Pupil reaction i. ECG j. Urinalysis k. Blood glucose l. Skin colour and pallor m. Consciousness <p>KB4. The indicators of high risk or life threatening conditions in relation to the parameters listed above</p> <p>KB5. Clinical norms with regard to the following symptoms:</p> <ul style="list-style-type: none"> a. Breathlessness b. Bleeding and fluid loss c. Pain d. Tissue trauma e. Skin rashes/dermatological features f. Toxic ingestion g. Altered consciousness, dizziness, faints and fits h. Altered behaviour i. Fever j. A fall k. Ear, nose and throat problems <p>KB6. Requirements to ensure health and safety at the emergency site</p> <p>KB7. How to create a safe environment around the patient and others</p> <p>KB8. The importance of being alert to health, safety, and security hazards at the emergency site</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <ul style="list-style-type: none"> SA1. Record information clearly, accurately and legibly SA2. Fill up all details in the PCR accurately and quickly |
| | Reading skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <ul style="list-style-type: none"> SA3. Read about changes in legislations and organisational policies related to patient assessment procedures, techniques and processes SA4. Read updated clinical regulations and reports on assessment of patients at the site of an emergency |
| | Oral Communication (Listening and Speaking skills) |

HSS/ N 2304: Assess patient at the site

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| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Interact with the patient clearly and in a reassuring manner SA6. Give clear instructions to the patient SA7. Shout assertively in case the patient does not respond SA8. Collect all necessary information regarding the patient's condition, in order to provide the correct immediate treatment SA9. Avoid using jargon, slang or acronyms when communicating with a patient SA10. Communicate with other people around the patient and give them clear instructions for their safety SA11. Communicate clearly with other emergency response agencies if required</p> |
| <p>B. Professional Skills</p> | <p>Decision making</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to the treatment to be given at the site and other actions to be taken</p> |
| | <p>Plan and Organise</p> |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB2. Plan and organise activities at the scene of the emergency in order to provide the correct level of care to the patient</p> |
| | <p>Patient centricity</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team SB4. Be sensitive to potential cultural differences SB5. Employ effective non-verbal behaviour with the patient(s) if required SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s)</p> |
| | <p>Problem solving</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB8. Check for the parameters and symptoms and provide appropriate medical care</p> |
| | <p>Analytical thinking</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB9. Identify immediate or temporary solution when patient's medical condition is unclear</p> |
| <p>Critical thinking</p> | |
| <p>The user/individual on the job should be::</p> | |

HSS/ N 2304: Assess patient at the site

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| | <p>SB10. Able to pay attention to detail at the scene and minutely observe the patient's condition</p> <p>SB11. Able to use the knowledge and training at his or her disposal to make an accurate judgement of the patient's condition and needs, even in a crisis</p> |
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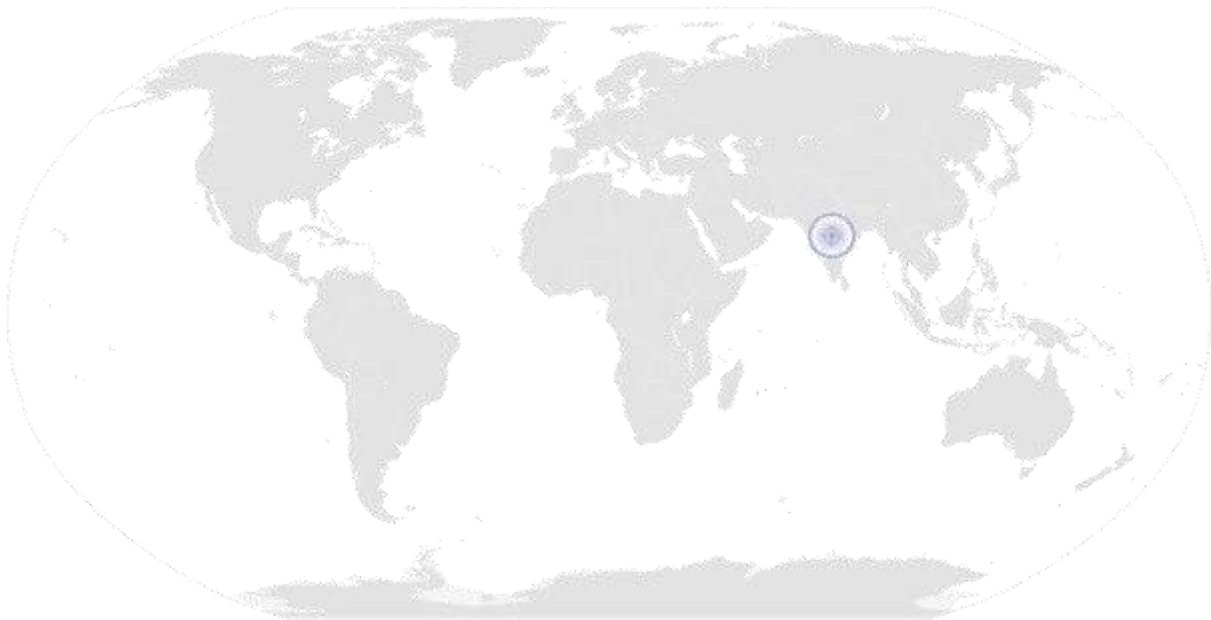
HSS/ N 2304: Assess patient at the site

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2304 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for sorting injured or ill people into groups based on their need for or likely benefit from immediate medical treatment.

HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness

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| National Occupational Standard | Unit Code | HSS/ N 2305 |
| | Unit Title (Task) | Patient Triage based on the defined clinical criteria of severity of illness |
| | Description | This OS unit is about a process for sorting injured people into groups based on their need for or likely benefit from immediate medical treatment. It aims to ensure that patients are treated in order of their clinical urgency i.e. the need for time-critical intervention. Triage also allows for the allocation of the patient to the most appropriate assessment and treatment area. |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Prioritising the patient based on the measurement and subjective data, Measuring vital signs , Accordingly allocating the patient to a treatment area |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <p>PC1. Have the expertise to quickly assess whether the patient requires immediate life-saving intervention or whether they could wait</p> <p>PC2. Know how to check all the vital signs</p> <p>PC3. Identify a high-risk case</p> <p>PC4. Assess the kind of resources the person will require. For e.g. The EMT should know the standard resources required for a person who comes to the emergency department for a similar ailment</p> <p>PC5. Communicate clearly and assertively</p> <p>PC6. Collaboratively be able to supervise/work collaboratively with other departments</p> <p>PC7. Multitask without compromising on quality and accuracy of care provided</p> <p>PC8. Use SALT method in day-to-day handling and START in mass casualty handling and disasters</p> |
| | Knowledge and Understanding (K) | |
| | A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: <p>KA1. How to capture the medical history of the patient to correctly prioritise the patient. For example the user will record past medical history, allergies, medications, age and gender</p> <p>KA2. The importance of health, safety, and security at the emergency scene</p> <p>KA3. The basic requirements of the health and safety and other legislations and regulations that apply to the scene</p> <p>KA4. The relevant information on health, safety, and security that applies to the emergency scene</p> <p>KA5. How to recognise hazards when encountered at the scene and how to report the</p> |

HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness

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| | <p>hazard to the competent authority</p> <p>KA6. The organisation’s emergency procedures and in situations like a nuclear, radioactive, biological, chemical and explosive incidents</p> <p>KA7. Complex cases like treating a child whose parents, guardian or day care is not present</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to check a victim whose current medical condition is unclear. For example, ability to practice caution with a patient who may have suffered a back injury</p> <p>KB2. How to assess severity of pain (e.g. using Visual Analogue Scale) and manage appropriately</p> <p>KB3. Requirements to ensure health and safety at the emergency site</p> <p>KB4. How to create a safe environment around the patient</p> <p>KB5. How to use Sort, Assess, Lifesaving interventions, Treat and Transport (SALT) triage system and Simple Triage And Rapid Treatment (START) plan accordingly, as per the triage guidelines and protocols</p> |
| <p>Skills (S)</p> | |
| <p>A. Core Skills/ Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Document all the details about the patient for example</p> <ul style="list-style-type: none"> ○ Date and time of assessment ○ Name of triage officer ○ Chief presenting problems ○ Limited, relevant history ○ Relevant assessment findings ○ Initial triage category allocated <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report/PCR with the medical officer</p> <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA4. Read about changes in legislations and organisational policies</p> <p>SA5. Keep abreast with the latest knowledge by reading internal communications and legal framework changes</p> <p>SA6. Read new clinical protocols and reading orders given by medical officer</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Interact with the patient</p> <p>SA8. Give clear instructions to the patient</p> <p>SA9. Shout assertively in case the patient does not respond</p> <p>SA10. Collect all necessary information regarding the patient’s condition, address</p> |

HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness

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| | <p>SA11. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA12. Communicate with other people around the patient and give them clear instructions for their safety</p> <p>SA13. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: |
| | SB1. Make decisions pertaining to the concerned area of work in relation to job role |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | SB2. How to plan and organise activities that are assigned |
| | SB3. How to control any aggression by the patient or the patient relatives |
| | SB4. How to ensure there is minimum gap in the arrival time of the medical team and allocation of the patient to a respective triage level |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team |
| | SB6. Be capable of being responsive, listen empathetically to establish rapport in a way that promotes openness on issues of concern |
| | SB7. Be sensitive to potential cultural differences |
| | SB8. Interact therapeutically with psychiatric patients |
| | SB9. Employ effective non-verbal behaviour with the patient(s) if required |
| SB10. Maintain patient confidentiality | |
| SB11. Respect the rights of the patient(s) | |
| Problem Solving | |
| The user/individual on the job needs to know and understand how to: | |
| SB12. Think through the problem, evaluate the possible solution(s) and suggest an optimum /best possible solution(s) | |
| SB13. Identify immediate or temporary solutions to resolve delays | |
| Analytical Thinking | |
| SB14. Resolve problems and make decisions based on the information available | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB15. Ability to analyse and compare similar situations | |

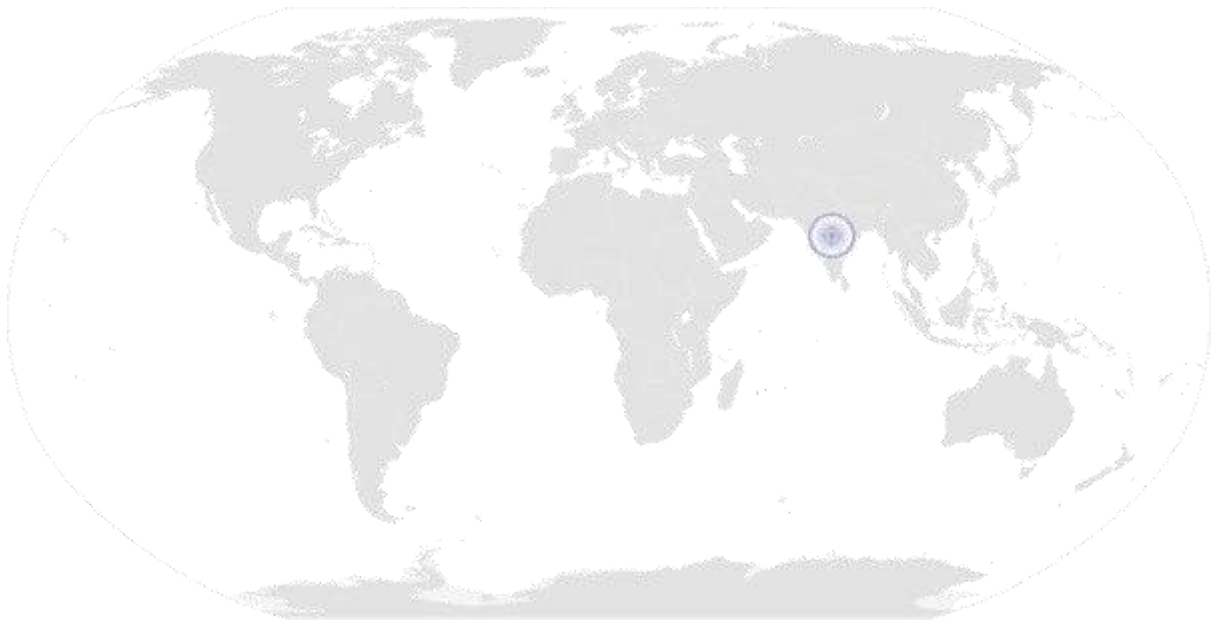
HSS/ N 2305: Patient triage based on the defined clinical criteria of severity of illness

NOS Version Control

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| NOS Code | HSS/ N 2305 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2306: Manage cardiovascular emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to recognise and treat emergencies related to the cardiovascular system.

HSS/ N 2306: Manage cardiovascular emergency

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| National Occupational Standard | Unit Code | HSS/ N 2306 |
| | Unit Title (Task) | Manage Cardiovascular Emergency |
| | Description | This OS unit is about the recognition and treatment of emergencies related to the cardiovascular system. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients in a Cardiac emergency. |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying Cardiac emergencies, Managing patients in Cardiac emergencies, Following the prescribed procedures and steps involved in a Cardiac emergency situation |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <ul style="list-style-type: none"> PC1. Describe the structure and function of the cardiovascular system PC2. Provide emergency medical care to a patient experiencing chest pain/discomfort PC3. Identify the symptoms of hypertensive emergency PC4. Identify the indications and contraindications for automated external defibrillation (AED) PC5. Explain the impact of age and weight on defibrillation PC6. Discuss the position of comfort for patients with various cardiac emergencies PC7. Establish the relationship between airway management and the patient with cardiovascular compromise PC8. Predict the relationship between the patient experiencing cardiovascular compromise and basic life support PC9. Explain that not all chest pain patients result in cardiac arrest and do not need to be attached to an automated external defibrillator PC10. Explain the importance of pre-hospital Advanced Life Support (ALS) intervention if it is available PC11. Explain the importance of urgent transport to a facility with Advanced Life Support if it is not available in the pre-hospital setting PC12. Explain the usage of aspirin and clopidogrel PC13. Differentiate between the fully automated and the semi-automated defibrillator PC14. Discuss the procedures that must be taken into consideration for standard operations of the various types of automated external defibrillators PC15. Assure that the patient is pulseless and apnoeic when using the automated external defibrillator PC16. Identify circumstances which may result in inappropriate shocks PC17. Explain the considerations for interruption of CPR, when using the automated |
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HSS/ N 2306: Manage cardiovascular emergency

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| | <p>external defibrillator</p> <p>PC18. Summarise the speed of operation of automated external defibrillation</p> <p>PC19. Discuss the use of remote defibrillation through adhesive pads</p> <p>PC20. Operate the automated external defibrillator</p> <p>PC21. Discuss the standard of care that should be used to provide care to a patient with recurrent ventricular fibrillation and no available ACLS</p> <p>PC22. Differentiate between the single rescuer and multi-rescuer care with an automated external defibrillator</p> <p>PC23. Explain the reason for pulses not being checked between shocks with an automated external defibrillator</p> <p>PC24. Identify the components and discuss the importance of post-resuscitation care</p> <p>PC25. Explain the importance of frequent practice with the automated external defibrillator</p> <p>PC26. Discuss the need to complete the Automated Defibrillator: Operator's Shift checklist</p> <p>PC27. Explain the role medical direction plays in the use of automated external defibrillation</p> <p>PC28. State the reasons why a case review should be completed following the use of the automated external defibrillator</p> <p>PC29. Discuss the components that should be included in a case review</p> <p>PC30. Discuss the goal of quality improvement in automated external defibrillation</p> <p>PC31. Recognise the need for medical direction of protocols to assist in the emergency medical care of the patient with chest pain</p> <p>PC32. List the indications for the use of nitro-glycerine</p> <p>PC33. State the contraindications and side effects for the use of nitro-glycerine</p> <p>PC34. Perform maintenance checks of the automated external defibrillator</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by hospital.</p> <p>KA2. How to engage with provider for support in order to deliver and assist providers.</p> <p>KA3. How to perform the different procedures relevant to manage cardiovascular emergency</p> <p>KA4. What is the significance of each procedure in patient management</p> <p>KA5. How to use the equipment meant to perform different procedures to manage cardiovascular emergency</p> <p>KA6. Employee safety policy</p> <p>KA7. How to handle when emergency situation is beyond ones' competency</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Role in the emergency cardiac care system</p> <p>KB2. Fundamentals and rationale of early defibrillation</p> <p>KB3. Various types of automated external defibrillators, their advantages and disadvantages, and maintenance</p> <p>KB4. Special considerations for rhythm monitoring</p> |

HSS/ N 2306: Manage cardiovascular emergency

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| | <p>KB5. Importance of coordinating ALS trained providers with personnel using automated external defibrillators</p> <p>KB6. Maintenance of automated external defibrillators</p> <p>KB7. Rationale for administering nitro-glycerine to a patient with chest pain or discomfort</p> <p>KB8. How to assess and provide emergency medical care to a patient experiencing chest pain/discomfort</p> <p>KB9. Application and operation of the automated external defibrillator</p> <p>KB10. Steps in facilitating the use of nitro-glycerine for chest pain using a substitute candy tablet and breath spray</p> <p>KB11. Assessment and documentation of patient response to nitro-glycerine</p> <p>KB12. Application and operation of the automated external defibrillator</p> <p>KB13. Function of all controls on an automated external defibrillator, and describe event documentation and battery defibrillator maintenance</p> <p>KB14. Assessment and documentation of patient response to the automated external defibrillator</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Record various images and equipment readings</p> <p>SA2. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA3. Complete the medical history, PCR and applicable transport form</p> <p>SA4. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Read about changes in legislations and organisational policies</p> <p>SA6. Keep abreast with the latest knowledge by reading internal communications and legal framework changes</p> <p>SA7. Read latest clinical regulations as shared by the medical officer</p> <p>SA8. Read the list of hospitals in the major accident or emergency prone locations.</p> <p>SA9. Read upgraded facilities available in existing hospitals</p> <p>SA10. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA11. Interact with the patient</p> <p>SA12. Give clear instructions to the patient</p> <p>SA13. Shout assertively in case the patient does not respond</p> <p>SA14. Collect all necessary information regarding the patient's condition, address</p> |

HSS/ N 2306: Manage cardiovascular emergency

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| | <p>SA15. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA16. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA17. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: |
| | <p>SB1. Make decisions pertaining to refusal of treatment</p> <p>SB2. Act decisively by balancing protocols and emergency at hand</p> <p>SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | <p>SB4. How to plan and organise activities that are assigned to him/her</p> <p>SB5. How to quickly think and refer to information about the hospitals in vicinity</p> |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB7. Maintain patient confidentiality</p> <p>SB8. Respect the rights of the patient(s)</p> |
| | Problem Solving |
| | The user/individual on the job needs to: |
| <p>SB9. Use experience and training to respond to the diverse needs of patients</p> | |
| Analytical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| <p>SB10. Diagnose or identify possible condition the patient is suffering from</p> | |
| Critical Thinking | |
| The user/individual on the job should: | |
| <p>SB11. Be able to monitor and review the on-going effectiveness of planned activity and modify it accordingly</p> | |

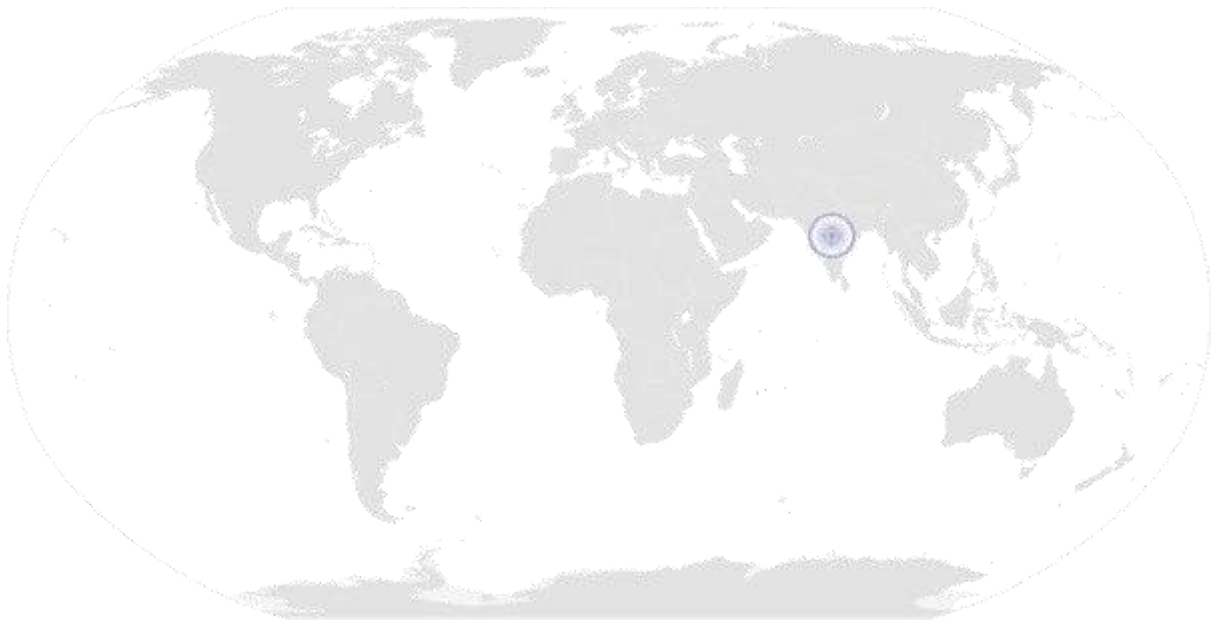
HSS/ N 2306: Manage cardiovascular emergency

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 230 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2307: Manage cerebrovascular emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to recognise and treat emergencies related to strokes or the cerebrovascular system.

HSS/ N 2307: Manage cerebrovascular emergency

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| National Occupational Standard | Unit Code | HSS/ N 2307 |
| | Unit Title (Task) | Manage Cerebrovascular Emergency |
| | Description | This OS unit is about the recognition and treatment of emergencies related to the cerebrovascular system or strokes. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients having a stroke. |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying the symptoms of a stroke , Managing patients having a stroke , Following the prescribed procedures and steps involved in a cerebrovascular, emergency situation |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: |
| | | PC1. Describe the basic types, causes, and symptoms of stroke |
| | | PC2. Provide emergency medical care to a patient experiencing symptoms of a stroke |
| | | PC3. Manage airway, breathing, and circulation |
| | PC4. Assess the patient’s level of consciousness and document any signs of stroke | |
| | PC5. Assess vital signs: Blood pressure, heart rate, and respiratory rate | |
| | PC6. Perform a standardised pre-hospital stroke scale assessment such as the Cincinnati pre-hospital stroke scale | |
| | PC7. Check serum blood sugar | |
| | PC8. Collect critical background information on the victim and the onset of the stroke symptoms such as the medical history (especially any past strokes), the estimate of the time since any potential stroke symptoms first appeared, current medical conditions of the patient and current medications | |
| | PC9. Determine the time of onset of symptoms | |
| | PC10. Explain how patients, family, or bystanders should respond to a potential stroke | |
| | PC11. Discuss the actions recommended for emergency responders to potential stroke victims | |
| | PC12. Explain the importance of transporting stroke patients immediately to an emergency department that has the personnel and equipment to provide comprehensive acute stroke treatment | |
| | PC13. Carry out first triage of potential stroke victims | |
| | PC14. Expedite transport of the patient to the nearest hospital equipped to handle strokes | |
| | PC15. Explain the importance of immediately notifying the Emergency Department | |

HSS/ N 2307: Manage cerebrovascular emergency

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| | <p>of the hospital of the arrival of a potential stroke victim</p> <p>PC16. Administer an IV line and oxygen and monitor the functioning of the heart on-route to the hospital</p> <p>PC17. Forward a written report to the emergency department with details on medical history and onset of the stroke symptoms</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by hospital</p> <p>KA2. The services offered by different healthcare providers</p> <p>KA3. The health care institutions with availability of stroke treatment</p> <p>KA4. The treatment the EMT can provide to a stroke victim according to prevailing regulation and hospital policies</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Role in the emergency cerebrovascular care system</p> <p>KB2. The basic types, causes and symptoms of stroke</p> <p>KB3. How to provide emergency medical care to a patient experiencing symptoms of a stroke</p> <p>KB4. How to manage airway, breathing, and circulation</p> <p>KB5. How to assess the patient’s level of consciousness and document any signs of stroke</p> <p>KB6. How to assess vital signs: Blood pressure, heart rate, and respiratory rate</p> <p>KB7. How to perform a standardised pre-hospital stroke scale assessment</p> <p>KB8. How to check serum blood sugar</p> <p>KB9. The critical information that must be collected such as the medical history (especially any past strokes), the estimate of the time since any potential stroke symptoms first appeared, current medical conditions of the patient and current medications</p> <p>KB10. How to collect critical background information on the victim and the onset of the stroke symptoms</p> <p>KB11. How to determine the time of onset of symptoms</p> <p>KB12. Inclusive and exclusive criteria for fibrinolytic therapy in acute stroke</p> <p>KB13. Steps that may be taken by patients, family, or bystanders to respond to a potential stroke</p> <p>KB14. The actions recommended for emergency responders to potential stroke victims</p> <p>KB15. The importance of transporting stroke patients immediately to an emergency department that has the personnel and equipment to provide comprehensive acute stroke treatment</p> <p>KB16. How to carry out first triage of potential stroke victims</p> <p>KB17. The importance of immediately notifying the Emergency Department of the hospital of the arrival of a potential stroke victim</p> <p>KB18. How to administer an IV line and oxygen and monitor the functioning of the</p> |

HSS/ N 2307: Manage cerebrovascular emergency

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| | heart on-route to the hospital KB19. How to forward a written report to the emergency department with details on medical history and onset of the stroke symptoms |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | The user/ individual on the job needs to know and understand how to: SA1. Forward a written report to the emergency department with details on medical history and onset of the stroke symptoms SA2. Record various images and equipment readings SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete the medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital |
| | Reading Skills |
| | The user/individual on the job needs to know and understand how to: SA6. Read about changes in legislations and organisational policies SA7. Keep abreast with the latest knowledge by reading internal communications and legal framework changes SA8. Read latest clinical regulations as shared by the medical officer SA9. Read the list of hospitals in the major accident or emergency prone locations. SA10. Read upgraded facilities available in existing hospitals SA11. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: SA12. Interact with the patient SA13. Give clear instructions to the patient SA14. Shout assertively in case the patient does not respond SA15. Collect all necessary information regarding the patient’s condition, address SA16. Avoid using jargon, slang or acronyms when communicating with a patient SA17. Communicate with other people around the patient and give them clear instructions around their safety SA18. Communicate clearly with other emergency response agencies if required |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to refusal of treatment |

HSS/ N 2307: Manage cerebrovascular emergency

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| | SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are involved |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to: SB9. Use experience and training to respond to the diverse needs of patients |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB10. Diagnose or identify possible strokes |
| | Critical Thinking |
| | The user/individual on the job should: SB11. Be able to monitor and review the on-going effectiveness of planned activity and modify it accordingly |

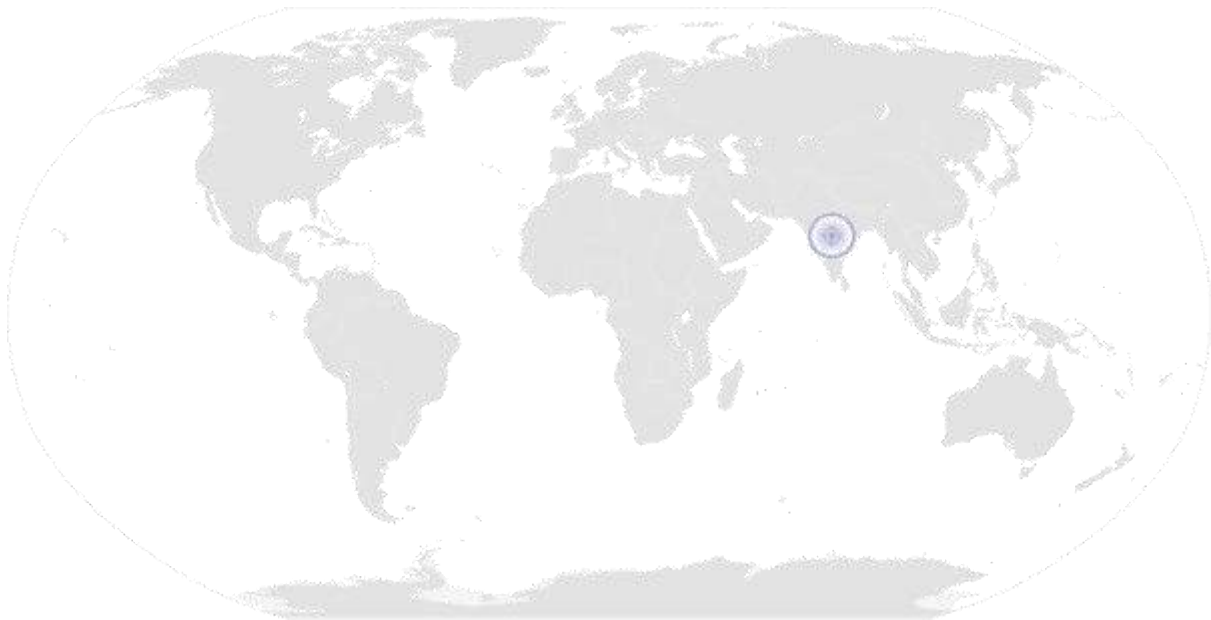
HSS/ N 2307: Manage cerebrovascular emergency

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2307 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2308: Manage allergic reaction

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for recognition and treatment of emergencies related to Allergies.

HSS/ N 2308: Manage allergic reaction

National Occupational Standard

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| Unit Code | HSS/ N 2308 |
| Unit Title (Task) | Manage Allergic Reaction |
| Description | This OS unit is about the recognition and treatment of emergencies related to Allergies. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients suffering from an allergic reaction. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying allergic reactions, Managing patients with allergic reactions , Following the prescribed procedures and steps involved in treating or managing an allergic reaction |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the patient experiencing an allergic reaction</p> <p>PC2. Perform the emergency medical care of the patient with an allergic reaction</p> <p>PC3. Establish the relationship between the patient with an allergic reaction and airway management</p> <p>PC4. Recognise the mechanisms of allergic response and the implications for airway management</p> <p>PC5. State the generic and trade names, medication forms, dose, administration, action, and contraindications for the epinephrine auto-injector</p> <p>PC6. Administer treatment appropriately in case of not having access to epinephrine auto-injectors</p> <p>PC7. Evaluate the need for medical emergency medical care for the patient with an allergic reaction</p> <p>PC8. Differentiate between the general category of those patients having an allergic reaction and those patients having a severe allergic reaction, requiring immediate medical care including immediate use of epinephrine auto-injector</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by hospital for managing the allergic reactions</p> <p>KA2. How to perform the different procedures needed for managing allergic reactions</p> <p>KA3. The significance of each procedure in patient management</p> <p>KA4. How to engage with the medical officer for support in case the situation is beyond one’s competence</p> |

HSS/ N 2308: Manage allergic reaction

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| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to provide emergency medical care of the patient experiencing an allergic reaction</p> <p>KB2. The common reasons for allergic reaction (medicines, known cases of asthma, some food items etc.)</p> <p>KB3. How to use epinephrine auto-injector</p> <p>KB4. How to administer treatment appropriately in case of not having access to epinephrine auto-injectors</p> <p>KB5. How to assess and document patient response to an epinephrine injection</p> <p>KB6. Proper disposal of equipment</p> <p>KB7. How to complete a Pre-Hospital Care report for patients with allergic emergencies</p> |
| <p>Skills (S)</p> | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA2. Complete medical history, PCR and applicable transport form</p> <p>SA3. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA4. Read about changes in legislations and organisational policies</p> <p>SA5. Keep abreast with the latest knowledge by reading internal communications and legal framework changes</p> <p>SA6. Read latest clinical regulations shared by the medical officer</p> <p>SA7. Read the list of hospitals in the major accident or emergency prone locations.</p> <p>SA8. Read upgraded facilities available in existing hospitals</p> <p>SA9. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA10. Interact with the patient</p> <p>SA11. Give clear instructions to the patient</p> <p>SA12. Shout assertively in case the patient does not respond</p> <p>SA13. Collect all necessary information regarding the patient’s condition, address</p> <p>SA14. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA15. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA16. Communicate clearly with other emergency response agencies if required</p> |

HSS/ N 2308: Manage allergic reaction

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| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are involved |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: SB9. Identify immediate or temporary solutions to relieve the patient |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB10. Correlate the past allergic reactions if any with the present condition |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. | |

HSS/ N 2308: Manage allergic reaction

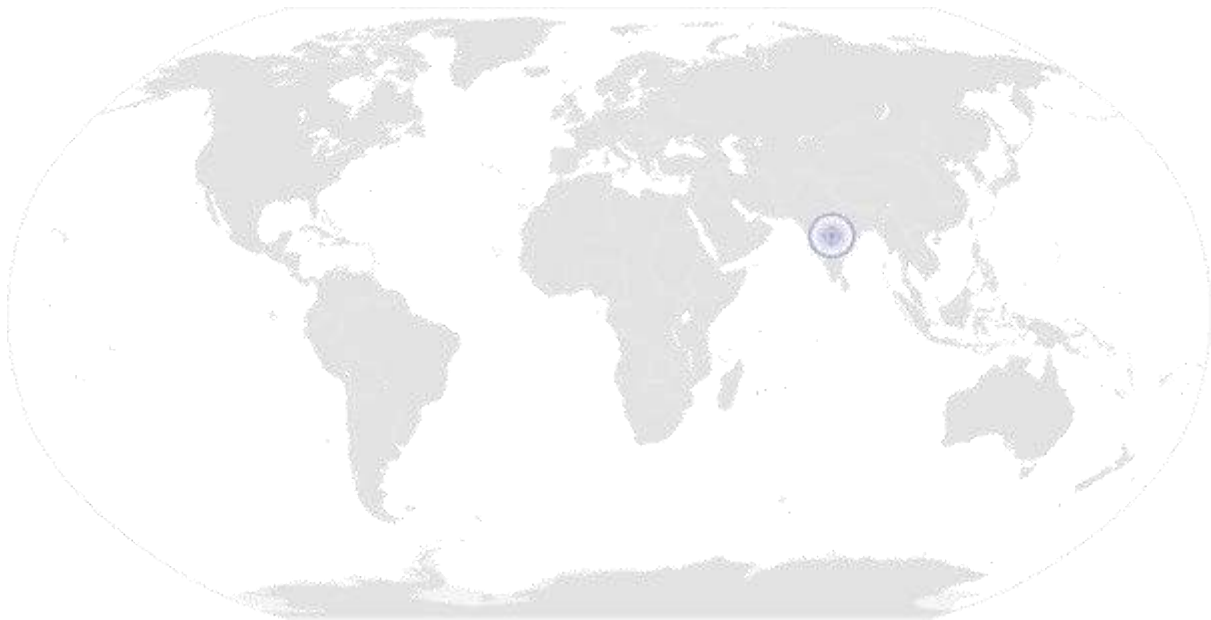
NOS Version Control

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| NOS Code | HSS/ N 230 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |



HSS/ N 2309: Manage poisoning or overdose

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for the recognition and treatment of emergencies related to Poisoning or Overdose.

HSS/ N 2309: Manage poisoning or overdose

National Occupational Standard

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| Unit Code | HSS/ N 2309 |
| Unit Title (Task) | Manage Poisoning or Overdose |
| Description | This OS unit is about the recognition and treatment of emergencies related to Poisoning or Overdose. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients suffering from poisoning or overdose. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying Poisoning or Overdose emergencies, Managing patients with Poisoning or Overdose , Following the prescribed procedures and steps involved in Poisoning or Overdose situation. |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise various ways that poisons enter the body</p> <p>PC2. Recognise signs/symptoms associated with various poisoning</p> <p>PC3. Perform the emergency medical care for the patient with possible overdose</p> <p>PC4. Perform the steps in the emergency medical care for the patient with suspected poisoning</p> <p>PC5. Establish the relationship between the patient suffering from poisoning or overdose and airway management</p> <p>PC6. State the generic and trade names, indications, contraindications, medication form, dose, administration, actions, side effects and re-assessment strategies for activated charcoal</p> <p>PC7. Recognise the need for medical direction in caring for the patient with poisoning or overdose</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job should be able to:</p> <p>KA1. Collect relevant legislation, standards, policies, and procedure followed by hospital in case of poisoning</p> <p>KA2. Perform the different procedures to ensure patient is out of danger</p> <p>KA3. Know the significance of each procedure in patient management</p> <p>KA4. Engage with the medical officer for support in case the situation is beyond one's competence</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Various types of poisoning by ingestion, inhalation, injection and absorption</p> <p>KB2. Steps in the emergency medical care for the patient with possible overdose</p> |

HSS/ N 2309: Manage poisoning or overdose

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| | <p>KB3. How to administer activated charcoal KB4. Necessary steps required to provide a patient with activated charcoal KB5. Steps in the emergency medical care for the patient with suspected poisoning KB6. How to do an assessment and documentation of patient response KB7. Disposal process of the equipment for the administration of activated charcoal KB8. Knowledge of commonly used poison substances at the local level, various toxidromes and specific antidotes with focus on OP poisoning KB9. How to collect evidence for MLC</p> |
| Skills (S) | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> |
| | <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA6. Read about changes in legislations and organisational policies SA7. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA8. Read latest clinical regulations shared by the medical officer SA9. Read the list of hospitals in the major accident or emergency prone locations. SA10. Read upgraded facilities available in existing hospitals SA11. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA12. Interact with the patient SA13. Give clear instructions to the patient SA14. Shout assertively in case the patient does not respond SA15. Collect all necessary information regarding the patient’s condition, address SA16. Avoid using jargon, slang or acronyms when communicating with a patient SA17. Communicate with other people around the patient and give them clear instructions about their safety</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> <p>The user/individual on the job needs to know and understand how to:</p> |

HSS/ N 2309: Manage poisoning or overdose

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| | SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are involved |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: SB8. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s) SB9. Identify immediate or temporary solutions to resolve delays |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB10. Carefully notice the symptoms and give the best possible treatment |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. |

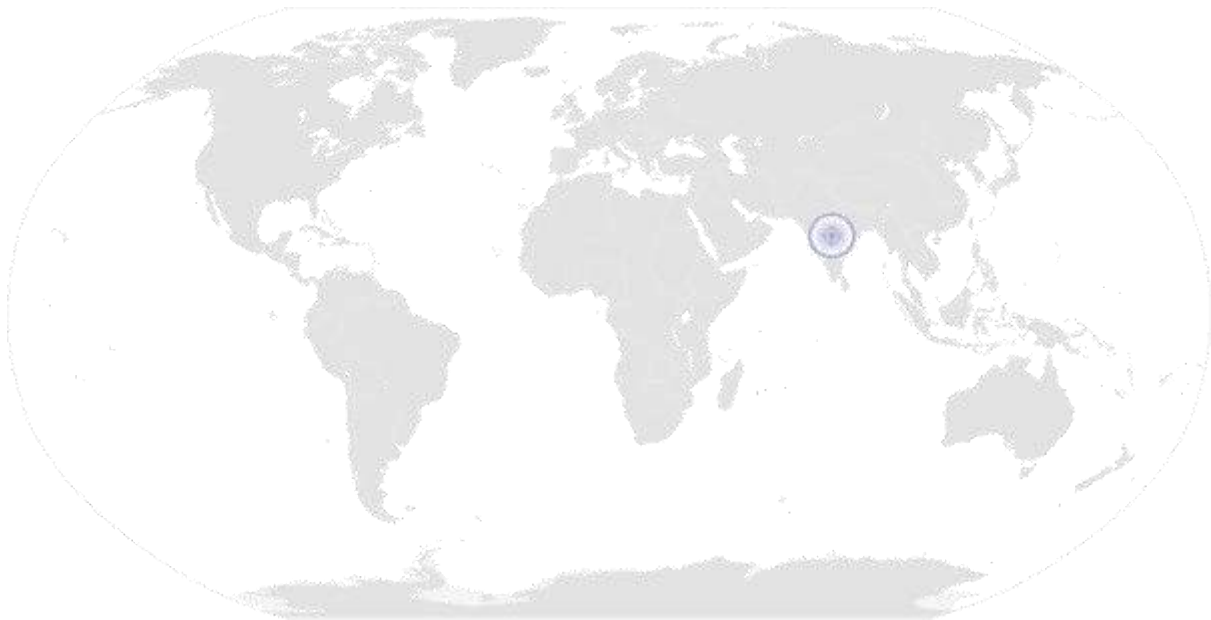
HSS/ N 2309: Manage poisoning or overdose

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2309 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2310: Manage environmental emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for recognition and treatment of emergencies related to the external environment

HSS/ N 2310: Manage environmental emergency

National Occupational Standard

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| Unit Code | HSS/ N 2310 |
| Unit Title (Task) | Manage Environmental Emergency |
| Description | This OS unit is about the recognition and treatment of emergencies related to the external environment. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients exposed to extreme environmental conditions. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying Environmental emergencies , Managing patients with symptoms of exposure to extreme heat/cold , Following the prescribed procedures and steps involved in exposure to extreme environmental situations |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the various ways by which body loses heat PC2. List the signs and symptoms of exposure to cold PC3. Perform the steps in providing emergency medical care to a patient exposed to cold PC4. List the signs and symptoms of exposure to heat PC5. Perform the steps in providing emergency care to a patient exposed to heat PC6. Recognise the signs and symptoms of water-related emergencies PC7. Identify the complications of near-drowning PC8. Perform emergency medical care for bites and stings PC9. Explain various relevant National Disaster Management Agency (NDMA) guidelines</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Level of one’s competence, authority and knowledge in relation to the management of emergency situations KA2. Appropriate response for emergency situations within one’s scope of practice KA3. Relevant legislation, standards, policies, and procedures followed by the hospital KA4. How to engage with provider for support in order to deliver and assist providers. KA5. How to perform the different procedures to manage environmental emergency KA6. What is the significance of each procedure in patient management KA7. Employee safety policy KA8. National Disaster Management Agency (NDMA) guidelines</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> |

HSS/ N 2310: Manage environmental emergency

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| | <p>KB1. Injuries caused by exposure to extreme heat/cold or due to drowning KB2. How to complete a Pre-Hospital Care report for patients with environmental emergencies KB3. How to remove a patient with a suspected spine injury from the water KB4. How to continue prolonged CPR in case of drowning victims KB5. How to treat high altitude sickness. KB6. How to apply rewarming techniques including active and passive rewarming KB7. Relevant National Disaster Management Agency (NDMA) guidelines</p> |
| Skills (S) | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA9. Read latest clinical regulations shared by the medical officer SA10. Read the list of hospitals in the major accident or emergency prone locations. SA11. Read about upgraded facilities available in existing hospitals SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient SA14. Give clear instructions to the patient SA15. Shout assertively in case the patient does not respond SA16. Collect all necessary information regarding the patient’s condition, address SA17. Avoid using jargon, slang or acronyms when communicating with a patient SA18. Communicate with other people around the patient and give them clear instructions around their safety SA19. Communicate clearly with other emergency response agencies if required</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> |

HSS/ N 2310: Manage environmental emergency

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| | The user/individual on the job needs to know and understand how to: |
| | SB1. Make decisions pertaining to the concerned area of work in relation to job role |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | SB2. How to plan and organise activities that are assigned to him/her |
| | SB3. How to control any aggression by the patient or the patient relatives |
| | SB4. How to ensure there is minimum gap in the arrival time of the medical team and allocation of the patient to a respective triage level |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team |
| | SB6. Maintain patient confidentiality |
| SB7. Respect the rights of the patient(s) | |
| Problem Solving | |
| The user/individual on the job needs to know and understand how to: | |
| SB8. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s) | |
| SB9. Identify immediate or temporary solutions to resolve delays | |
| Analytical Thinking | |
| The user/individual on the job needs to: | |
| SB10. Analyse the situation and carry out the required procedures | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. | |

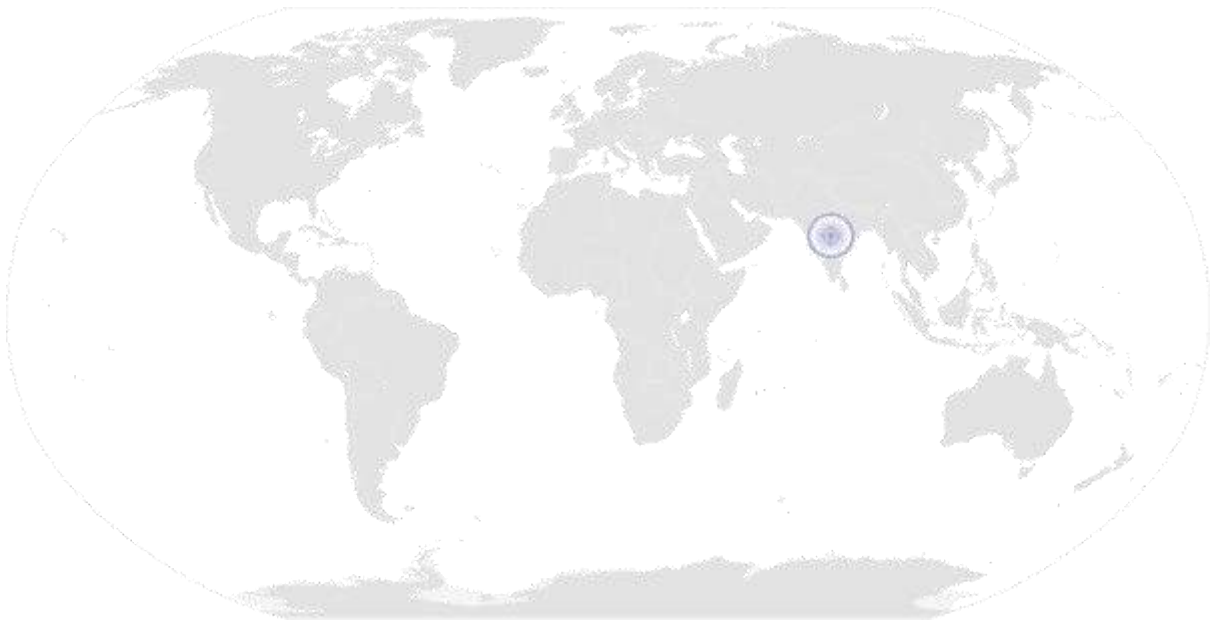
HSS/ N 2310: Manage environmental emergency

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2310 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2311: Manage behavioural emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for recognition and treatment of emergencies related to behavioural or psychological conditions.

HSS/ N 2311: Manage behavioural emergency

National Occupational Standard

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| Unit Code | HSS/ N 2311 |
| Unit Title (Task) | Manage Behavioural Emergency |
| Description | This OS unit is about the recognition and treatment of emergencies related to behavioural or psychological conditions. It also shares permissible and appropriate emergency medical service procedures that may be rendered by EMT for patients demonstrating such behaviour. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying behavioural emergencies , Managing patients with symptoms of psychological crisis , Following the prescribed procedures and steps involved in behavioural situations |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the general factors that may cause an alteration in a patient's behaviour</p> <p>PC2. Recognise the various reasons for psychological crises</p> <p>PC3. Identify the characteristics of an individual's behaviour which suggest that the patient is at risk for suicide</p> <p>PC4. Identify special medical/legal considerations for managing behavioural emergencies</p> <p>PC5. Recognise the special considerations for assessing a patient with behavioural problems</p> <p>PC6. Identify the general principles of an individual's behaviour, which suggest the risk for violence</p> <p>PC7. Identify methods to calm behavioural emergency patients</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by the hospital</p> <p>KA2. How to engage with provider for support in order to deliver and assist providers.</p> <p>KA3. How to perform the different procedures to handle common psychological emergencies</p> <p>KA4. The significance of each procedure to manage behavioural emergency</p> <p>KA5. How to use different equipment to perform procedures to handle the emergency</p> <p>KA6. Employee safety policy</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to assure his/her own safety in such situations</p> <p>KB2. Legal ramifications of his/her actions</p> <p>KB3. How to transport the patient in a safe and effective manner</p> |

HSS/ N 2311: Manage behavioural emergency

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| | <p>KB4. How to modify his/her behaviour towards the patient with a behavioural emergency</p> <p>KB5. How to provide emergency medical care to the patient experiencing a behavioural emergency</p> <p>KB6. Various techniques to safely restrain a patient with a behavioural problem</p> <p>KB7. Methods of physical restraint</p> <p>KB8. How to check RBS for all alternated levels of consciousness and behaviour emergency cases</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA2. Complete medical history, PCR and applicable transport form</p> <p>SA3. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA4. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Read about changes in legislations and organisational policies</p> <p>SA6. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA7. Read latest clinical regulations as shared by the medical officer</p> <p>SA8. Read the list of hospitals in the major accident or emergency prone locations.</p> <p>SA9. Read about upgraded facilities available in existing hospitals</p> <p>SA10. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA11. Interact with the patient</p> <p>SA12. Give clear instructions to the patient</p> <p>SA13. Shout assertively in case the patient does not respond</p> <p>SA14. Collect all necessary information regarding the patient's condition, address</p> <p>SA15. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA16. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA17. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> |

HSS/ N 2311: Manage behavioural emergency

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| | <p>SB1. Act decisively by balancing protocols and emergency at hand</p> <p>SB2. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | <p>Plan and Organise</p> <p>The user/individual on the job needs to know and understand:</p> <p>SB3. How to plan and organise activities that are assigned to him/her</p> <p>SB4. How to quickly think and refer to information about the hospitals in vicinity</p> |
| | <p>Patient Centricity</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB6. Maintain patient confidentiality</p> <p>SB7. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB8. Understand the behavioural change and take a rational step</p> |
| | <p>Analytical Thinking</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB9. Analyse the psychological crisis and suggest the solutions</p> |
| | <p>Critical Thinking</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently.</p> |

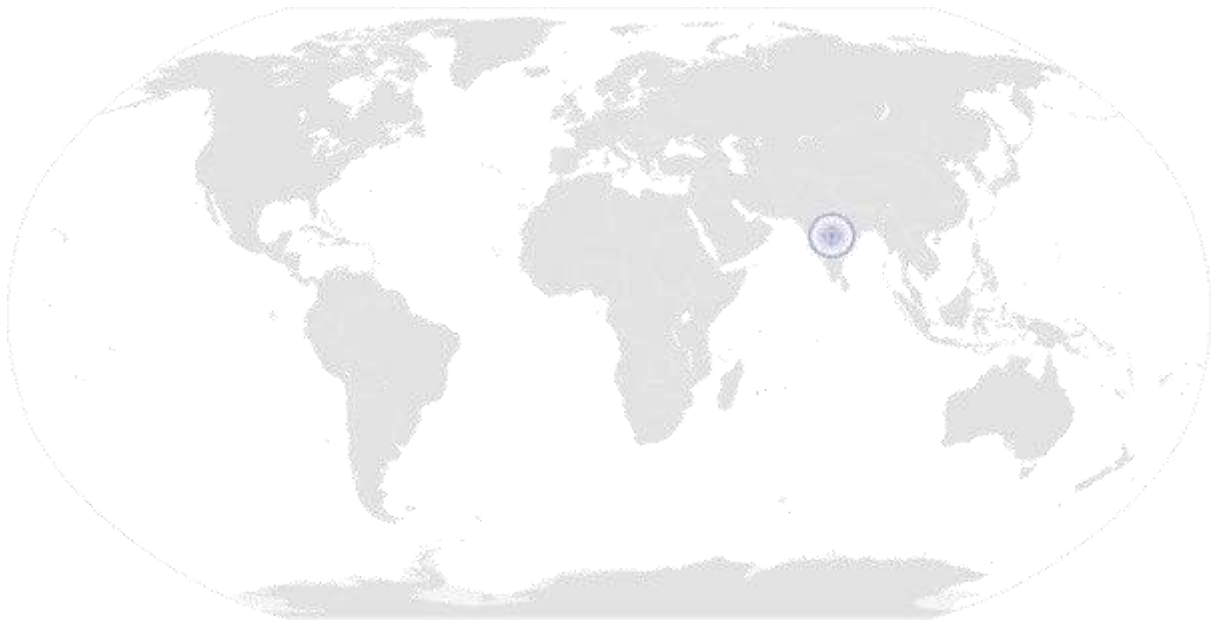
HSS/ N 2311: Manage behavioural emergency

NOS Version Control

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| NOS Code | HSS/ N 2311 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2312: Manage obstetric/ gynaecological emergencies

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for care of patients with pre-hospital conditions involving obstetric/ gynaecological emergencies.

HSS/ N 2312: Manage obstetric/ gynaecological emergencies

National Occupational Standard

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| Unit Code | HSS/ N 2312 |
| Unit Title (Task) | Manage Obstetrics/Gynaecology emergencies |
| Description | This OS unit is about managing patients with pre-hospital conditions involving obstetric/ gynaecological emergencies. These conditions require discreet, professional, safe and effective care by the EMT. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Providing emergency care during childbirth , Providing care for conditions involving obstetric/ gynaecological emergencies |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Identify the following structures: Uterus, vagina, foetus, placenta, umbilical cord, amniotic sac, and perineum</p> <p>PC2. Identify and explain the use of the contents of an obstetrics kit</p> <p>PC3. Identify pre-delivery emergencies</p> <p>PC4. State indications of an imminent delivery</p> <p>PC5. Differentiate the emergency medical care provided to a patient with pre-delivery emergencies from a normal delivery</p> <p>PC6. Perform the steps in pre-delivery preparation of the mother</p> <p>PC7. Establish the relationship between body substance isolation and childbirth</p> <p>PC8. Perform the steps to assist in the delivery</p> <p>PC9. State the steps required for care of the baby as the head appears</p> <p>PC10. Explain how and when to cut the umbilical cord</p> <p>PC11. Perform the steps in the delivery of the placenta</p> <p>PC12. Perform the steps in the emergency medical care of the mother post-delivery</p> <p>PC13. Summarise neonatal resuscitation procedures</p> <p>PC14. Identify the procedures for the following abnormal deliveries: Breech birth, multiple births, prolapsed cord, limb presentation</p> <p>PC15. Differentiate the special considerations for multiple births</p> <p>PC16. Recognise special considerations of meconium</p> <p>PC17. Identify special considerations of a premature baby</p> <p>PC18. Perform the emergency medical care of a patient with a gynaecological emergency</p> <p>PC19. Perform steps required for emergency medical care of a mother with excessive bleeding</p> <p>PC20. Complete a Pre-Hospital Care report for patients with obstetrical/gynaecological emergencies</p> |

HSS/ N 2312: Manage obstetric/ gynaecological emergencies

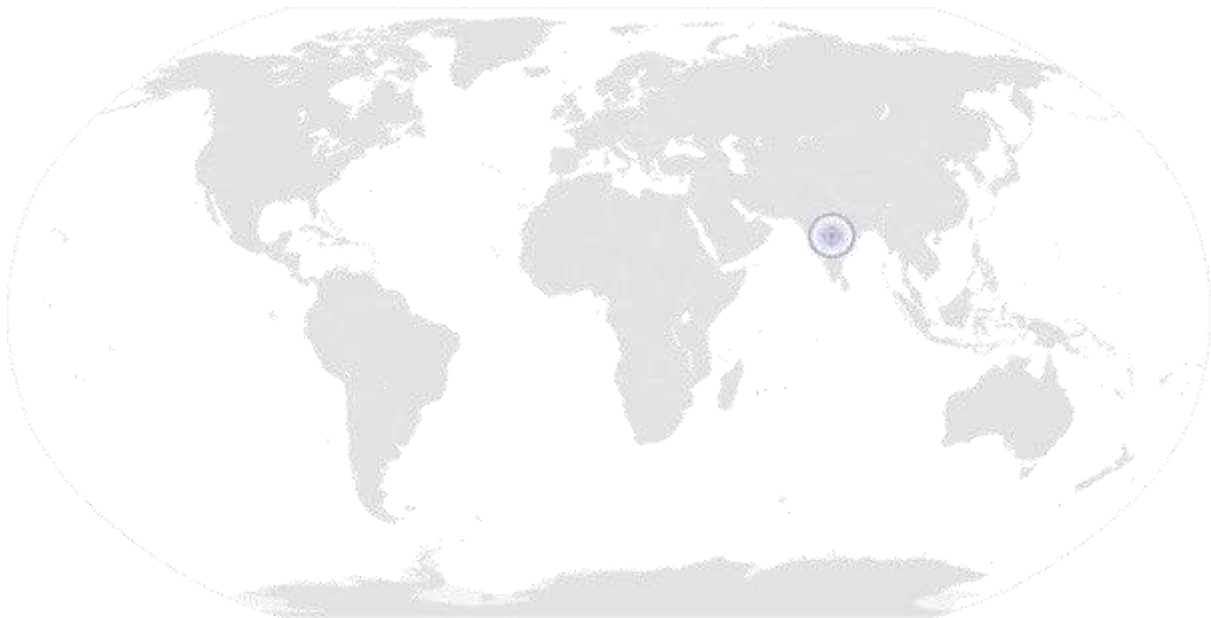
| Knowledge and Understanding (K) | |
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| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: KA1. Relevant legislation, standards, policies, and procedure followed by the hospital KA2. How to perform the different procedures related to Obstetrics/ Gynaecology emergencies KA3. The significance of each procedure required to handle Obstetrics/ Gynaecology emergency KA4. How to use the equipment meant to perform each procedure |
| B. Technical Knowledge | The user/individual on the job needs to know and understand: KB1. The implications of treating two patients (mother and baby) KB2. Steps to assist in normal cephalic delivery KB3. Infant neonatal procedures KB4. Neonatal resuscitation procedures KB5. How and when to cut the umbilical cord KB6. Post-delivery care of the mother KB7. Procedures for the following abnormal deliveries: Breech birth, prolapsed cord, limb presentation KB8. Procedures and special considerations for multiple births KB9. Special considerations for meconium KB10. Steps required for care of a mother with excessive bleeding or other gynaecological issues KB11. The use of oxytocin, methergin and mesoprostol |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | The user/ individual on the job needs to know and understand how to: SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital SA6. Produce information which may include technical material that is appropriate for the intended audience |
| | Reading Skills |
| | The user/individual on the job needs to know and understand how to: SA7. Read about changes in legislations and organisational policies SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA9. Read latest clinical regulations as shared by the medical officer SA10. Read about upgraded facilities available in existing hospitals |

HSS/ N 2312: Manage obstetric/ gynaecological emergencies

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| | SA11. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: |
| | SA12. Interact with the patient SA13. Give clear instructions to the patient SA14. Shout assertively in case the patient does not respond SA15. Collect all necessary information regarding the patient's condition, address SA16. Avoid using jargon, slang or acronyms when communicating with a patient SA17. Communicate with other people around the patient and give them clear instructions around their safety SA18. Communicate clearly with other emergency response agencies if required |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: |
| | SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | SB3. How to plan and organise activities that are assigned to him/her SB4. How to quickly think and refer to information about the hospitals in vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to: |
| | SB8. Use their experience, creativity and assessment skills to narrow down the problem with the patient |
| | Analytical Thinking |
| | SB9. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: |

HSS/ N 2312: Manage obstetric/ gynaecological emergencies

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| | SB10. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |
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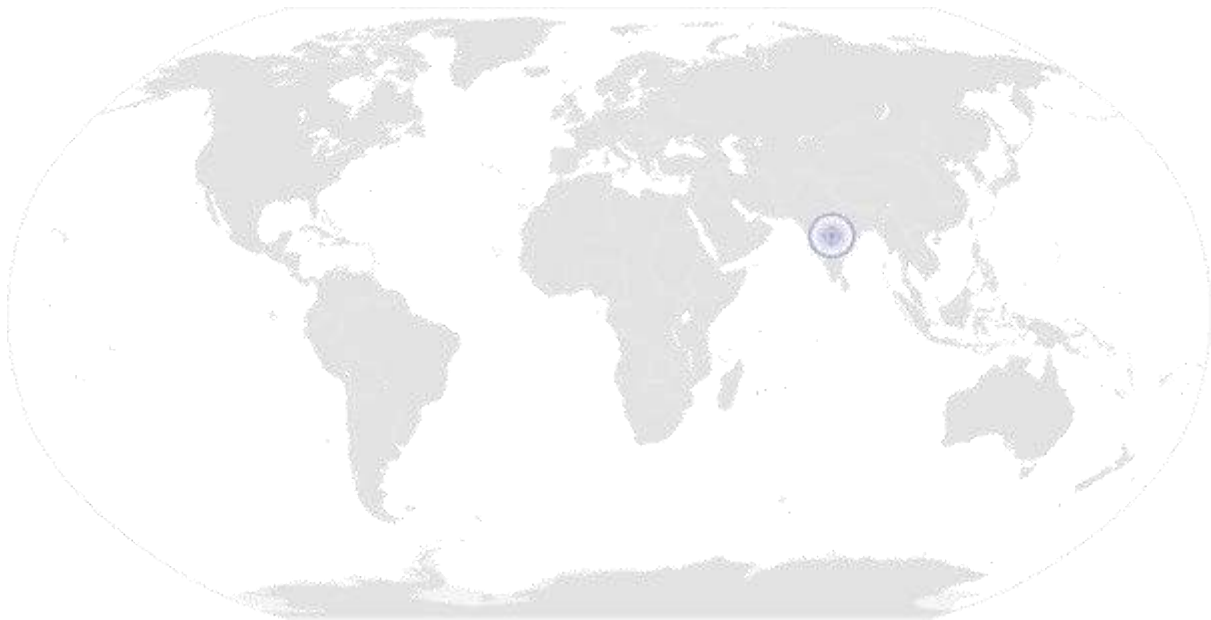
HSS/ N 2312: Manage obstetric/ gynaecological emergencies

NOS Version Control

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| NOS Code | HSS/ N 2312 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2313: Manage bleeding and shock

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to deal with bleeding and shock (hypo perfusion) as identified during the initial patient assessment after securing the scene and ensuring personal safety.

HSS/ N 2313: Manage bleeding and shock

National Occupational Standard

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| Unit Code | HSS/ N 2313 |
| Unit Title (Task) | Manage Bleeding and Shock |
| Description | This OS unit is about managing bleeding and shock (hypo perfusion) after the initial patient assessment. Control of arterial or venous bleeding is done upon immediate identification, after airway and breathing. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Rendering basic medical care to a patient with bleeding injuries, Arresting the bleeding |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | To be competent, the user/individual on the job must be able to: <ul style="list-style-type: none"> PC1. Recognise the structure and function of the circulatory system PC2. Differentiate between arterial, venous and capillary bleeding PC3. State methods of emergency medical care of external bleeding PC4. Establish the relationship between body substance isolation and bleeding PC5. Establish the relationship between airway management and the trauma patient PC6. Establish the relationship between mechanism of injury and internal bleeding PC7. Recognise the signs of internal bleeding PC8. Perform the steps in the emergency medical care of the patient with signs and symptoms of internal bleeding PC9. Recognise the signs and symptoms of shock (hypo perfusion) PC10. Perform the steps in the emergency medical care of the patient with signs and symptoms of shock (hypo perfusion) PC11. Recognize different types of shock and initiate appropriate medical management |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: <ul style="list-style-type: none"> KA1. Relevant legislation, standards, policies, and procedure followed by hospital. KA2. Clinical protocols used by the provider to control bleeding and shock KA3. Procedures and guidelines of the hospital in case of hazards at the site or in case of accidents |
| B. Technical Knowledge | The user/individual on the job needs to know and understand: |

HSS/ N 2313: Manage bleeding and shock

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| | <p>KB1. How to perform the different procedures to manage bleeding and shock</p> <p>KB2. The significance of each procedure to manage bleeding and shock in patient management</p> <p>KB3. How to use the equipment meant to perform each procedure</p> <p>KB4. Engage with the medical officer for support in case the situation is beyond one's competence</p> <p>KB5. Methods of controlling external bleeding with emphasis on body substance isolation</p> <p>KB6. Methods used to treat internal bleeding</p> <p>KB7. Methods used to treat the patient in shock (hypo perfusion)</p> <p>KB8. Sense of urgency to transport patients that are bleeding and show signs of shock (hypo perfusion)</p> <p>KB9. How to use diffuse pressure as a method of emergency medical care of external bleeding</p> <p>KB10. Use of pressure points and tourniquets as a method of emergency medical care of external bleeding</p> <p>KB11. Signs and symptoms of internal bleeding.</p> <p>KB12. Signs and symptoms of shock (hypo perfusion)</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers</p> <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies</p> <p>SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA9. Read latest clinical regulations shared by the medical officer</p> <p>SA10. Read the list of hospitals in the major accident or emergency prone locations.</p> <p>SA11. Read about upgraded facilities available in existing hospitals</p> <p>SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |

HSS/ N 2313: Manage bleeding and shock

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| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient SA14. Give clear instructions to the patient SA15. Shout assertively in case the patient does not respond SA16. Collect all necessary information regarding the patient's condition, address SA17. Avoid using jargon, slang or acronyms when communicating with a patient SA18. Communicate with other people around the patient and give them clear instructions around their safety SA19. Communicate clearly with other emergency response agencies if required</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | <p>Plan and Organise</p> |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in the vicinity</p> |
| | <p>Patient Centricity</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB9. Identify immediate or temporary solutions to resolve delays</p> |
| | <p>Analytical Thinking</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB10. Analyse cuts and shock severity and carry the treatment procedures</p> |
| | <p>Critical Thinking</p> |
| <p>The user/individual on the job needs to know and understand how to:</p> <p>SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently.</p> | |

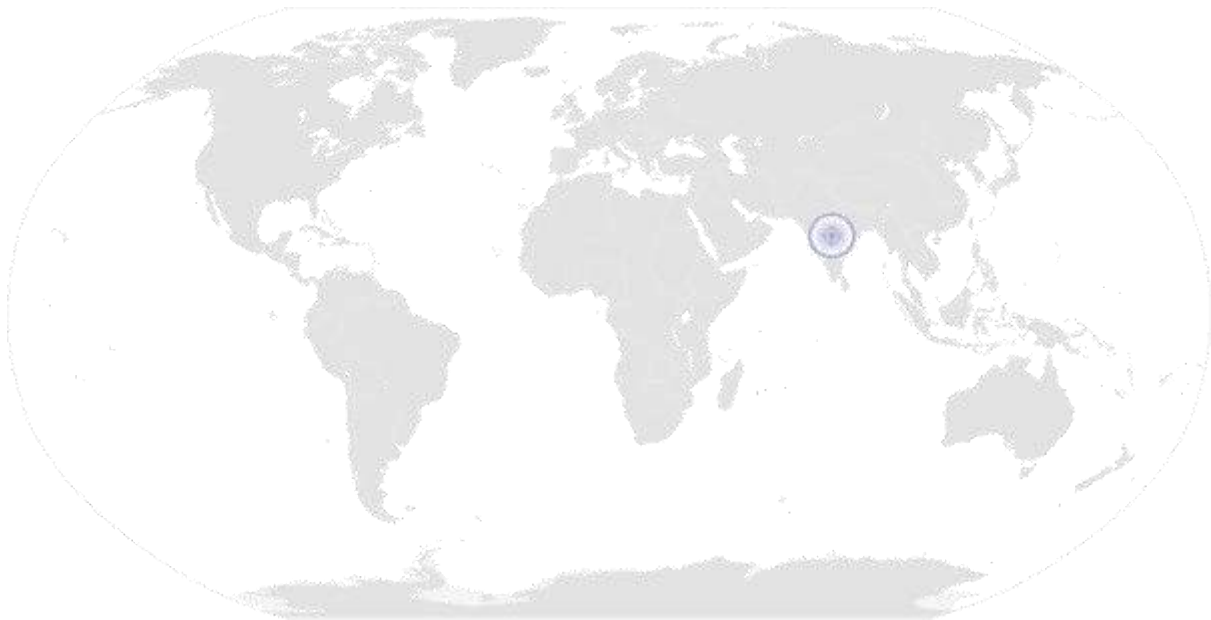
HSS/ N 2313: Manage bleeding and shock

NOS Version Control

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| NOS Code | HSS/ N 2313 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2314: Manage soft tissue injury and burns

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT to deal with soft tissue injuries and burns which are to be treated after the initial assessment, unless life threatening.

HSS/ N 2314: Manage soft tissue injury and burns

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| National Occupational Standard | Unit Code | HSS/ N 2314 |
| | Unit Title (Task) | Manage Soft Tissue Injury and Burns |
| | Description | This OS unit is about the recognition of soft tissue injuries. Unless life threatening, soft tissue injuries are to be treated after the initial assessment. The EMT will treat soft tissue injuries prior to the movement of the patient unless the patient condition warrants immediate transport. |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Rendering basic medical care to a patient with soft tissue injuries such as burns and proficiency in the technique of dressing and bandaging. |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <ul style="list-style-type: none"> PC1. Recognise the major functions of the skin PC2. Recognise the layers of the skin PC3. Establish the relationship between body substance isolation (BSI) and soft tissue injuries PC4. Recognise the types of closed soft tissue injuries PC5. Perform the emergency medical care of the patient with a closed soft tissue injury PC6. State the types of open soft tissue injuries PC7. Recognise the emergency medical care of the patient with an open soft tissue injury PC8. Recognise the emergency medical care considerations for a patient with a penetrating chest injury PC9. Perform the emergency medical care considerations for a patient with an open wound to the abdomen PC10. Differentiate the care of an open wound to the chest from an open wound to the abdomen PC11. Classify burns PC12. Recognise superficial burn PC13. Recognise the characteristics of a superficial burn PC14. Recognise partial thickness burn PC15. Recognise the characteristics of a partial thickness burn PC16. Recognise full thickness burn PC17. Recognise the characteristics of a full thickness burn PC18. Perform the emergency medical care of the patient with a superficial burn PC19. Perform the emergency medical care of the patient with a partial thickness burn PC20. Perform the emergency medical care of the patient with a full thickness burn PC21. Recognise the functions of dressing and bandaging |
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HSS/ N 2314: Manage soft tissue injury and burns

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| | <p>PC22. Describe the purpose of a bandage</p> <p>PC23. Perform the steps in applying a pressure dressing</p> <p>PC24. Establish the relationship between airway management and the patient with chest injury, burns, blunt and penetrating injuries</p> <p>PC25. Know the ramification of improperly applied dressings, splints and tourniquets</p> <p>PC26. Perform the emergency medical care of a patient with an impaled object</p> <p>PC27. Perform the emergency medical care of a patient with an amputation</p> <p>PC28. Perform the emergency care for a chemical burn</p> <p>PC29. Perform the emergency care for an electrical burn</p> <p>PC30. Recognise inhalation injury and perform emergency care</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by hospital</p> <p>KA2. How to engage with the medical officer for support in case the situation is beyond one's competence</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Various layers of the skin</p> <p>KB2. Various types of soft tissue injuries</p> <p>KB3. How to perform the different procedures to manage soft tissue injuries and burns</p> <p>KB4. The significance of each procedure to effectively handle soft tissue injury and burns</p> <p>KB5. How to use the equipment meant to perform the procedures</p> <p>KB6. Procedure for treating a closed soft tissue injury</p> <p>KB7. Procedure for treating an open soft tissue injury</p> <p>KB8. Necessary body substance isolation that must be taken when dealing with soft tissue injuries</p> <p>KB9. Proper method for applying an occlusive dressing</p> <p>KB10. Proper method for stabilising an impaled object</p> <p>KB11. Proper method of treating an evisceration</p> <p>KB12. How to recognise superficial, partial thickness and full thickness burns</p> <p>KB13. Proper treatment for a superficial, partial thickness, and full thickness burn</p> <p>KB14. Various types of dressings and bandages</p> <p>KB15. Proper method for applying a universal dressing, 4 X 4 inch dressing, and adhesive type dressing</p> <p>KB16. Proper method for applying bandages: self-adherent, gauze rolls, triangular, adhesive tape, and air splints</p> <p>KB17. Proper method for applying a pressure dressing</p> |
| Skills (S) | |
| <p>A. Core Skills</p> | <p>Writing Skills</p> |

HSS/ N 2314: Manage soft tissue injury and burns

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| /Generic Skills | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA9. Read latest clinical regulations shared by the medical officer SA10. Read the list of hospitals in the major accident or emergency prone locations. SA11. Read about upgraded facilities available in existing hospitals SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient SA14. Give clear instructions to the patient SA15. Shout assertively in case the patient does not respond SA16. Collect all necessary information regarding the patient's condition, address SA17. Avoid using jargon, slang or acronyms when communicating with a patient SA18. Communicate with other people around the patient and give them clear instructions around their safety SA19. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | Plan and Organise |
| | <p>The user/individual on the job needs to know and understand:</p> |

HSS/ N 2314: Manage soft tissue injury and burns

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| | SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in the vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: SB9. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s) SB10. Identify immediate or temporary solutions to resolve delays |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB11. Analyse the injury and render the required medical care |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB12. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |

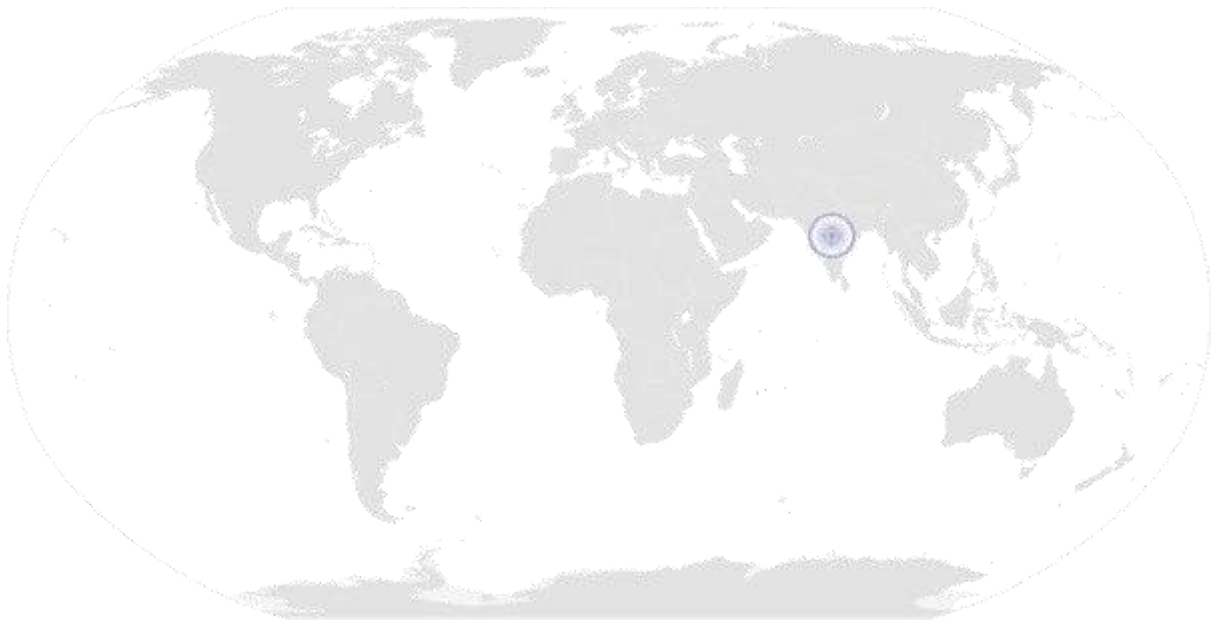
HSS/ N 2314: Manage soft tissue injury and burns

NOS Version Control

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| NOS Code | HSS/ N 2314 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2315: Manage musculoskeletal injuries

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for dealing with injuries to bones and joints requiring splinting prior to the movement of the patient unless life-threatening injuries are present

HSS/ N 2315: Manage musculoskeletal injuries

National Occupational Standard

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| Unit Code | HSS/ N 2315 |
| Unit Title (Task) | Manage Musculoskeletal injuries |
| Description | This OS unit is about the recognition of injuries to bones and joints requiring splinting prior to the movement of the patient unless life-threatening injuries are present. If life-threatening injuries are present, splinting should be done en route to the receiving facility when possible |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Rendering basic medical care to a patient with musculoskeletal injuries |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the function of the muscular system</p> <p>PC2. Recognise the function of the skeletal system</p> <p>PC3. Recognise the major bones or bone groupings of the spinal column; the thorax; the upper extremities; the lower extremities</p> <p>PC4. Differentiate between an open and a closed painful, swollen, deformed extremity</p> <p>PC5. Manage musculoskeletal injuries including thoracic and abdominal injuries</p> <p>PC6. State the reasons for splinting</p> <p>PC7. List the general rules of splinting</p> <p>PC8. Ramification & complications of splinting</p> <p>PC9. Perform the emergency medical care for a patient with a painful, swollen, deformed extremity</p> <p>PC10. How to apply pelvic binder techniques for fracture of pelvis</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedures followed by the hospital</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to perform the different procedures to manage musculoskeletal injuries</p> |

HSS/ N 2315: Manage musculoskeletal injuries

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| | <p>including thoracic and abdominal injuries</p> <p>KB2. The significance of each procedure in effectively manage the situation of musculoskeletal injuries</p> <p>KB3. How to use the equipment meant to perform the procedure</p> <p>KB4. Signs of open and closed type bone and joint injuries</p> <p>KB5. Assessment of an injured extremity</p> <p>KB6. Splinting procedures relevant to the general rules of splinting using: Rigid splints, traction splints, pneumatic splints, improvised splints, and pneumatic anti-shock garments</p> <p>KB7. Procedure for splinting an injury with distal cyanosis or lacking a distal pulse</p> <p>KB8. The use of analgesic injections for relief of pain</p> <p>KB9. How to manage bleeding complications associated with long bone fractures</p> <p>KB10. How to assess neuro-vascular status of limbs</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers</p> <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies</p> <p>SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA9. Read latest clinical regulations shared by the medical officer</p> <p>SA10. Read the list of hospitals in the major accident or emergency prone locations</p> <p>SA11. Read about upgraded facilities available in existing hospitals</p> <p>SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient</p> <p>SA14. Give clear instructions to the patient</p> <p>SA15. Shout assertively in case the patient does not respond</p> <p>SA16. Collect all necessary information regarding the patient's condition, address</p> |

HSS/ N 2315: Manage musculoskeletal injuries

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| | <p>SA17. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA18. Communicate with other people around the patient and give them clear instructions around their safety</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment</p> <p>SB2. Act decisively by balancing protocols and emergency at hand</p> <p>SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | Plan and Organise |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities that are assigned to him/her</p> <p>SB5. How to quickly think and refer to information about the hospitals in the vicinity</p> |
| | Patient Centricity |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB7. Maintain patient confidentiality</p> <p>SB8. Respect the rights of the patient(s)</p> |
| | Problem Solving |
| | <p>The user/individual on the job needs to:</p> <p>SB9. Take into account a number of factors to solve the problem, such as whether one or two paramedics are required and whether the patient can move at all on his or her own</p> |
| | Analytical Thinking |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB10. Analyse the impact of musculoskeletal injuries and provide the medical care</p> |
| Critical Thinking | |
| <p>The user/individual on the job needs to know and understand how to:</p> <p>SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently</p> | |

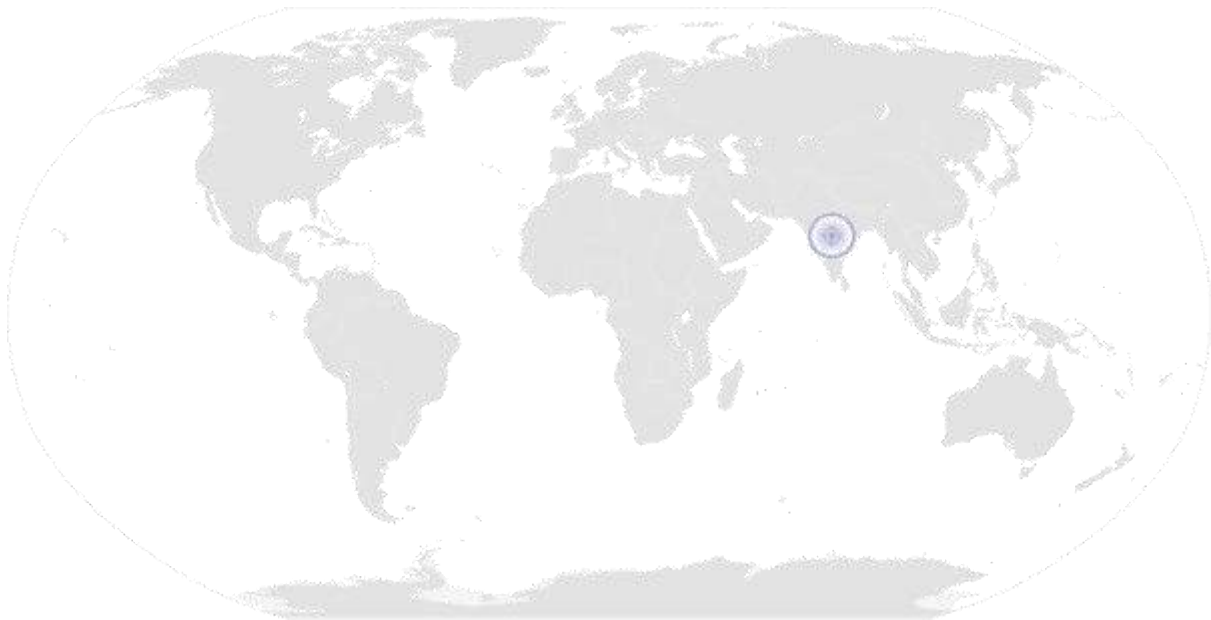
HSS/ N 2315: Manage musculoskeletal injuries

NOS Version Control

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| NOS Code | HSS/ N 2315 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2316: Manage injuries to head and spine

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for performing procedures involved in any type of traumatic incident in which the mechanism of injury and/or signs and symptoms indicate a possible spinal injury

HSS/ N 2316: Manage injuries to head and spine

National Occupational Standard

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| Unit Code | HSS/ N 2316 |
| Unit Title (Task) | Manage Injuries to head and spine |
| Description | This OS unit is about ensuring that for every patient who is involved in any type of traumatic incident, in which the mechanism of injury and/or signs and symptoms indicate a possible spinal injury, complete spinal immobilisation is carried out |
| Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Identifying signs and symptoms of head and spinal injuries , Recognising when a patient may need immobilisation and acting accordingly |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. State the components of the nervous system</p> <p>PC2. List the functions of the central nervous system</p> <p>PC3. Recognise the structure of the skeletal system as it relates to the nervous system</p> <p>PC4. Relate mechanism of injury to potential injuries of the head and spine</p> <p>PC5. Recognise the implications of not properly caring for potential spine injuries</p> <p>PC6. State the signs and symptoms of a potential spine injury</p> <p>PC7. Recognise the method of determining if a responsive patient may have a spine injury</p> <p>PC8. Relate the airway emergency medical care techniques to the patient with a suspected spine injury</p> <p>PC9. Identify how to stabilise the cervical spine</p> <p>PC10. Indications for sizing and using a cervical spine immobilisation device</p> <p>PC11. Establish the relationship between airway management and the patient with head and spine injuries</p> <p>PC12. Recognise a method for sizing a cervical spine immobilisation device</p> <p>PC13. Log roll a patient with a suspected spine injury</p> <p>PC14. Secure a patient to a long spine board</p> <p>PC15. List instances when a short spine board should be used</p> <p>PC16. Immobilise a patient using a short spine board</p> <p>PC17. Recognise the indications for the use of rapid extrication</p> <p>PC18. Understand the steps in performing rapid extrication</p> <p>PC19. Identify the circumstances when a helmet should be left on the patient</p> <p>PC20. Identify the circumstances when a helmet should be removed</p> <p>PC21. Identify alternative methods for removal of a helmet</p> <p>PC22. Stabilise patient's head to remove the helmet</p> <p>PC23. Differentiate how the head is stabilised with a helmet compared to without a helmet</p> |

HSS/ N 2316: Manage injuries to head and spine

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| | <p>PC24. Immobilise paediatric and geriatric victims PC25. Manage scalp bleeding PC26. Manage eye injury</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes))</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedure followed by hospital KA2. How to engage with the medical officer for support in case the situation is beyond one's competence</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to perform the different procedures to manage injuries head and spine KB2. The significance of each procedure in handling situation of head and spinal injuries KB3. How to use the equipment meant to perform the procedure KB4. Nervous system anatomy KB5. Structure of the skeletal system as it relates to the nervous system KB6. Related mechanism of injury to potential injuries of the head and spine KB7. Potential signs and symptoms of a potential spine injury KB8. Method of determining if a responsive patient may have a spine injury KB9. Airway emergency medical care techniques for the patient with a suspected spinal cord injury KB10. Methods for sizing various cervical spine immobilisation devices KB11. Rapid extrication techniques KB12. How to stabilise the cervical spine KB13. How to immobilise a patient using a short spine board KB14. How to log roll a patient with a suspected spine injury KB15. How to secure a patient to a long spine board KB16. Preferred methods to remove sports, motorcycle and various other helmets KB17. Alternative methods for removal of a helmet KB18. How the head is stabilised with a helmet compared to without a helmet KB19. How the patient's head is stabilised in order to remove a helmet KB20. Sudden airway emergency medical care with helmet on</p> |
| Skills (S) | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician</p> |

HSS/ N 2316: Manage injuries to head and spine

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| | <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | <p>Reading Skills</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies</p> <p>SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA9. Read latest clinical regulations shared by the medical officer</p> <p>SA10. Read the list of hospitals in the major accident or emergency prone locations</p> <p>SA11. Read about upgraded facilities available in existing hospitals</p> <p>SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient</p> <p>SA14. Give clear instructions to the patient</p> <p>SA15. Shout assertively in case the patient does not respond</p> <p>SA16. Collect all necessary information regarding the patient's condition, address</p> <p>SA17. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA18. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA19. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | <p>Decision Making</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment</p> <p>SB2. Act decisively by balancing protocols and emergency at hand</p> <p>SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | <p>Plan and Organise</p> |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities that are assigned to him/her</p> <p>SB5. How to quickly think and refer to information about the hospitals in the vicinity</p> |
| | <p>Patient Centricity</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> |

HSS/ N 2316: Manage injuries to head and spine

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| | <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB7. Maintain patient confidentiality</p> <p>SB8. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB9. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s)</p> <p>SB10. Identify immediate or temporary solutions to resolve delays</p> |
| | <p>Analytical Thinking</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB11. Cautiously analyse the symptoms of head and spinal injuries and suggest the best possible solution</p> |
| | <p>Critical Thinking</p> |
| <p>The user/individual on the job needs to know and understand how to:</p> <p>SB12. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently</p> | |

HSS/ N 2316: Manage injuries to head and spine

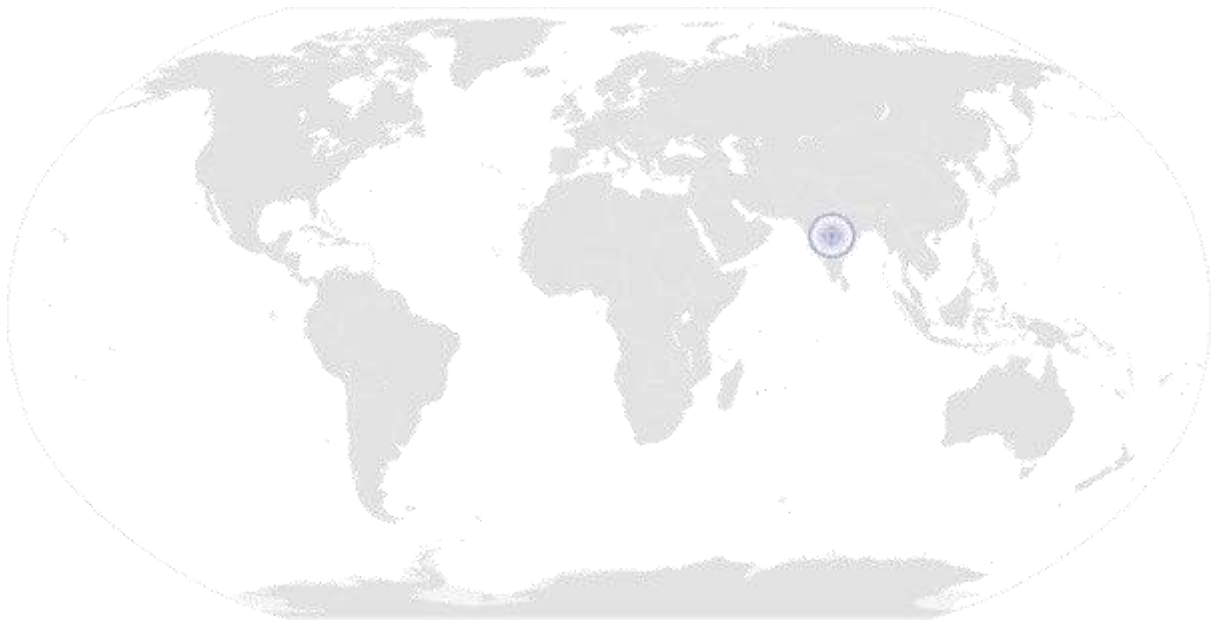
NOS Version Control

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| NOS Code | HSS/ N 231 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |



HSS/ N 2317: Manage infants, neonates and children

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an EMT to manage ill or injured infants and children

HSS/ N 2317: Manage infants, neonates and children

National Occupational Standard

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| Unit Code | HSS/ N 2317 |
| Unit Title (Task) | Manage Infants, Neonates and Children |
| Description | This OS unit is about management of an ill or injured infant or child, considering anatomical and physiological differences between infants or child and adults |
| Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Managing ill or injured infant or children patients , Differentiating the response of the infant or child patient from that of an adult and acting in accordance |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Identify the developmental considerations for the age groups of infants, toddlers, pre-school, school age and adolescent</p> <p>PC2. Identify differences in anatomy and physiology of the infant, child and adult patient</p> <p>PC3. Differentiate the response of the ill or injured infant or child (age specific) from that of an adult</p> <p>PC4. Understand various causes of respiratory emergencies</p> <p>PC5. Differentiate between respiratory distress and respiratory failure</p> <p>PC6. Perform the steps in the management of foreign body airway obstruction</p> <p>PC7. Implement emergency medical care strategies for respiratory distress and respiratory failure</p> <p>PC8. Identify the signs and symptoms of shock (hypoperfusion) in the infant and child patient</p> <p>PC9. Recognise the methods of determining end organ perfusion in the infant and child patient</p> <p>PC10. Identify the usual cause of cardiac arrest in infants and children versus adults</p> <p>PC11. Recognise the common causes of seizures in the infant and child patient</p> <p>PC12. Perform the management of seizures in the infant and child patient</p> <p>PC13. Differentiate between the injury patterns in adults, infants, and children</p> <p>PC14. Perform the field management of the infant and child trauma patient</p> <p>PC15. Summarise the indicators of possible child abuse and neglect</p> <p>PC16. Recognise the medical legal responsibilities in suspected child abuse</p> <p>PC17. Recognise need for EMT debriefing following a difficult infant or child transport</p> |
| Knowledge and Understanding (K) | |
| A. Organisational | The user/individual on the job needs to know and understand: |

HSS/ N 2317: Manage infants, neonates and children

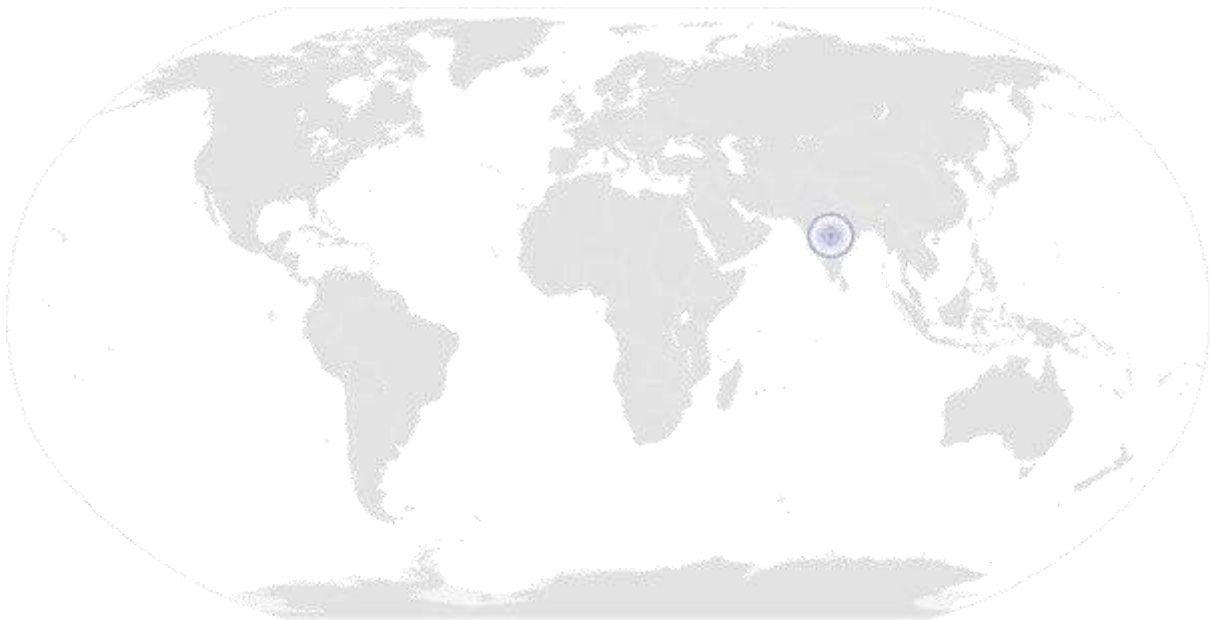
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| <p>Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>KA1. The relevant legislation, standards, policies, and procedure followed by hospital</p> <p>KA2. Relevant procedures, policies and processes used by the hospital specifically in dealing with infants and children</p> <p>KA3. Legislation regarding care of children, especially where possible child abuse is suspected</p> <p>KA4. Legislation and policies followed by the Hospital for provision of information on the health and care of infants and children with parents and family members</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to perform the different procedures to manage infants and children</p> <p>KB2. The significance of each procedure in management of infants and children</p> <p>KB3. How to use the equipment meant to perform the procedure</p> <p>KB4. The development milestones for children</p> <p>KB5. The Infant anatomy and physiology</p> <p>KB6. The symptoms of medical emergency in Infants and children</p> <p>KB7. The techniques of foreign body airway obstruction removal in the infant</p> <p>KB8. The techniques of foreign body airway obstruction removal in the child</p> <p>KB9. The Bag-valve-mask artificial ventilations for the infant</p> <p>KB10. The Bag-valve-mask artificial ventilations for the child</p> <p>KB11. The Oxygen delivery for the infant and child</p> <p>KB12. The assessment of the infant and child</p> <p>KB13. The in-line cervical immobilisation with and without artificial ventilation in infants and children</p> <p>KB14. The use of medications and doses for paediatric cases</p> <p>KB15. The use of equipment for paediatric age group</p> |
| Skills (S) | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Record daily activities that are being performed</p> <p>SA2. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA3. Complete medical history, PCR and applicable transport form</p> <p>SA4. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA5. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA6. Read about changes in legislations and organisational policies</p> <p>SA7. Keep updated with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA8. Read on latest clinical regulations as shared by the medical officer</p> |

HSS/ N 2317: Manage infants, neonates and children

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| | <p>SA9. Read on the list of hospitals in the major accident or emergency prone locations SA10. Read on upgraded facilities available in existing hospitals SA11. Understands and interprets written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA12. Interact with children, especially in emergency, stressful or traumatic situations SA13. Collect all necessary information regarding the patient's condition, address SA14. Avoid using jargon, slang or acronyms when communicating with a patient SA15. Communicate with other people around the patient and give them clear instructions around their safety</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations as minors are involved</p> |
| | <p>Plan and Organise</p> |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in the vicinity</p> |
| | <p>Patient Centricity</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB9. The situation of infant and children and take the remedial measures</p> |
| | <p>Analytical Thinking</p> |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB10. Analyse the situation and function effectively to manage ill or injured infants or children</p> |

HSS/ N 2317: Manage infants, neonates and children

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| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |



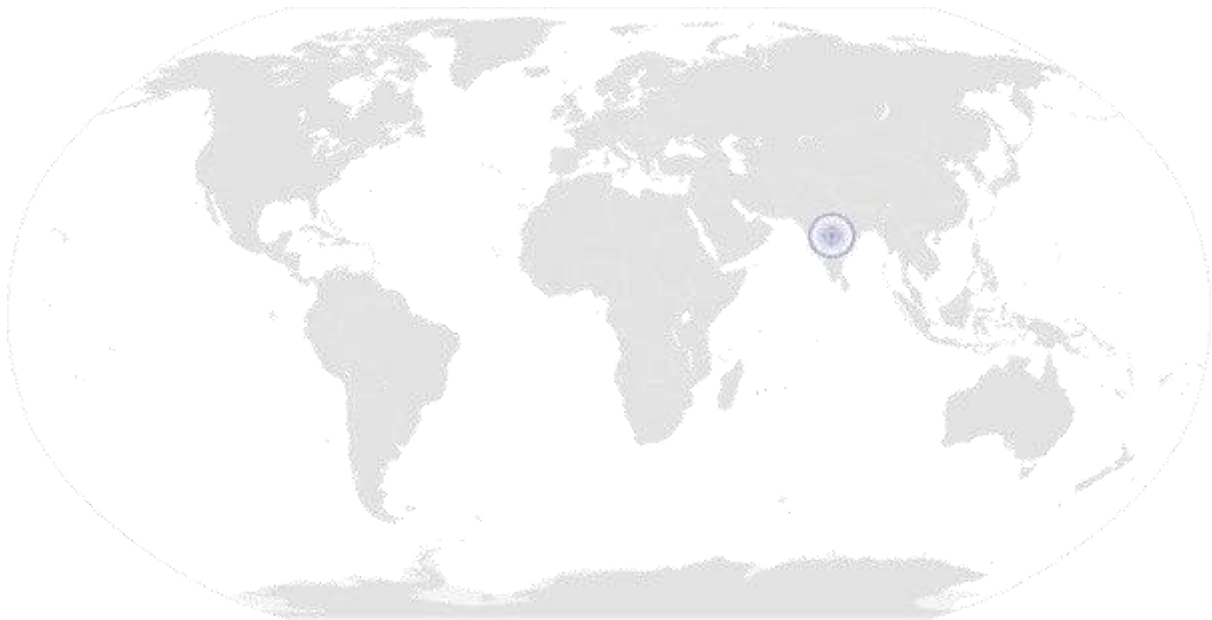
HSS/ N 2317: Manage infants, neonates and children

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2317 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2318: Manage respiratory emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for dealing with respiratory emergencies

HSS/ N 2318: Manage respiratory emergency

National Occupational Standard

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| Unit Code | HSS/ N 2318 |
| Unit Title (Task) | Manage respiratory emergency |
| Description | This OS unit is about assessing the symptoms of a patient with breathing difficulties and providing emergency treatment. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Rendering basic medical care to a patient with a respiratory emergency |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the anatomical components of the upper airway including:</p> <ol style="list-style-type: none"> Nasopharynx Nasal air passage Pharynx Mouth Oropharynx Epiglottis <p>PC2. Recognise the anatomical components of the lower airway including:</p> <ol style="list-style-type: none"> Larynx Trachea Alveoli Bronchi Carina Diaphragm <p>PC3. Recognise the characteristics of normal breathing</p> <p>PC4. Recognise the signs of abnormal breathing including:</p> <ol style="list-style-type: none"> Dyspnoea Upper airway obstruction Acute pulmonary oedema Chronic obstructive pulmonary disease Bronchitis Emphysema Pneumothorax Asthma Pneumonia Pleural effusion Pulmonary embolism Hyperventilation <p>PC5. Recognise the characteristics of abnormal breath sounds</p> <p>PC6. Recognise the characteristics of irregular breathing patterns</p> |

HSS/ N 2318: Manage respiratory emergency

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| | <p>PC7. Complete a focused history and physical exam of the patient</p> <p>PC8. Establish airway in patient with respiratory difficulties</p> <p>PC9. Contact Dispatch and Medical Control for choosing nebulizer therapy</p> <p>PC10. Understand the various types of Metered Dose Inhalers including:</p> <ol style="list-style-type: none"> a. Preventil b. Ventoiln c. Alupent d. Metaprel e. Brethine f. Albuterol g. Metaproterenol h. Terbutaline <p>PC11. Understand the contraindications and side effects for various types of Metered Dose Inhalers</p> |
| Knowledge and Understanding (K) | |
| <p>A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedures followed by the hospital</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. The anatomical components of the upper airway including:</p> <ol style="list-style-type: none"> a. Nasopharynx b. Nasal air passage c. Pharynx d. Mouth e. Oropharynx f. Epiglottis <p>KB2. The anatomical components of the lower airway including:</p> <ol style="list-style-type: none"> a. Larynx b. Trachea c. Alveoli d. Bronchi e. Carina f. Diaphragm <p>KB3. The characteristics of normal breathing</p> <p>KB4. The signs of abnormal breathing including:</p> <ol style="list-style-type: none"> a. Dyspnoea b. Upper airway obstruction c. Acute pulmonary oedema d. Chronic obstructive pulmonary disease |

HSS/ N 2318: Manage respiratory emergency

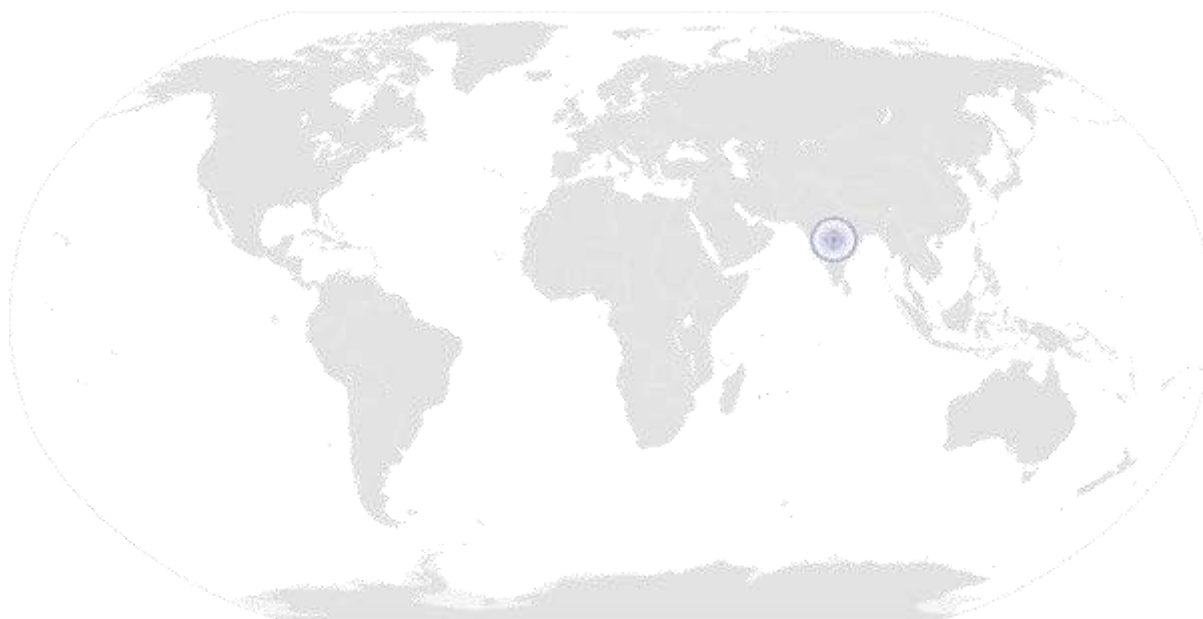
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| | <ul style="list-style-type: none"> e. Bronchitis f. Emphysema g. Pneumothorax h. Asthma i. Pneumonia j. Pleural effusion k. Pulmonary embolism l. Hyperventilation <p>KB5. The characteristics of abnormal breath sounds</p> <p>KB6. The characteristics of irregular breathing patterns</p> <p>KB7. How to complete a focused history and physical exam of the patient</p> <p>KB8. How to establish airway in patient with respiratory difficulties</p> <p>KB9. How to contact Dispatch and Medical Control for choosing nebulizer therapy</p> <p>KB10. The various types of Metered Dose Inhalers including:</p> <ul style="list-style-type: none"> a. Preventil b. Ventoiln c. Alupent d. Metaprel e. Brethine f. Albuterol g. Metaproterenol h. Terbutaline <p>KB11. The contraindications and side effects for various types of Metered Dose Inhalers</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers</p> <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies</p> <p>SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA9. Read latest clinical regulations shared by the medical officer</p> |

HSS/ N 2318: Manage respiratory emergency

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| | <p>SA10. Read the list of hospitals in the major accident or emergency prone locations</p> <p>SA11. Read about upgraded facilities available in existing hospitals</p> <p>SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient</p> <p>SA14. Give clear instructions to the patient</p> <p>SA15. Shout assertively in case the patient does not respond</p> <p>SA16. Collect all necessary information regarding the patient's condition, address</p> <p>SA17. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA18. Communicate with other people around the patient and give them clear instructions around their safety</p> |
| B. Professional Skills | <p>Decision Making</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to refusal of treatment</p> <p>SB2. Act decisively by balancing protocols and emergency at hand</p> <p>SB3. Manage situations where minors, unconscious or self-harming patients are involved</p> |
| | <p>Plan and Organise</p> <p>The user/individual on the job needs to know and understand:</p> <p>SB4. How to plan and organise activities that are assigned to him/her</p> <p>SB5. How to quickly think and refer to information about the hospitals in the vicinity</p> |
| | <p>Patient Centricity</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB7. Maintain patient confidentiality</p> <p>SB8. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> <p>The user/individual on the job needs to:</p> <p>SB9. Take into account a number of factors to solve the problem, such as whether one or two paramedics are required and whether the patient can move at all on his or her own</p> |
| | <p>Analytical Thinking</p> |
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HSS/ N 2318: Manage respiratory emergency

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| | The user/individual on the job needs to know and understand how to: |
| | SB10. Analyse the impact of musculoskeletal injuries and provide the medical care |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| | SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |



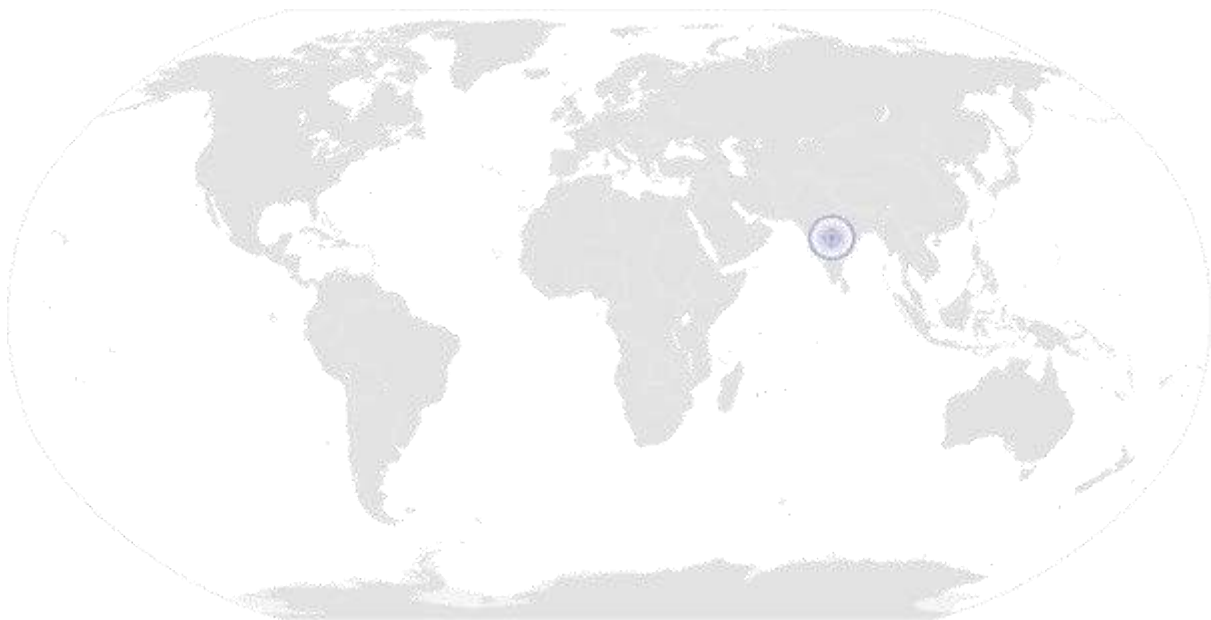
HSS/ N 2318: Manage respiratory emergency

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 231 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2319: Manage severe abdominal pain

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for dealing with a patient experiencing severe abdominal pain.

HSS/ N 2319: Manage severe abdominal pain

National Occupational Standard

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| Unit Code | HSS/ N 2319 |
| Unit Title (Task) | Manage severe abdominal pain |
| Description | This OS unit is about assessing the symptoms of a patient with severe abdominal pain and providing emergency treatment. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> • Rendering basic medical care to a patient experiencing severe abdominal pain |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Recognise the anatomical components of the abdomen and their functions including:</p> <ol style="list-style-type: none"> a. Left Upper Quadrant <ul style="list-style-type: none"> ○ Most of the stomach ○ Spleen ○ Pancreas ○ Large intestine ○ Small intestine ○ Left kidney (upper portion) b. Right Upper Quadrant <ul style="list-style-type: none"> ○ Liver ○ Gallbladder ○ Part of the large intestine ○ Right kidney (upper portion) ○ Small intestine c. Right Lower Quadrant <ul style="list-style-type: none"> ○ Appendix ○ Large intestine ○ Female reproductive organs ○ Small intestine ○ Right kidney (lower portion) ○ Right ureter ○ Right ovary & fallopian tube d. Left Lower Quadrant <ul style="list-style-type: none"> ○ Large intestine ○ Small intestine ○ Left kidney (lower portion) ○ Left ureter ○ Left ovary ○ Left fallopian tube |

HSS/ N 2319: Manage severe abdominal pain

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| | <ul style="list-style-type: none"> e. Midline structures <ul style="list-style-type: none"> ○ Small intestine ○ Urinary bladder ○ Uterus <p>PC2. Recognise the symptoms and cause of visceral pain</p> <p>PC3. Recognise the symptoms and causes of parietal pain</p> <p>PC4. Recognise the symptoms and possible causes of referred pain including:</p> <ul style="list-style-type: none"> a. Right shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the right); gallstone; subphrenic abscess; free abdominal blood b. Left shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the left); ruptured spleen; pancreatic disease or cancer; subphrenic abscess; abdominal blood c. Midline, back pain – aortic aneurysm or dissection; pancreatitis, pancreatic cancer, kidney stone d. Mid-abdominal pain – small bowel irritation, gastroenteritis, early appendicitis e. Lower abdominal pain – diverticular disease (herniations of the mucosa and submucosa of the intestines), Crohn’s disease (a type of inflammatory bowel disease), ulcerative colitis f. Sacrum pain – perirectal abscess, rectal disease g. Epigastrium pain – peptic, duodenal ulcer; gallstone, hepatitis, pancreatitis, angina pectoris h. Testicular pain – renal colic; appendicitis <p>PC5. Complete a focused history and physical exam of the patient including:</p> <ul style="list-style-type: none"> a. Visual inspection b. Auscultating the abdomen c. Palpating the abdomen <p>PC6. Establish airway in patient</p> <p>PC7. Place patient in position of comfort</p> <p>PC8. Calm and reassure the patient</p> <p>PC9. Look for signs of hypoperfusion</p> <p>PC10. Recognise possible diagnoses for abdominal pain</p> <p>PC11. State the treatment for managing various causes of abdominal pain</p> <p>PC12. Recognise potential diagnoses which imply the condition of the patient may deteriorate and highlight the need for frequent reassessment and advanced life support interventions</p> <p>PC13. Alert the Emergency Centre/ Healthcare provider in advance of a priority case (when required)</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context | The user/individual on the job needs to know and understand: |

HSS/ N 2319: Manage severe abdominal pain

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| <p>(Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>KA1. Relevant legislation, standards, policies, and procedures followed by the hospital</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. The symptoms and causes of visceral pain</p> <p>KB2. The symptoms and causes of parietal pain</p> <p>KB3. The symptoms and possible causes of referred pain including:</p> <ul style="list-style-type: none"> a. Right shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the right); gallstone; subphrenic abscess; free abdominal blood b. Left shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the left); ruptured spleen; pancreatic disease or cancer; subphrenic abscess; abdominal blood c. Midline, back pain – aortic aneurysm or dissection; pancreatitis, pancreatic cancer, kidney stone d. Mid-abdominal pain – small bowel irritation, gastroenteritis, early appendicitis e. Lower abdominal pain – diverticular disease (herniations of the mucosa and submucosa of the intestines), Crohn’s disease (a type of inflammatory bowel disease), ulcerative colitis f. Sacrum pain – perirectal abscess, rectal disease g. Epigastrium pain – peptic, duodenal ulcer; gallstone, hepatitis, pancreatitis, angina pectoris h. Testicular pain – renal colic; appendicitis <p>KB4. How to complete a focused history and physical exam of the patient including:</p> <ul style="list-style-type: none"> a. Visual inspection b. Auscultating the abdomen c. Palpating the abdomen <p>KB5. How to establish airway in patient</p> <p>KB6. How to place patient in position of comfort</p> <p>KB7. How to calm and reassure the patient</p> <p>KB8. How to look for signs of hypoperfusion</p> <p>KB9. The possible diagnoses for abdominal pain</p> <p>KB10. The treatment for managing various causes of abdominal pain</p> <p>KB11. The potential diagnoses which imply the condition of the patient may deteriorate and highlight the need for frequent reassessment and advanced life support interventions</p> <p>KB12. How and when to alert the Emergency Centre/ Healthcare provider in advance</p> |

HSS/ N 2319: Manage severe abdominal pain

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| | of a priority case (when required) |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | The user/ individual on the job needs to know and understand how to: SA1. Share documents, reports, task lists, and schedules with co-workers SA2. Record daily activities SA3. Share sharp, concise and to the point report with the provider institute physician SA4. Complete medical history, PCR and applicable transport form SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital SA6. Produce information which may include technical material that is appropriate for the intended audience |
| | Reading Skills |
| | The user/individual on the job needs to know and understand how to: SA7. Read about changes in legislations and organisational policies SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA9. Read latest clinical regulations shared by the medical officer SA10. Read the list of hospitals in the major accident or emergency prone locations SA11. Read about upgraded facilities available in existing hospitals SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: SA13. Interact with the patient SA14. Give clear instructions to the patient SA15. Shout assertively in case the patient does not respond SA16. Collect all necessary information regarding the patient's condition, address SA17. Avoid using jargon, slang or acronyms when communicating with a patient SA18. Communicate with other people around the patient and give them clear instructions around their safety |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to refusal of treatment SB2. Act decisively by balancing protocols and emergency at hand SB3. Manage situations where minors, unconscious or self-harming patients are |

HSS/ N 2319: Manage severe abdominal pain

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| | involved |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | SB4. How to plan and organise activities that are assigned to him/her SB5. How to quickly think and refer to information about the hospitals in the vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB6. Communicate effectively with patients and their family, physicians, and other members of the health care team SB7. Maintain patient confidentiality SB8. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to: |
| | SB9. Take into account a number of factors to solve the problem, such as whether one or two paramedics are required and whether the patient can move at all on his or her own |
| Analytical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB10. Analyse the impact of musculoskeletal injuries and provide the medical care | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently | |

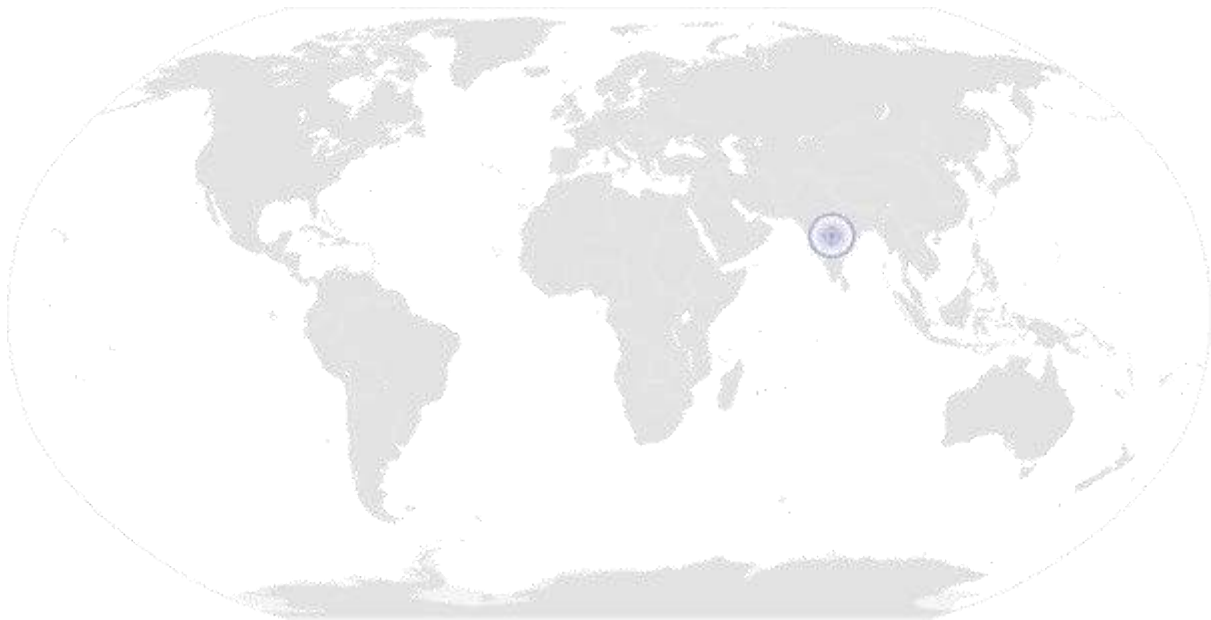
HSS/ N 2319: Manage severe abdominal pain

NOS Version Control

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|----------------------------|--------------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 2319 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2320: Manage mass casualty incident

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for managing a mass casualty incident.

HSS/ N 2320: Manage mass casualty incident

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| National Occupational Standard | Unit Code | HSS/ N 2320 |
| | Unit Title (Task) | Manage Mass Casualty Incident |
| | Description | This OS unit is about the management and treatment of emergencies related to a mass casualty incident. |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying the type of mass casualty incident , Setting up separate functional teams at the site , Managing initial triage, patient extraction and secondary triage, Coordinating with other first responder teams |
| | Performance Criteria (PC) w.r.t. The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <ul style="list-style-type: none"> PC1. Establish an Incident Management Structure on arrival at the scene including: <ul style="list-style-type: none"> a. Designating an Incident Commander to manage the incident b. As Incident Commander, designating Triage Team(s), Treatment Team(s), and a Transport Officer PC2. Set up separate areas for treatment, triage and transport PC3. Conduct an initial triage of patients by using the START triage model for adult patients, JumpSTART Triage for paediatric patients and the SMART triage tagging system PC4. Use appropriate personal protective equipment while conducting initial triage PC5. Tag severity/ criticality of patient using colour coded tags PC6. Direct non-injured and/or slightly injured victims to the triage area set up for those with minor injuries PC7. Monitor patients with minor injuries for changes in their condition PC8. Maintain an open airway and stop uncontrolled bleeding PC9. Extract patients from the casualty area based on initial triage to designated triage and treatment areas PC10. Use equipment like cots and litters for extraction where required PC11. Re-triage patients extracted to the triage and treatment areas PC12. Provide treatment and deliver patients to transport area PC13. Transport patients to healthcare facility PC14. Alert healthcare facilities in advance of possible arrival of multiple patients |
| | Knowledge and Understanding (K) | |
| | A. Organisational Context (Knowledge of the Healthcare) | The user/individual on the job needs to know and understand: <ul style="list-style-type: none"> KA1. Level of one’s competence, authority and knowledge in relation to the management of emergency situations |

HSS/ N 2320: Manage mass casualty incident

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| provider/ Organisation and its processes) | <p>KA2. Appropriate response for emergency situations within one’s scope of practice</p> <p>KA3. Relevant legislation, standards, policies, and procedures followed by the hospital</p> <p>KA4. How to engage with provider for support in order to deliver and assist providers.</p> <p>KA5. What is the significance of each procedure in patient management</p> <p>KA6. Employee safety policy</p> <p>KA7. Standard operating procedures followed by the healthcare provider in managing mass casualty incidents</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to establish an Incident Management Structure on arrival at the scene including:</p> <ol style="list-style-type: none"> a. Designating an Incident Commander to manage the incident b. As Incident Commander, designating Triage Team(s), Treatment Team(s), and a Transport Officer <p>KB2. How to set up separate areas for treatment, triage and transport</p> <p>KB3. How to conduct an initial triage of patients by using the START triage model for adult patients, JumpSTART Triage for paediatric patients and the SMART triage tagging system</p> <p>KB4. How to use appropriate personal protective equipment while conducting initial triage</p> <p>KB5. How to tag severity/ criticality of patient using colour coded tags</p> <p>KB6. How to direct non-injured and/or slightly injured victims to the triage area set up for those with minor injuries</p> <p>KB7. How to monitor patients with minor injuries for changes in their condition</p> <p>KB8. Maintain an open airway and stop uncontrolled bleeding</p> <p>KB9. How to extract patients from the casualty area based on initial triage to designated triage and treatment areas</p> <p>KB10. How to use equipment like cots and litters for extraction where required</p> <p>KB11. How to re-triage patients extracted to the triage and treatment areas</p> <p>KB12. How to provide treatment and deliver patients to transport area</p> <p>KB13. How to transport patients to healthcare facility</p> <p>KB14. How to complete a Pre-Hospital Care report for patients in a mass casualty incident</p> <p>KB15. How to alert healthcare provider facilities in advance of a mass casualty incident and possible arrival of multiple patients</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers</p> <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> |

HSS/ N 2320: Manage mass casualty incident

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| | SA6. Produce information which may include technical material that is appropriate for the intended audience |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA9. Read latest clinical regulations shared by the medical officer SA10. Read the list of hospitals in the major accident or emergency prone locations. SA11. Read about upgraded facilities available in existing hospitals SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient SA14. Give clear instructions to the patient SA15. Shout assertively in case the patient does not respond SA16. Collect all necessary information regarding the patient's condition, address SA17. Avoid using jargon, slang or acronyms when communicating with a patient SA18. Communicate with other people around the patient and give them clear instructions around their safety SA19. Communicate clearly with other emergency response agencies if required</p> |
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| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to the concerned area of work in relation to job role</p> |
| | Plan and Organise |
| | <p>The user/individual on the job needs to know and understand:</p> <p>SB2. How to plan and organise activities that are assigned to him/her SB3. How to control any aggression by the patient or the patient relatives SB4. How to ensure there is minimum gap in the arrival time of the medical team and allocation of the patient to a respective triage level</p> |
| | Patient Centricity |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB5. Communicate effectively with patients and their family, physicians, and other</p> |

HSS/ N 2320: Manage mass casualty incident

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| | members of the health care team SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: SB8. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s) SB9. Identify immediate or temporary solutions to resolve delays |
| | Analytical Thinking |
| | The user/individual on the job needs to: SB10. Analyse the situation and carry out the required procedures |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. |



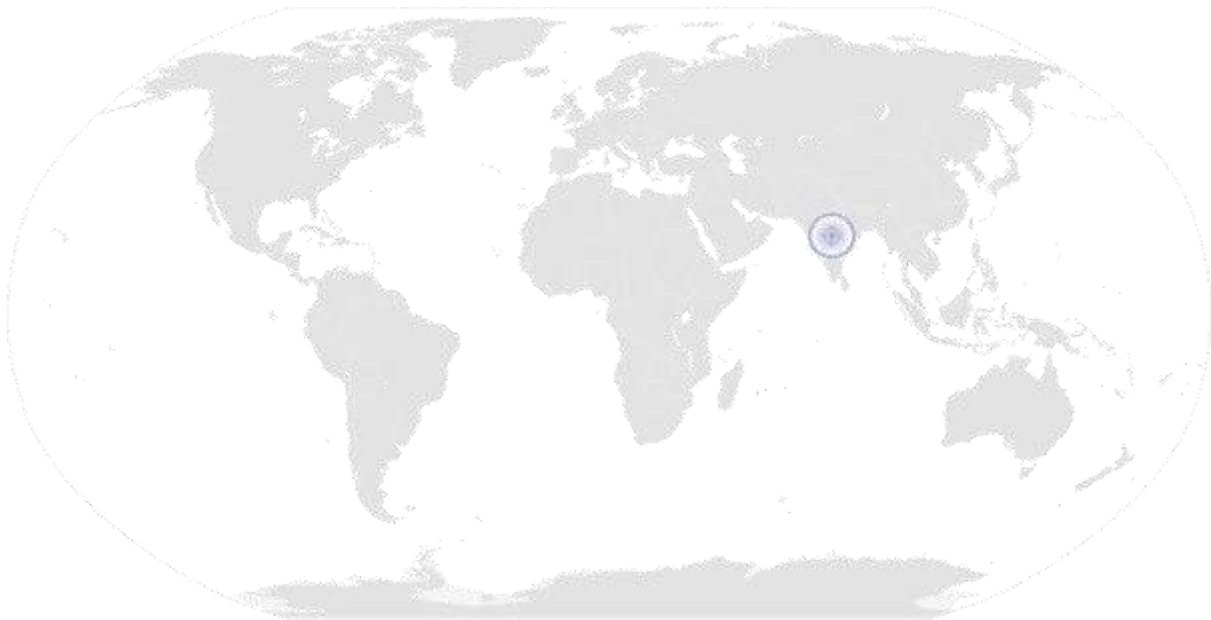
HSS/ N 2320: Manage mass casualty incident

NOS Version Control

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| NOS Code | HSS/ N 2320 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2321: Select the proper provider institute for transfer

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an EMT to allocate the patient to the appropriate medical facility

HSS/ N 2321: Select the proper provider institute for transfer

National Occupational Standard

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| Unit Code | HSS/ N 2321 |
| Unit Title (Task) | Select the proper provider institute for transfer |
| Description | This OS unit is about the steps involved in allocation of the patient to the appropriate medical facility It provides key points to be addressed to balance the availability of the appropriate medical facility, the ability of the patient to pay for the medical service and the health of the patient |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Allocating the patient to the appropriate medical facility , Identifying the kind of treatment required based on the severity of the damage, risks and medical history of the patient |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Explain to the patient about his role and the reason for selecting a particular health provider</p> <p>PC2. Consolidate complete medical history of the patient with the severity of the damage and impending risk in terms of time and the kind of treatment required</p> <p>PC3. Allocate patient to the nearest provider institute</p> <p>PC4. Base the allocation on the kind of care required namely primary, secondary or tertiary care centres</p> <p>PC5. Make sure that the selection of the institute is in adherence with the legal regulation</p> <p>PC6. Obtain guidance from medical officer for selection of proper provider institute</p> <p>PC7. Provide pre-arrival information to the receiving hospital</p> <p>PC8. Obtain guidance of medical officer when ambulance needed to be stopped en-route (e.g. during emergency child birth)</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedures followed in the hospital</p> <p>KA2. The healthcare facility mapping</p> <p>KA3. The services-availability mapping at each facility</p> <p>KA4. The resource availability and specialisation for each facility</p> <p>KA5. The laws and regulations to be adhered to allocate a hospital to the patient</p> <p>KA6. The categories of hospitals and what kind of services the hospitals provide</p> <p>KA7. The hospitals available in the area and the facility available at each of the hospitals</p> |

HSS/ N 2321: Select the proper provider institute for transfer

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| | <p>KA8. The kind of monetary resources the patient would have to invest in each of the hospitals</p> <p>KA9. The basic facilities to be available in a hospital in case of very backward or remote regions</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to assess and select the best healthcare facility for the patient</p> <p>KB2. The procedure of hospital allocation starting from assessment of the patient’s medical condition, consolidation of the complete information related to hospitals, directions from the medical officer and then arrangement of transport to the allocated medical facility</p> <p>KB3. The risks involved in the process of allocating a hospital to the patient and steps to mitigate risks</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Record daily activities</p> <p>SA2. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA3. Complete medical history, PCR and applicable transport form</p> <p>SA4. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Read about changes in legislations and organisational policies</p> <p>SA6. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA7. Read on latest clinical regulations as shared by the medical officer</p> <p>SA8. Read on the list of hospitals in the major accident or emergency prone locations</p> <p>SA9. Read on upgraded facilities available in existing hospitals</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA10. Interact with the patient</p> <p>SA11. Collect all necessary information regarding the patient’s condition, address</p> <p>SA12. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA13. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA14. Communicate clearly with other emergency response agencies if required</p> <p>SA15. Explain to the patient and family the hospital allocation details especially the government and private hospital differentiation</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> |

HSS/ N 2321: Select the proper provider institute for transfer

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| | SB1. Make decisions on the appropriate medical facility for each patient SB2. Act decisively by balancing protocols and emergency at hand |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand how to: SB3. Plan and organise activities that are assigned to him/her SB4. Quickly think and refer to information about the hospitals in the vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | SB8. Analyse available data and decide the best option of medical service provider for every patient |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB9. Analyse the situation and function effectively to accomplish allocation of an appropriate medical facility to the patient |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB10. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |

HSS/ N 2321: Select the proper provider institute for transfer

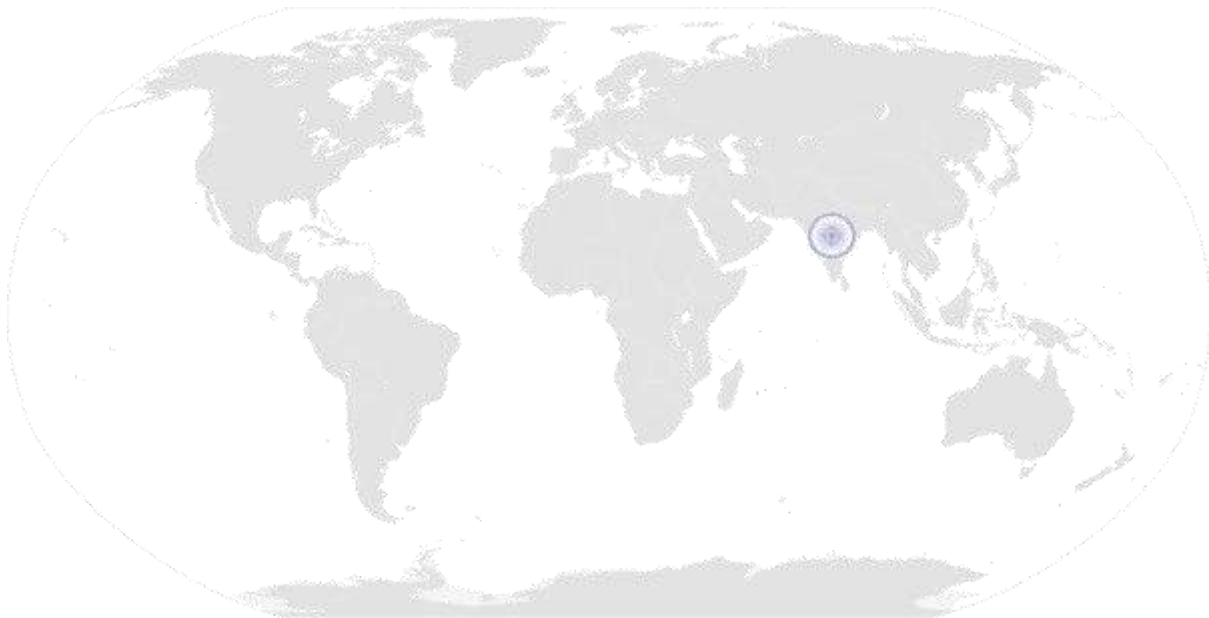
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| NOS Code | HSS/ N 2321 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |



HSS/ N 2322: Transport patient to the provider institute

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an EMT to transport the patient by an appropriate means based on the emergency, weather conditions, patient's history and economic status

HSS/ N 2322: Transport patient to the provider institute

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| National Occupational Standard | Unit Code | HSS/ N 2322 |
| | Unit Title (Task) | Transport patient to the provider institute |
| | Description | This OS unit is about the standardised procedures involved in rendering medical service to a patient by transporting the patient by appropriate means, based on the emergency, weather conditions, patient’s history and economic status It also includes the physical steps related to patient transport from the emergency site to the transport |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> Transporting patient by appropriate means, keeping in mind the emergency, weather conditions and availability of the transport , Treating immediate life threatening conditions using external devices available in the ambulances |
| | Performance Criteria (PC) wrt The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <p>PC1. Adhere fully to the rules and regulations related to the usage of ground and air transport</p> <p>PC2. Adhere fully to the steps involved in treating and transporting the patient</p> <p>PC3. Positively manage situations where transport is a problem</p> <p>PC4. Allocate the means of transport keeping in mind the emergency, weather conditions and availability of transport</p> <p>PC5. Adhere fully to procedures once the patient reaches the hospital</p> <p>PC6. Use correct medication and equipment for treatment of immediate threats to life</p> |
| | Knowledge and Understanding (K) | |
| | A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: <p>KA1. The procedures, rules and regulations involved in using ground and air transport</p> <p>KA2. The legislation and regulations governing choice of transport</p> <p>KA3. Relevant procedures and regulations governing situations where patients cannot or do not give permission for transport</p> |
| | B. Technical Knowledge | The user/individual on the job needs to know and understand: <p>KB1. How to assess whether the emergency is of a life threatening nature and will require immediate transport or could it be done within the performance criterion or could it be further be done as per the availability of transport</p> <p>KB2. The importance of the consent of the patient or the family members for the transport procedure required for the patient to be transported</p> |

HSS/ N 2322: Transport patient to the provider institute

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| | <p>KB3. How to monitor the patient during the transit and what kind of monitoring would the patient require</p> <p>KB4. How to assess whether the patient is able to travel long distance</p> <p>KB5. The kind and amount of resources required to transport the patient</p> <p>KB6. The procedure of taking the medical officer's consent before calling for transport</p> <p>KB7. The procedure of handover of the patient to the medical officer with all the relevant paperwork related to patient's medical history and regulatory work</p> <p>KB8. The procedures involved in case of specific and different emergency transport</p> <p>KB9. The laws and regulations related to patient transport</p> <p>KB10. How to manage cases where the patient is not giving consent to be transported</p> <p>KB11. How to complete documentation of all the transport related paperwork</p> <p>KB12. The treatment of immediate life threats using external devices available in the BLS ambulances and interventions like definitive airway, intravenous fluids and medications, interpretation of ECGs and Defibrillators</p> |
| Skills (S) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Record daily activities</p> <p>SA2. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA3. Completion of medical history, PCR and applicable transport form</p> <p>SA4. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Read about changes in legislations and organisational policies</p> <p>SA6. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA7. Read on latest clinical regulations as shared by the medical officer</p> <p>SA8. Read on the list of hospitals in the major accident or emergency prone locations</p> <p>SA9. Read on upgraded facilities available in existing hospitals</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA10. Interact with the patient</p> <p>SA11. Give clear instructions to the patient</p> <p>SA12. Collect all necessary information regarding the patient's condition, address</p> <p>SA13. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA14. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA15. Communicate clearly with other emergency response agencies if required</p> |

HSS/ N 2322: Transport patient to the provider institute

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| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Act decisively by balancing protocols and emergency at had SB2. Manage situations where minors, unconscious or self-harming patients are involved |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand how to: SB3. Plan and organise activities that are assigned to him/her SB4. Quickly think and refer to information about the hospitals in the vicinity |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team SB6. Maintain patient confidentiality SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | The user/individual on the job needs to: SB8. Adjust their transporting techniques to move the patient to the ambulance as per the requirement |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB9. Analyse the situation and function effectively to accomplish the transport of patient |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: SB10. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently | |

HSS/ N 2322: Transport patient to the provider institute

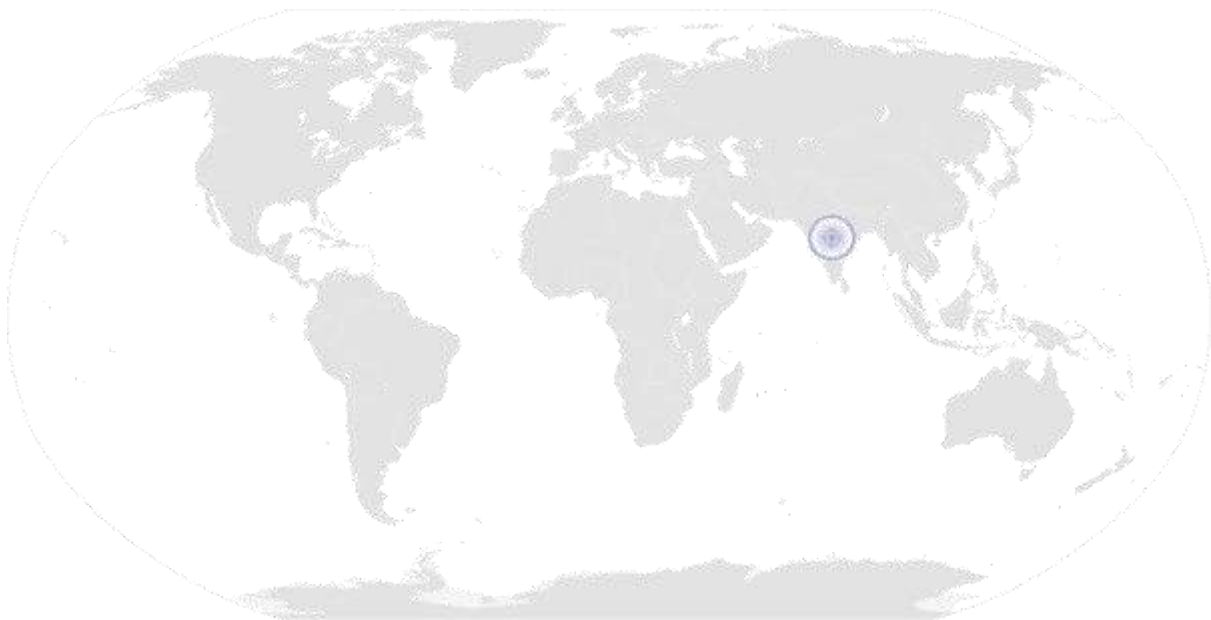
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| NOS Code | HSS/ N 2322 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |



HSS/ N 2323: Manage patient handover to the provider institute

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an EMT to hand over the patient to the medical staff and brief the hospital staff

HSS/ N 2323: Manage patient handover to the provider institute

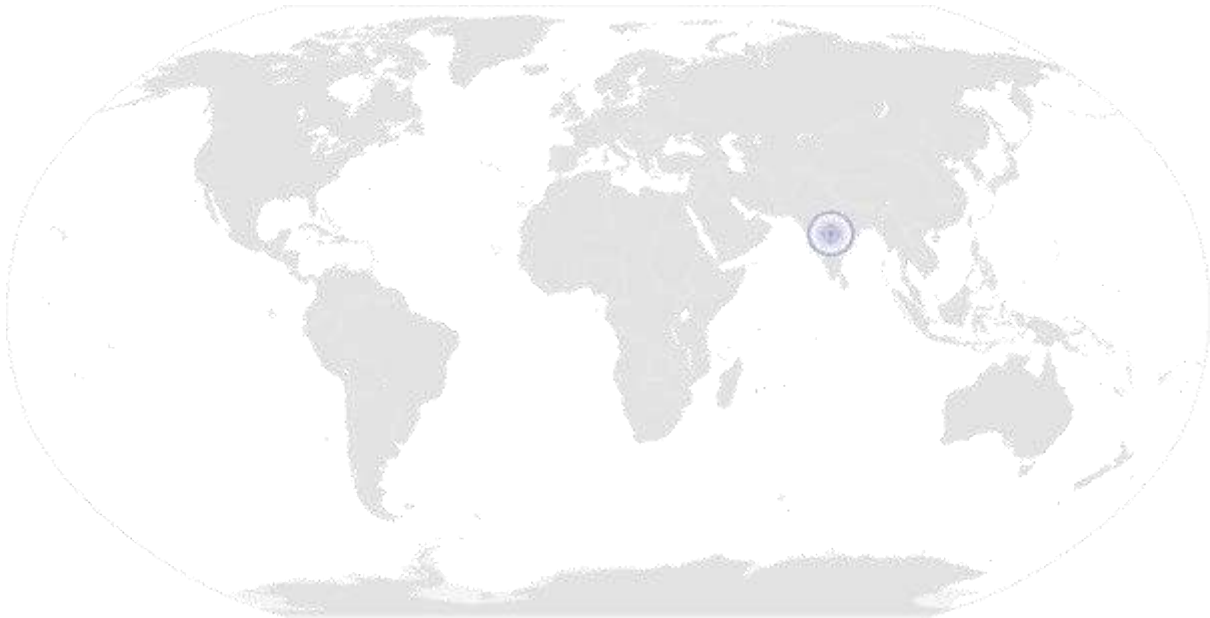
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| National Occupational Standard | Unit Code | HSS/ N 2323 |
| | Unit Title (Task) | Manage Patient Handover to the provider institute |
| | Description | This OS unit is about the completion of Patient Care Medical Report (PCR), briefing of on the condition and handover of the patients to the medical staff |
| | Scope | This unit/task covers the following: <ul style="list-style-type: none"> Providing a verbal report of the patient(s) to the medical staff , Completing the Patient Care Medical Report (PCR) and handing it over to the medical staff, Discussing initial findings with the medical staff |
| | Performance Criteria (PC) wrt The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/individual on the job must be able to: <p>PC1. Provide a verbal report to the medical staff on the condition of the patient and initial findings</p> <p>PC2. Complete the Patient Care Report (PCR) and hand it over to the medical staff</p> <p>PC3. Hand over the consent form signed by the patient or a relative</p> |
| | Knowledge and Understanding (K) | |
| | A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: <p>KA1. The up-to-date process for patient handover</p> <p>KA2. Codes used in the hospital for all emergency situations</p> <p>KA3. Relevant legislation, standards, policies, and procedures followed in the hospital</p> <p>KA4. How to engage with the medical officer for support in case the situation is beyond one's competence</p> <p>KA5. Role and importance of the EMT in supporting hospital operations</p> <p>KA6. Protocol as per designed by the state or EMS providers</p> <p>KA7. The use of the SBAR (Situation, Background, Assessment, and Recommendation) technique (WHO recommended) during patient handover communication</p> |
| | B. Technical Knowledge | The user/individual on the job needs to know and understand: <p>KB1. The importance of being alert to health, safety, and security at the handover institute</p> <p>KB2. The content of handover including clinical notes, their medical history and any treatment administered</p> <p>KB3. How to provide a verbal briefing on the patient's condition to hospital staff</p> <p>KB4. How to use the available tools (i.e. Electronic systems, proformas)</p> |
| Skills (S) | | |
| A. Core Skills/ | Writing Skills | |

HSS/ N 2323: Manage patient handover to the provider institute

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| Generic Skills | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Record daily activities SA2. Share sharp, concise and to the point report with the physician SA3. Completion of medical history, PCR and applicable transport and transfer forms</p> |
| | <p>Reading Skills</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA4. Read about changes in legislations and organisational policies SA5. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities SA6. Read on latest clinical regulations as shared by the medical officer SA7. Read on the list of hospitals in the major accident or emergency prone locations SA8. Read on upgraded facilities available in existing hospitals</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA9. Engage with the patient(s) and relatives in the ambulance to collect useful information SA10. Communicate with other people around the patient(s) and give them clear instructions around their safety SA11. Avoid using jargon, slang or acronyms when communicating with a patient(s) SA12. Interact effectively with the patient(s), relatives and bystanders who are in stressful situations</p> |
| | <p>Decision Making</p> <p>Not applicable</p> |
| B. Professional Skills | <p>Plan and Organise</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Plan and organise activities that are assigned to the EMT SB2. Quickly think and refer to information about the hospitals in the vicinity</p> |
| | <p>Patient Centricity</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB3. Communicate effectively with physicians, and other members of the health care team SB4. Maintain patient confidentiality SB5. Respect the rights of the patient(s)</p> |
| | <p>Problem Solving</p> |
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HSS/ N 2323: Manage patient handover to the provider institute

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| | The user/individual on the job needs to know and understand how to: |
| | SB6. Identify immediate or temporary solutions to resolve delays |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| | SB7. Analyse the situation and function effectively to accomplish patient handover in a best possible way |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| | SB8. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently |



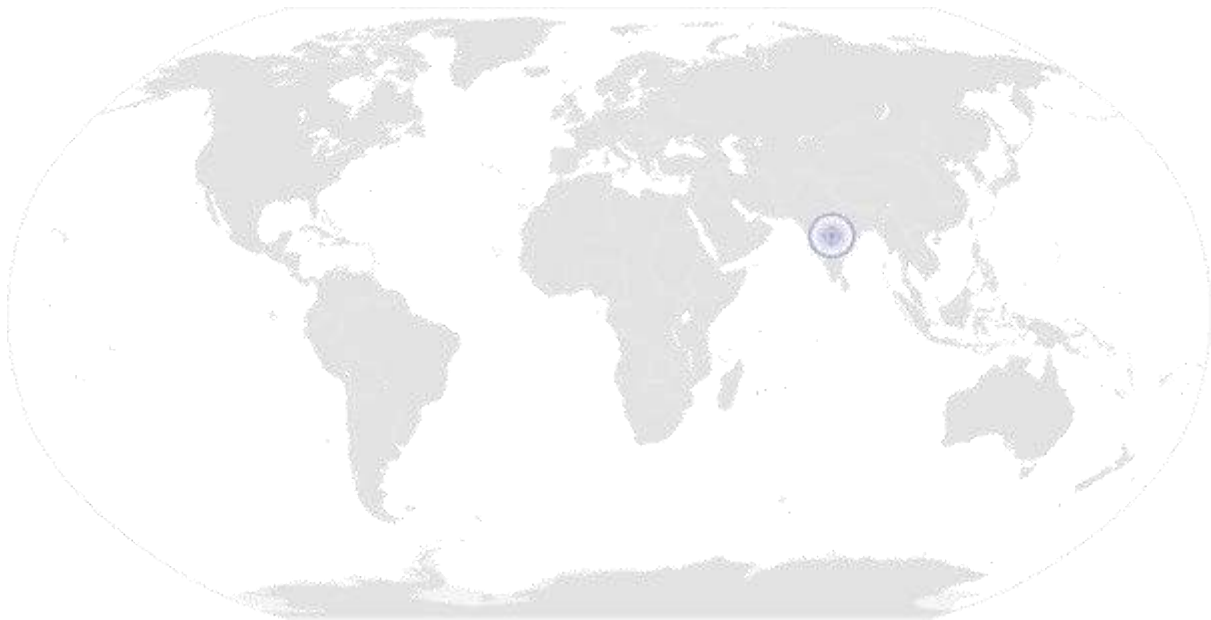
HSS/ N 2323: Manage patient handover to the provider institute

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| NOS Code | HSS/ N 2323 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 2324: Manage diabetes emergency

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an EMT for managing a diabetes emergency.

HSS/ N 2324: Manage diabetes emergency

National Occupational Standard

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| Unit Code | HSS/ N 2324 |
| Unit Title (Task) | Manage diabetes emergency |
| Description | This OS unit is about management and treatment of a diabetes emergency. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Identifying a patient with a history of diabetes and providing treatment |
| Performance Criteria (PC) w.r.t. The Scope | |
| Element | Performance Criteria |
| | To be competent, the user/individual on the job must be able to: <ul style="list-style-type: none"> PC1. Identify the patient taking diabetic medications and the implications of a diabetes history PC2. Perform the steps in the emergency medical care of the patient taking diabetic medicine with a history of diabetes PC3. Establish the relationship between airway management and the patient with altered mental status PC4. Recognize the generic and trade names, medication forms, dose, administration, action, and contraindications for oral glucose PC5. Evaluate the need for medical direction in the emergency medical care of the diabetic patient |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | The user/individual on the job needs to know and understand: <ul style="list-style-type: none"> KA1. Appropriate response for emergency situations within one's scope of practice KA2. Relevant legislation, standards, policies, and procedures followed by the hospital KA3. How to engage with provider for support in order to deliver and assist providers. KA4. What is the significance of each procedure in patient management KA5. Employee safety policy |
| B. Technical Knowledge | The user/individual on the job needs to know and understand: <ul style="list-style-type: none"> KB1. Steps in emergency care for the patient with a history of diabetes and diabetic medication KB2. The various possible types of diabetic emergencies KB3. The rationale for administering oral glucose KB4. The steps in the administration of oral glucose KB5. The process for assessment and documentation of patient response to oral |

HSS/ N 2324: Manage diabetes emergency

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| | <p>glucose.</p> <p>KB6. How to complete a pre-hospital care report for patients with diabetic emergencies</p> <p>KB7. How to assess and document patient response</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Share documents, reports, task lists, and schedules with co-workers</p> <p>SA2. Record daily activities</p> <p>SA3. Share sharp, concise and to the point report with the provider institute physician</p> <p>SA4. Complete medical history, PCR and applicable transport form</p> <p>SA5. Facilitate form filling in the allocated hospital once the patient reaches the hospital</p> <p>SA6. Produce information which may include technical material that is appropriate for the intended audience</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Read about changes in legislations and organisational policies</p> <p>SA8. Keep abreast with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> <p>SA9. Read latest clinical regulations shared by the medical officer</p> <p>SA10. Read the list of hospitals in the major accident or emergency prone locations.</p> <p>SA11. Read about upgraded facilities available in existing hospitals</p> <p>SA12. Understand and interpret written material, including technical material, rules, regulations, instructions, reports, charts, graphs, or tables</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA13. Interact with the patient</p> <p>SA14. Give clear instructions to the patient</p> <p>SA15. Shout assertively in case the patient does not respond</p> <p>SA16. Collect all necessary information regarding the patient's condition, address</p> <p>SA17. Avoid using jargon, slang or acronyms when communicating with a patient</p> <p>SA18. Communicate with other people around the patient and give them clear instructions around their safety</p> <p>SA19. Communicate clearly with other emergency response agencies if required</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to the concerned area of work in relation to job role</p> |

HSS/ N 2324: Manage diabetes emergency

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| | Plan and Organise |
| | The user/individual on the job needs to know and understand: |
| | SB2. How to plan and organise activities that are assigned to him/her |
| | SB3. How to control any aggression by the patient or the patient relatives |
| | SB4. How to ensure there is minimum gap in the arrival time of the medical team and allocation of the patient to a respective triage level |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB5. Communicate effectively with patients and their family, physicians, and other members of the health care team |
| | SB6. Maintain patient confidentiality |
| | SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| The user/individual on the job needs to know and understand how to: | |
| SB8. Think through the problem, evaluate the possible solution(s) and suggest the optimum /best possible solution(s) | |
| SB9. Identify immediate or temporary solutions to resolve delays | |
| Analytical Thinking | |
| The user/individual on the job needs to: | |
| SB10. Analyse the situation and carry out the required procedures | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB11. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently. | |

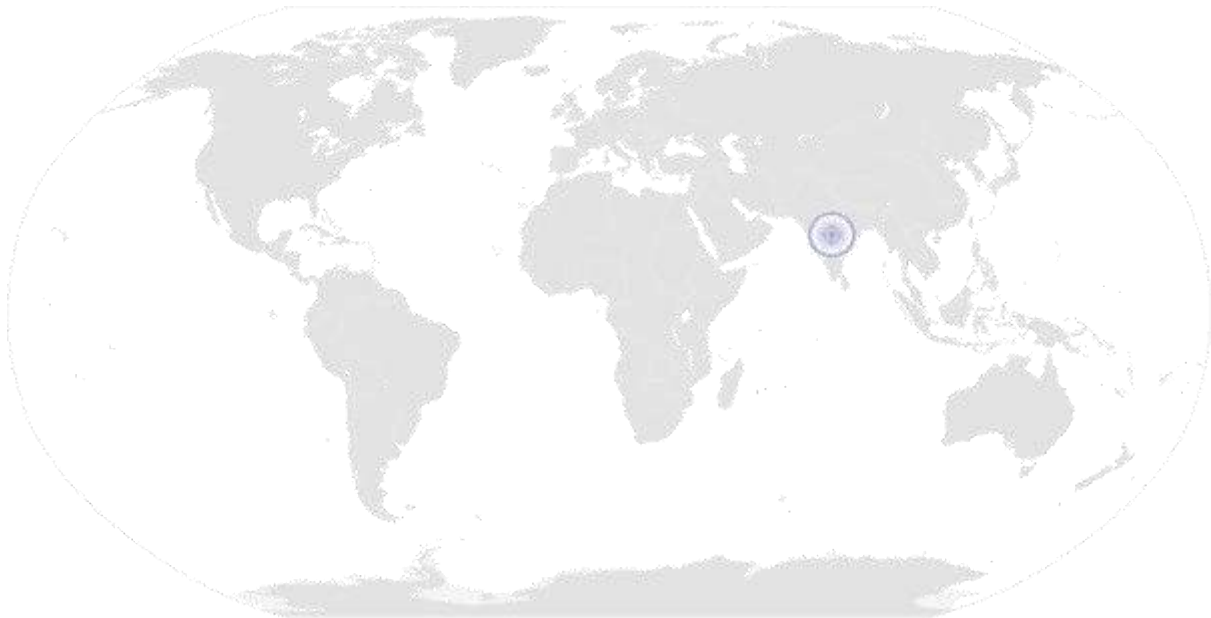
HSS/ N 2324: Manage diabetes emergency

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| NOS Code | HSS/ N 2324 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| Occupation | EMERGENCY MEDICAL TECHNICIAN - BASIC | Next review date | 22/05/15 |

HSS/ N 9601: Collate and Communicate Health Information

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health Professional to collate and communicate health related information.

HSS/ N 9601: Collate and Communicate Health Information

National Occupational Standard

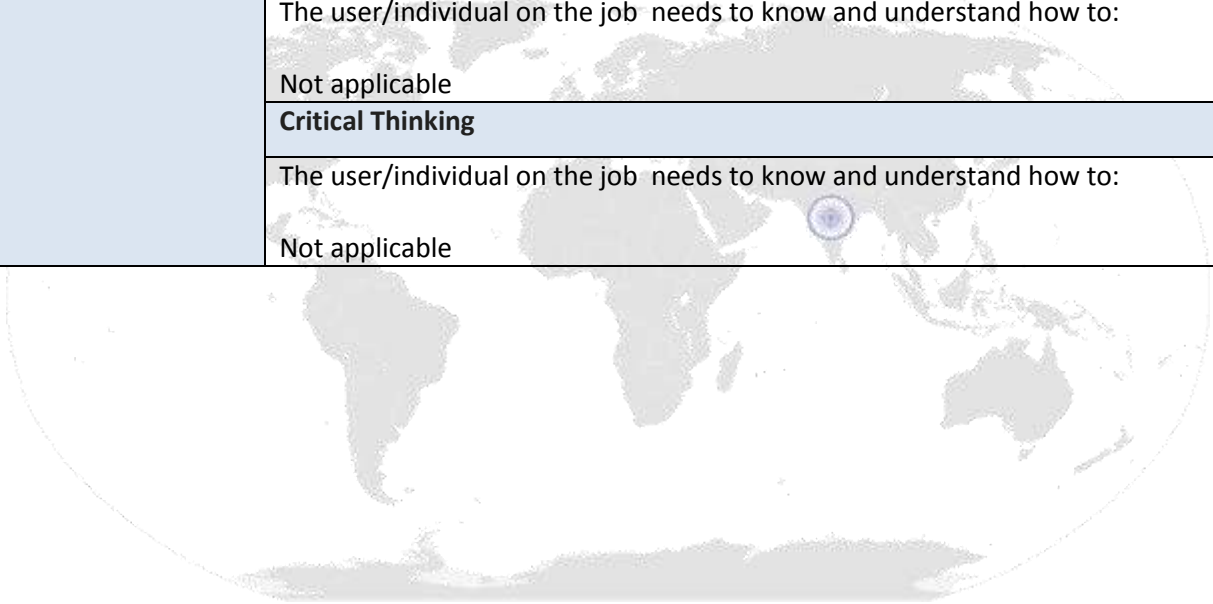
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| Unit Code | HSS/ N 9601 |
| Unit Title (Task) | Collate and Communicate Health Information |
| Description | This OS unit is about collating and communicating health information to community members, their family or others in response to queries or as part of health advice and counselling. This OS unit applies to all allied health professionals required to communicate health related information to patients, individuals, families and others |
| Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Communicating with individuals, patients, their family and others about health issues |
| Performance Criteria (PC) w.r.t. the Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Respond to queries and information needs of all individuals</p> <p>PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics</p> <p>PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them</p> <p>PC4. Utilise all training and information at one's disposal to provide relevant information to the individual</p> <p>PC5. Confirm that the needs of the individual have been met</p> <p>PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality</p> <p>PC7. Respect the individual's need for privacy</p> <p>PC8. Maintain any records required at the end of the interaction</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Guidelines on communicating with individuals</p> <p>KA2. Guidelines on maintaining confidentiality and respecting need for privacy</p> <p>KA3. Guidelines of the organisation/ health provider on communicating with individuals and patients</p> |

HSS/ N 9601: Collate and Communicate Health Information

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| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to communicate effectively</p> <p>KB2. When to ask for assistance when situations are beyond one’s competence and authority</p> <p>KB3. How to maintain confidentiality and to respect an individual’s need for privacy</p> <p>KB4. How to ensure that all information provided to individuals is from reliable sources</p> <p>KB5. How to handle stressful or risky situations when communicating with individuals</p> <p>KB6. Difficulties that can occur when communicating with individuals and family members in stressful situations and how to manage these</p> |
| Skills (S) (Optional) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Write at least one local/ official language used in the local community</p> <p>SA2. Write well enough to be classified as literate</p> <p>SA3. Maintain any records required after the interaction</p> |
| | Reading Skills |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA4. Read well enough to be classified as literate</p> <p>SA5. Read instructions and pamphlets provided as part of training</p> |
| | Oral Communication (Listening and Speaking skills) |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA6. Speak at least one local language</p> <p>SA7. Communicate effectively with all individuals</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions on information to be communicated based on needs of the individual and various regulations and guidelines</p> |
| | Plan and Organise |
| | <p>The user/individual on the job needs to know and understand:</p> <p style="text-align: center;">Not applicable</p> |

HSS/ N 9601: Collate and Communicate Health Information

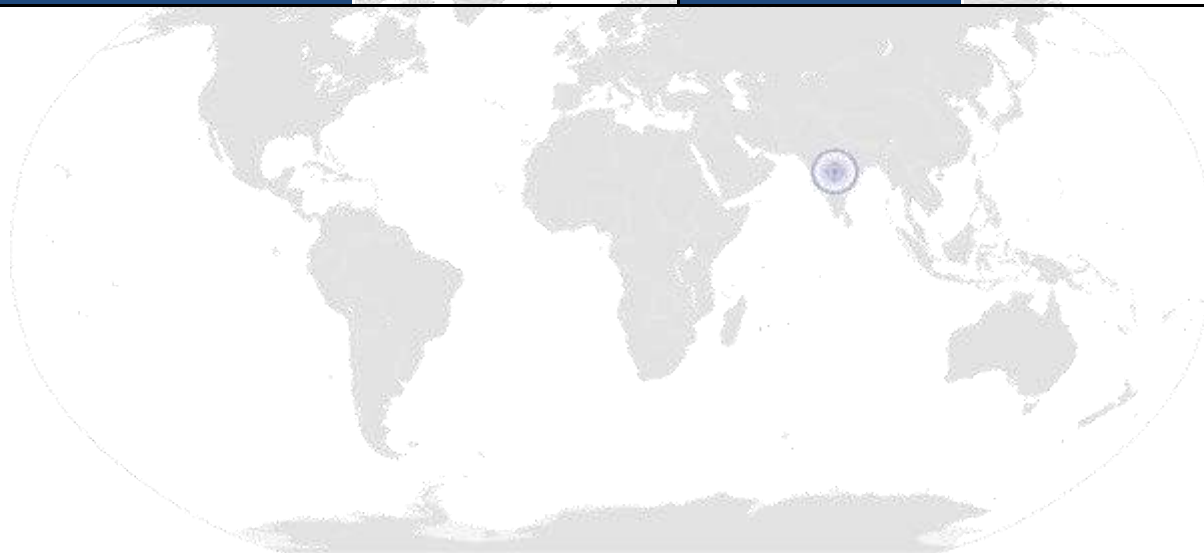
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| | Customer Centricity |
| | The user/individual on the job needs to know and understand how to: |
| | SB2. Be responsive to problems of the individuals |
| | SB3. Be available to guide, counsel and help individuals when required |
| | SB4. Be patient and non-judgemental at all times |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: |
| | SB5. Create work-around to overcome problems faced in carrying out roles and duties |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| Not applicable | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| Not applicable | |



HSS/ N 9601: Collate and Communicate Health Information

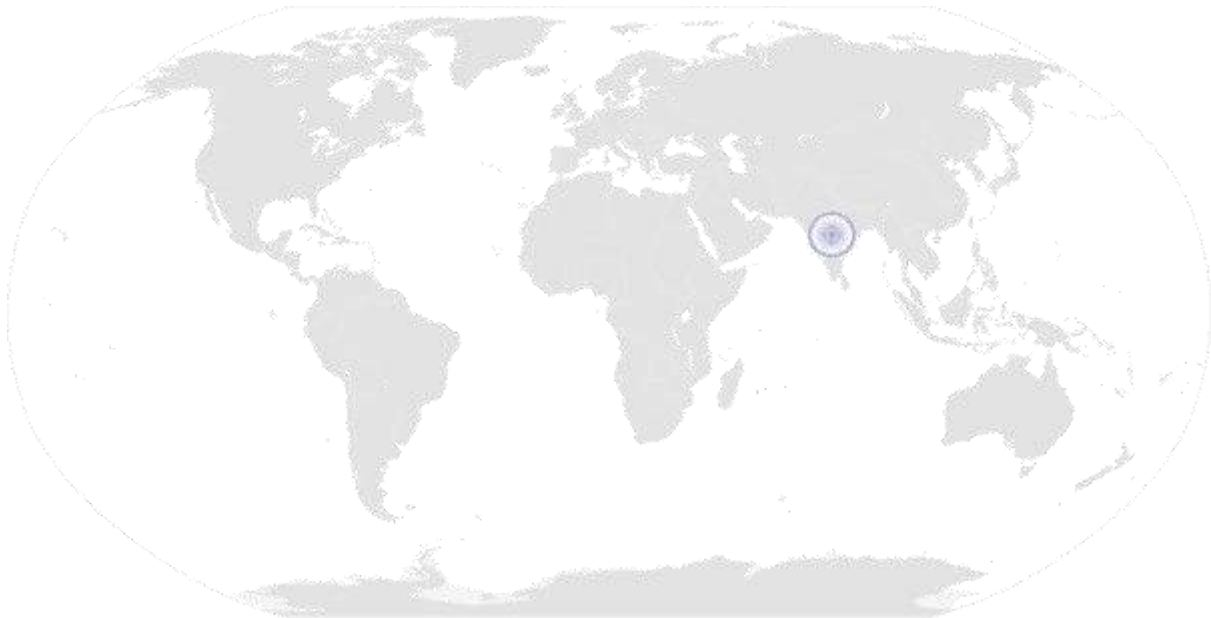
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| NOS Code | HSS/ N 9601 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9603: Act within the limits of one's competence and authority

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health Professional to recognise the boundaries of the role and responsibilities and working within the level of competence in accordance with legislation, protocols and guidelines

HSS/ N 9603: Act within the limits of one’s competence and authority

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| National Occupational Standard | Unit Code | HSS/ N 9603 |
| | Unit Title (Task) | Act within the limits of one’s competence and authority |
| | Description | <p>This OS unit is about recognising the boundaries of the role and responsibilities and working within the level of competence in accordance with legislation, protocols and guidelines</p> <p>This is applicable to all Allied Health Professionals working in an organised, regulated environment.</p> |
| | Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> • Acting within the limit of one’s competence and authority; <ul style="list-style-type: none"> ○ Knowing one’s job role ○ Knowing one’s job responsibility ○ Recognising the job role and responsibilities of co workers <p>Reference: ‘This National Occupational Standard is from the UK Skills for Health suite [SFHGEN63, Act within the limits of your competence and authority] It has been tailored to apply to healthcare in India and has been reproduced with their permission’.</p> |
| Performance Criteria (PC) wrt The Scope | | |
| Element | Performance Criteria | |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Adhere to legislation, protocols and guidelines relevant to one’s role and field of practice</p> <p>PC2. Work within organisational systems and requirements as appropriate to one’s role</p> <p>PC3. Recognise the boundary of one’s role and responsibility and seek supervision when situations are beyond one’s competence and authority</p> <p>PC4. Maintain competence within one’s role and field of practice</p> <p>PC5. Use relevant research based protocols and guidelines as evidence to inform one’s practice</p> <p>PC6. Promote and demonstrate good practice as an individual and as a team member at all times</p> <p>PC7. Identify and manage potential and actual risks to the quality and safety of practice</p> <p>PC8. Evaluate and reflect on the quality of one’s work and make continuing improvements</p> | |
| Knowledge and Understanding (K) | | |
| A. Organisational Context (Knowledge of the | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. The relevant legislation, standards, policies, and procedures followed in the</p> | |

HSS/ N 9603: Act within the limits of one's competence and authority

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| <p>Healthcare provider/ Organisation and its processes)</p> | <p>organisation KA2. The medical procedures and functioning of required medical equipment KA3. Role and importance of assisting other healthcare providers in delivering care</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. The boundaries of one's role and responsibilities and other team members KB2. The reasons for working within the limits of one's competence and authority KB3. The importance of personally promoting and demonstrating good practice KB4. The legislation, protocols and guidelines effecting one's work KB5. The organisational systems and requirements relevant to one's role KB6. The sources of information that can be accessed to maintain an awareness of research and developments in one's area of work KB7. The difference between direct and indirect supervision and autonomous practice, and which combination is most applicable in different circumstances KB8. The risks to quality and safety arising from:</p> <ul style="list-style-type: none"> ○ Working outside the boundaries of competence and authority ○ Not keeping up to date with best practice ○ Poor communication ○ Insufficient support ○ Lack of resources <p>KB9. The importance of individual or team compliance with legislation, protocols, and guidelines and organisational systems and requirements KB10. How to Report and minimise risks KB11. The principle of meeting the organisation's needs, and how this should enable one to recognise one's own limitations and when one should seek support from others KB12. The processes by which improvements to protocols/guidelines and organisational systems/requirements should be reported KB13. The procedure for accessing training, learning and development needs for oneself and/or others within one's organisation KB14. The actions that can be taken to ensure a current, clear and accurate understanding of roles and responsibilities is maintained, and how this affects the way one work as an individual or part of a team</p> |
| <p>Skills (S)</p> | |
| <p>A. Core Skills /Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Document reports, task lists, and schedules SA2. Prepare status and progress reports SA3. Record daily activities SA4. Update other co-workers</p> <p>Reading Skills</p> |

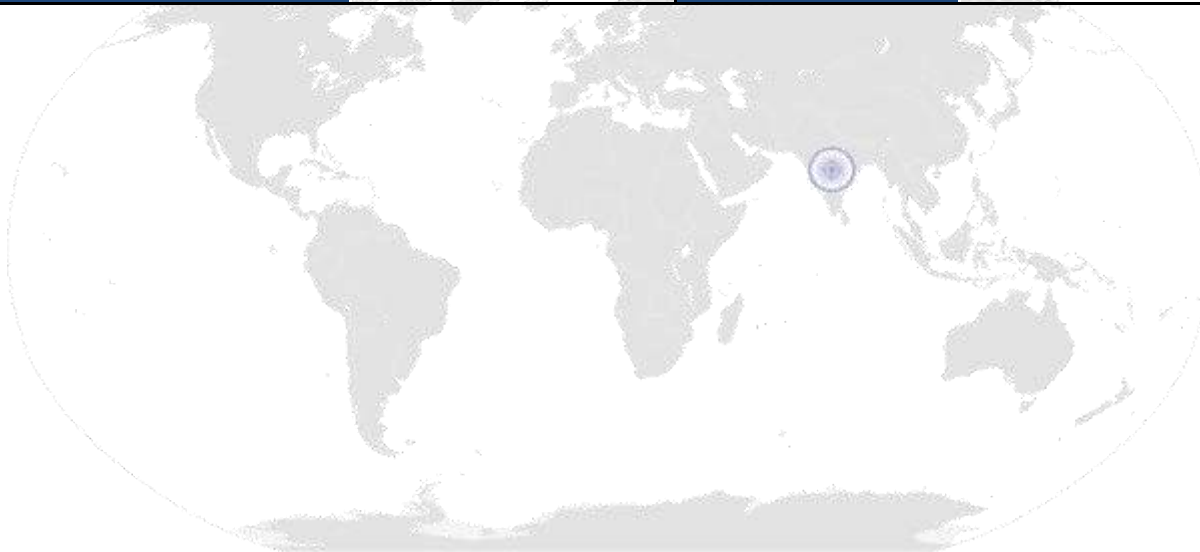
HSS/ N 9603: Act within the limits of one's competence and authority

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| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Read about changes in legislations and organisational policies SA6. Keep updated with the latest knowledge</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA7. Discuss task lists, schedules, and work-loads with co-workers SA8. Give clear instructions to patients and co-workers SA9. Keep patient informed about progress SA10. Avoid using jargon, slang or acronyms when communicating with a patient</p> |
| B. Professional Skills | Decision Making |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to the concerned area of work in relation to job role</p> |
| | Plan and Organise |
| | Not applicable |
| | Patient Centricity |
| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SB2. Communicate effectively with patients and their family, physicians, and other members of the health care team SB3. Be responsive and listen empathetically to establish rapport in a way that promotes openness on issues of concern SB4. Be sensitive to potential cultural differences SB5. Maintain patient confidentiality SB6. Respect the rights of the patient(s)</p> |
| | Problem Solving |
| | Not applicable |
| | Analytical Thinking |
| | Not applicable |
| Critical Thinking | |
| Not applicable | |

HSS/ N 9603: Act within the limits of one's competence and authority

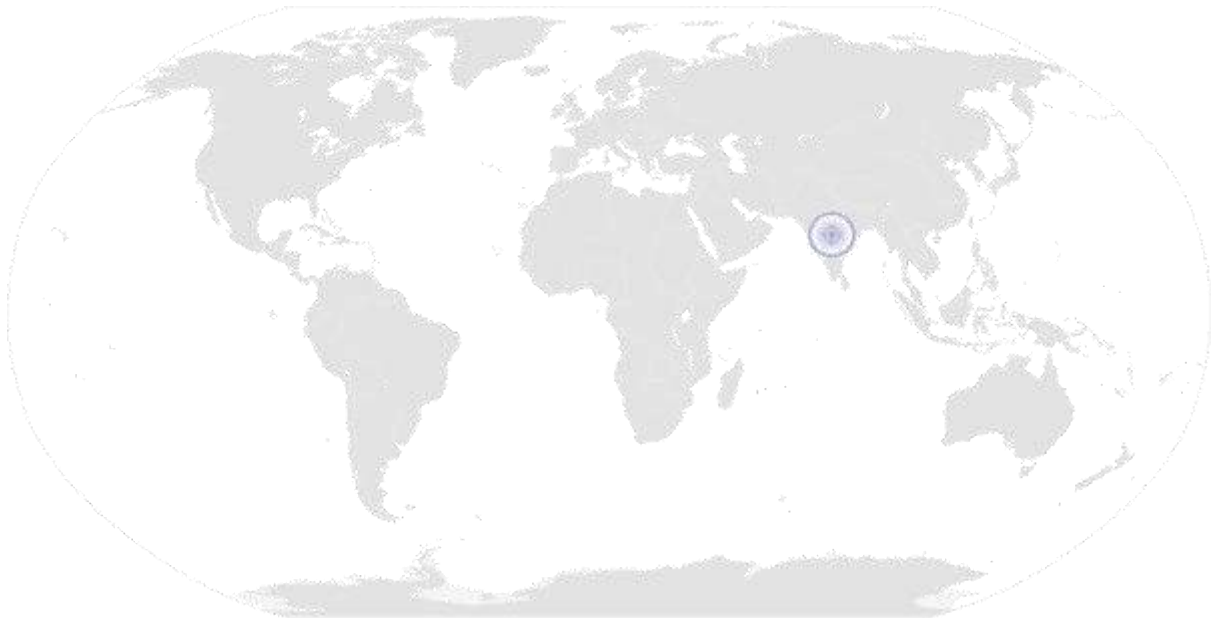
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| NOS Code | HSS/ N 9 03 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9604: Work effectively with others

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health Professional to work effectively with other people and integrate one's work the work of other people

HSS/ N 9604: Work effectively with others

National Occupational Standard

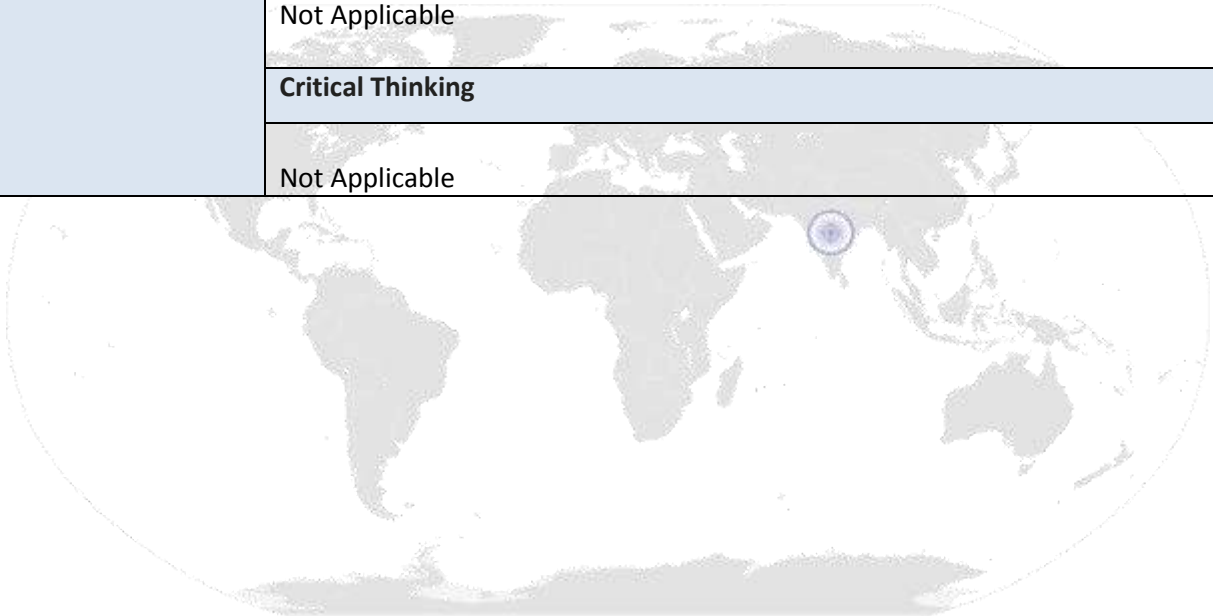
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| Unit Code | HSS/ N 9604 |
| Unit Title (Task) | Work effectively with others |
| Description | This OS unit is about working effectively with other people who can be part of the immediate team, organisation or external to the team or organisation This OS unit applies to all Allied health professionals working in a team or collaborative environment |
| Scope | This unit covers the following: <ul style="list-style-type: none"> Working with other people to meet requirements , Sharing information with others to enable efficient delivery of work , Communicating with other team members and people internal or external to the organisation |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | To be competent, the user/ individual on the job must be able to: <p>PC1. Communicate with other people clearly and effectively</p> <p>PC2. Integrate one’s work with other people’s work effectively</p> <p>PC3. Pass on essential information to other people on timely basis</p> <p>PC4. Work in a way that shows respect for other people</p> <p>PC5. Carry out any commitments made to other people</p> <p>PC6. Reason out the failure to fulfil commitment</p> <p>PC7. Identify any problems with team members and other people and take the initiative to solve these problems</p> <p>PC8. Follow the organisation’s policies and procedures</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | To be competent the user/ individual on the job needs to know and understand: <p>KA1. The people who make up the team and how they fit into the work of the organisation</p> <p>KA2. The responsibilities of the team and their importance to the organisation</p> <p>KA3. The business, mission, and objectives of the organisation</p> <p>KA4. Effective working relationships with the people external to the team, with which the individual works on a regular basis</p> <p>KA5. Procedures in the organisation to deal with conflict and poor working relationships</p> |
| B. Technical Knowledge | To be competent the user/ individual on the job needs to know and understand: <p>KB1. The importance of communicating clearly and effectively with other people and how to do so face-to-face, by telephone and in writing</p> <p>KB2. The essential information that needs to be shared with other people</p> <p>KB3. The importance of effective working relationships and how these can contribute towards effective working relationships on a day-to-day basis</p> <p>KB4. The importance of integrating ones work effectively with others</p> <p>KB5. The types of working relationships that help people to work well together and</p> |

HSS/ N 9604: Work effectively with others

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| | <p>the types of relationships that need to be avoided</p> <p>KB6. The types of opportunities an individual may seek out to improve relationships with others</p> <p>KB7. How to deal with difficult working relationships with other people to sort out problems</p> |
| Skills (S) | |
| A. Core Skills / Generic Skills | Writing Skills |
| | <p>To be competent, the user / individual on the job needs to know and understand how to:</p> <p>SA1. Communicate essential information in writing</p> <p>SA2. Write effective communications to share information with the team members and other people outside the team</p> |
| | Reading Skills |
| | <p>To be competent, the user/individual on the job needs to know and understand how to:</p> <p>SA3. Read and understand essential information</p> |
| | Oral Communication (Listening and speaking skills) |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA4. Communicate essential information to colleagues face-to-face or through telecommunications</p> <p>SA5. Question others appropriately in order to understand the nature of the request or compliant</p> |
| B. Professional Skills | Decision Making |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to work</p> |
| | Plan and Organise |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB2. Plan and organise files and documents</p> |
| | Patient Centricity |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB4. Be capable of being responsive, listen empathetically to establish rapport in a</p> |

HSS/ N 9604: Work effectively with others

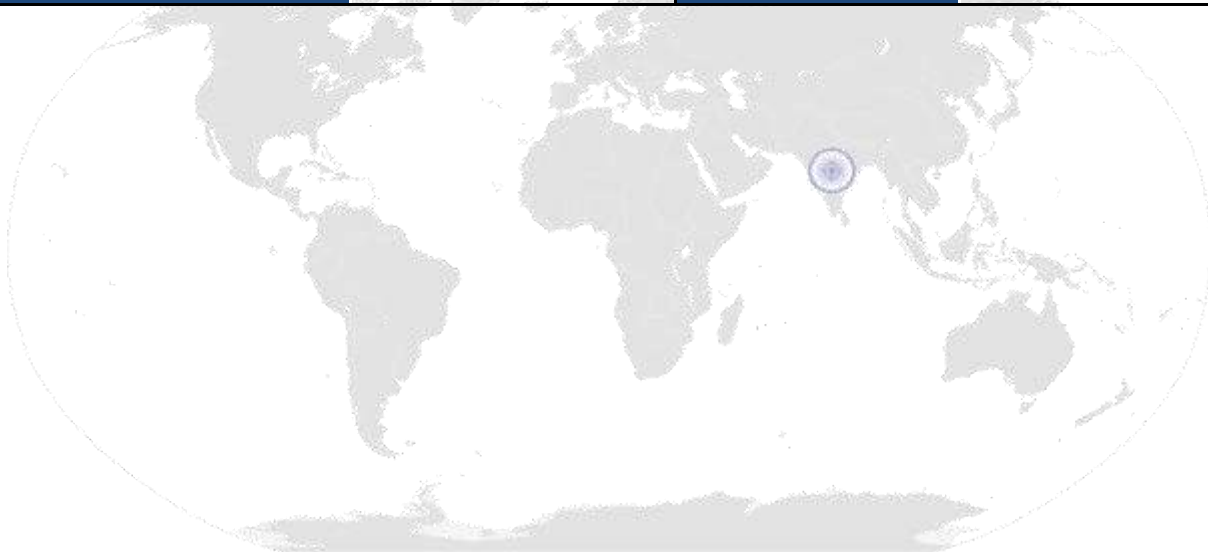
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| | <p>way that promotes openness on issues of concern</p> <p>SB5. Be sensitive to potential cultural differences</p> <p>SB6. Maintain patient confidentiality</p> <p>SB7. Respect the rights of the patient(s)</p> |
| | Problem Solving |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB8. Identify problems while working with others and devise effective solutions</p> |
| | Analytical Thinking |
| | Not Applicable |
| | Critical Thinking |
| Not Applicable | |



HSS/ N 9604: Work effectively with others

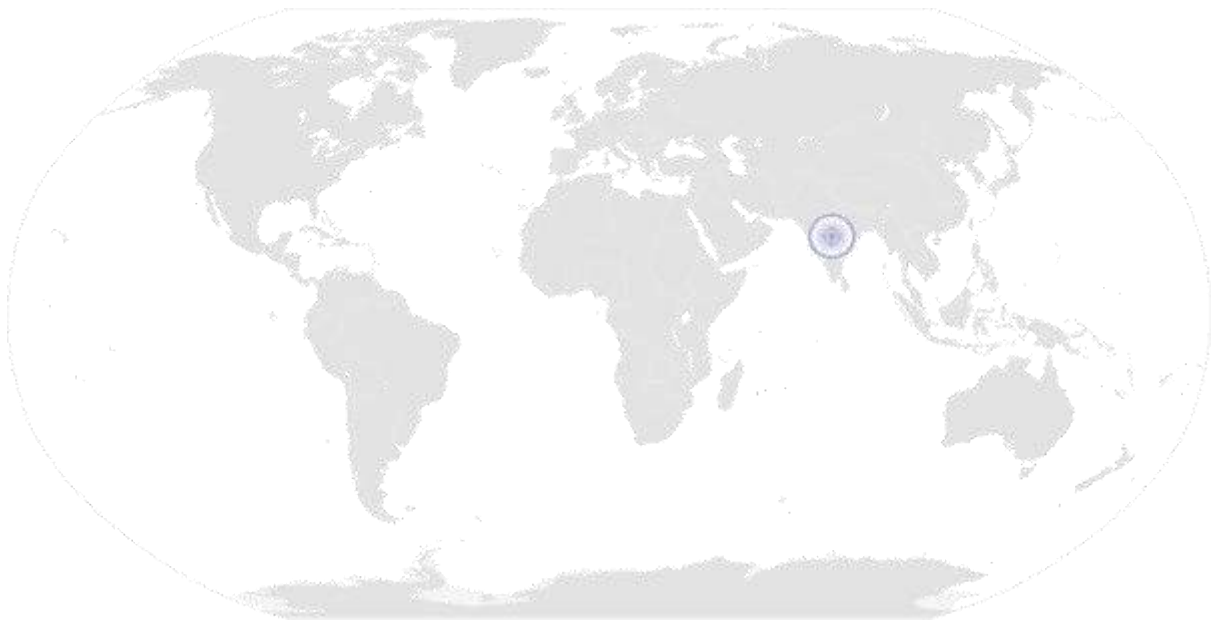
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| NOS Code | HSS/ N 9 04 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9605: Manage work to meet requirements

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health professional to plan and organise work to meet requirements

HSS/ N 9605: Manage work to meet requirements

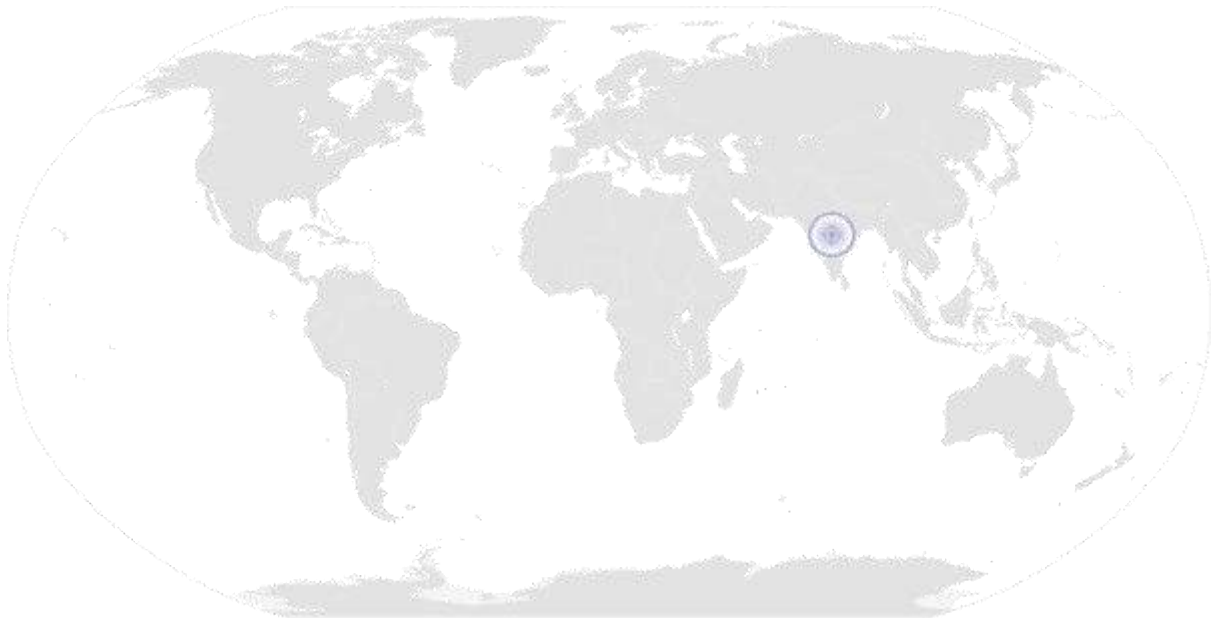
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| National Occupational Standard | Unit Code | HSS/ N 9605 |
| | Unit Title (Task) | Manage work to meet requirements |
| | Description | This OS unit is about planning and organising work and developing oneself further in the organisation This unit applies to all Allied Health professionals |
| | Scope | This unit covers the following: <ul style="list-style-type: none"> Establishing and managing requirements, Planning and organising work , Ensuring accomplishment of the requirements |
| | Performance Criteria (PC) wrt The Scope | |
| | Element | Performance Criteria |
| | | To be competent, the user/ individual on the job must be able to: <p>PC1. Clearly establish, agree, and record the work requirements</p> <p>PC2. Utilise time effectively</p> <p>PC3. Ensure his/her work meets the agreed requirements</p> <p>PC4. Treat confidential information correctly</p> <p>PC5. Work in line with the organisation’s procedures and policies and within the limits of his/her job role</p> |
| | Knowledge and Understanding (K) | |
| | A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | To be competent, the user / individual on the job needs to know and understand: <p>KA1. The relevant policies and procedures of the organisation</p> <p>KA2. The information that is considered confidential to the organisation</p> <p>KA3. The scope of work of the role</p> |
| | B. Technical Knowledge | To be competent, the user/individual on the job needs to know and understand: <p>KB1. The importance of asking the appropriate individual for help when required</p> <p>KB2. The importance of planning, prioritising and organising work</p> <p>KB3. The importance of clearly establishing work requirement</p> <p>KB4. The importance of being flexible in changing priorities when the importance and urgency comes into play</p> <p>KB5. How to make efficient use of time, and to avoid things that may prevent work deliverables from being expedited</p> <p>KB6. The importance of keeping the work area clean and tidy</p> <p>KB7. Areas of work that are not a priority and why it is necessary to keep one’s effort in that direction to a minimum</p> <p>KB8. To change work plans when necessary</p> |

HSS/ N 9605: Manage work to meet requirements

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| | KB9. The importance of confidentiality KB10. The importance in completing work on time |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | To be competent, the user/ individual on the job needs to know and understand how to: SA1. Report progress and results SA2. Record problems and resolutions |
| | Reading Skills |
| | To be competent, the user / individual on the job needs to know and understand how to: SA3. Read organisational policies and procedures SA4. Read work related documents and information shared by different sources |
| | Oral Communication (Listening and Speaking skills) |
| | To be competent, the user/ individual on the job needs to know and understand how to: SA5. Report progress and results SA6. Interact with other individuals SA7. Negotiate requirements and revised agreements for delivering them |
| B. Professional Skills | Decision Making |
| | To be competent, the user/ individual on the job needs to know and understand how to: SB1. Make decisions pertaining to the work |
| | Plan and Organise |
| | To be competent, the user/ individual on the job needs to know and understand how to: SB2. Plan and organise files and documents |
| | Patient Centricity |
| | To be competent, the user/ individual on the job needs to know and understand how to: SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team SB4. Be sensitive to potential cultural differences SB5. Maintain patient confidentiality SB6. Respect the rights of the patient(s) |
| | Problem Solving |

HSS/ N 9605: Manage work to meet requirements

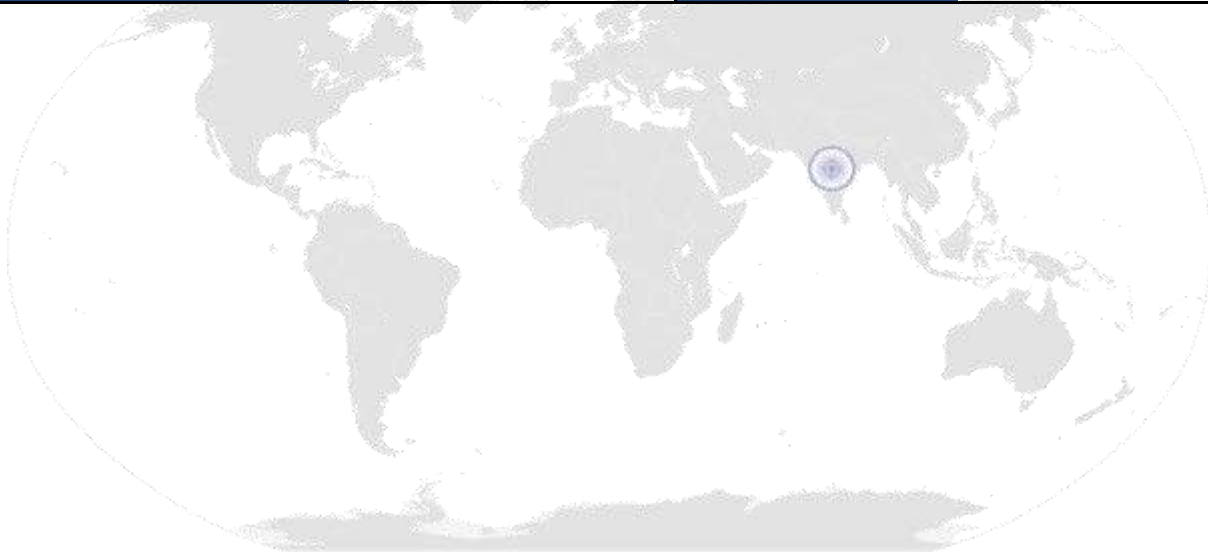
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| | To be competent, the user/ individual on the job needs to know and understand how to: SB7. Understand problems and suggest an optimum solution after evaluating possible solutions |
| | Analytical Thinking |
| | Not applicable |
| | Critical Thinking |
| | Not applicable |



HSS/ N 9605: Manage work to meet requirements

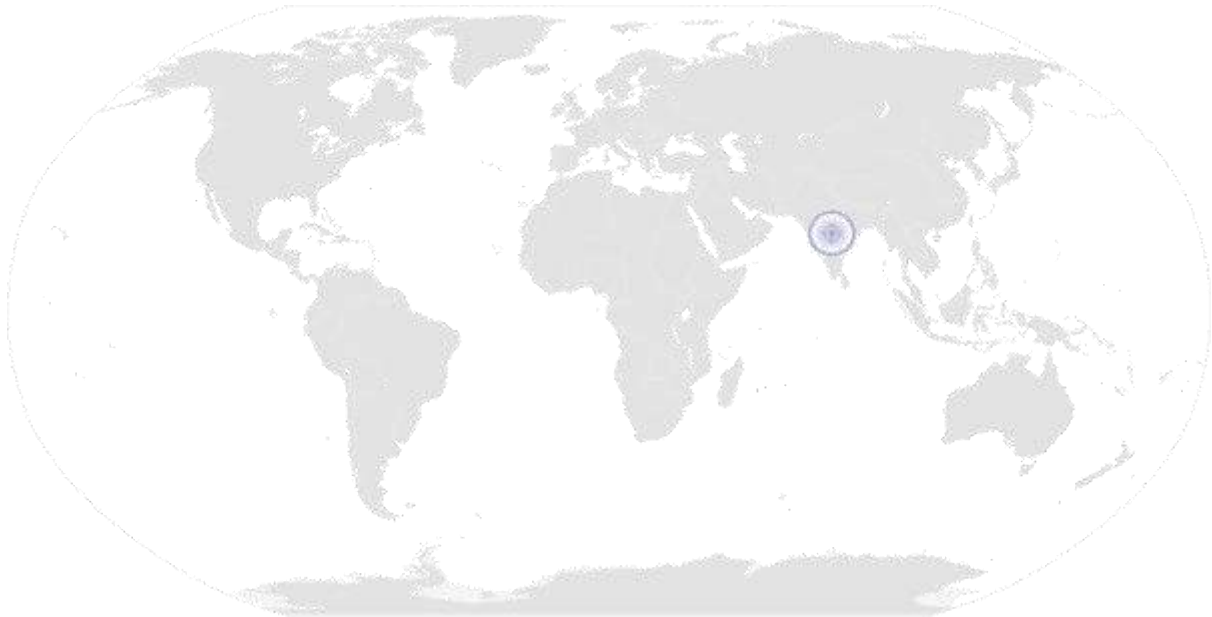
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| NOS Code | HSS/ N 9 05 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9606: Maintain a safe, healthy, and secure working environment

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health Professional to monitor the working environment, and making sure it meets health, safety and security requirements

HSS/ N 9606: Maintain a safe, healthy, and secure working environment

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| Unit Code | HSS/ N 9606 |
| Unit Title (Task) | Maintain a safe, healthy, and secure working environment |
| Description | <p>This OS unit is about monitoring the working environment and ensuring a safe, healthy, secure and effective working conditions</p> <p>This OS unit applies to all Allied Health professionals working within an organised workplace</p> |
| Scope | <p>This unit covers the following:</p> <ul style="list-style-type: none"> Complying the health, safety and security requirements and procedures for workplace , Handling any hazardous situation with safely, competently and within the limits of authority , Reporting any hazardous situation and breach in procedures to ensure a safe, healthy, secure working environment |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/ individual on the job must be able to:</p> <p>PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements</p> <p>PC2. Comply with health, safety and security procedures for the workplace</p> <p>PC3. Report any identified breaches in health, safety, and security procedures to the designated person</p> <p>PC4. Identify potential hazards and breaches of safe work practices</p> <p>PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority</p> <p>PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected</p> <p>PC7. Follow the organisation’s emergency procedures promptly, calmly, and efficiently</p> <p>PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person</p> <p>PC9. Complete any health and safety records legibly and accurately</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>To be competent, the user/ individual on the job needs to know and understand:</p> <p>KA1. The importance of health, safety, and security in the workplace</p> <p>KA2. The basic requirements of the health and safety and other legislations and regulations that apply to the workplace</p> <p>KA3. The person(s) responsible for maintaining healthy, safe, and secure workplace</p> <p>KA4. The relevant up-to-date information on health, safety, and security that applies to the workplace</p> |

HSS/ N 9606: Maintain a safe, healthy, and secure working environment

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| | <p>KA5. How to report the hazard</p> <p>KA6. The responsibilities of individual to maintain safe, healthy and secure workplace</p> |
| B. Technical Knowledge | <p>To be competent, the user / individual on the job needs to know and understand:</p> <p>KB1. Requirements of health, safety and security in workplace</p> <p>KB2. How to create safety records and maintaining them</p> <p>KB3. The importance of being alert to health, safety, and security hazards in the work environment</p> <p>KB4. The common health, safety, and security hazards that affect people working in an administrative role</p> <p>KB5. How to identify health, safety, and security hazards</p> <p>KB6. The importance of warning others about hazards and how to do so until the hazard is dealt with</p> |
| Skills (S) | |
| A. Generic Skills | Writing Skills |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA1. Report and record incidents</p> |
| | Reading Skills |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA2. Read and understand company policies and procedures</p> |
| | Oral Communication (Listening and speaking skills) |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA3. Clearly report hazards and incidents with the appropriate level of urgency</p> |
| B. Professional Skills | Decision Making |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions pertaining to the area of work</p> |
| | Plan and Organise |
| | <p>To be competent, the user / individual on the job needs to know and understand how to:</p> <p>SB2. Plan for safety of the work environment</p> |

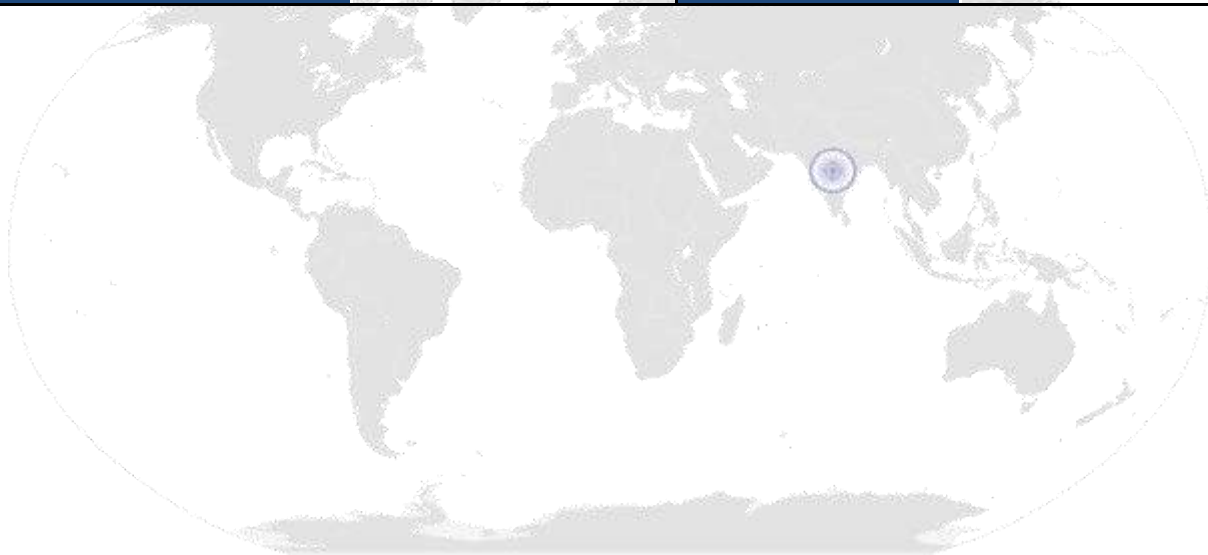
HSS/ N 9606: Maintain a safe, healthy, and secure working environment

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| | Patient Centricity |
| | To be competent, the user / individual on the job needs to know and understand: |
| | SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team |
| | SB4. Be capable of being responsive, listen empathetically to establish rapport in a way that promotes openness on issues of concern |
| | SB5. Be sensitive to potential cultural differences |
| | SB6. Maintain patient confidentiality |
| | SB7. Respect the rights of the patient(s) |
| | Problem Solving |
| | To be competent, the user/ individual on the job needs to know and understand how to: |
| | SB8. Identify hazards, evaluate possible solutions and suggest effective solutions |
| Analytical Thinking | |
| To be competent, the user needs to know and understand how to: | |
| SB9. Analyse the seriousness of hazards | |
| Critical Thinking | |
| To be competent, the user needs to know and understand how to: | |
| SB10. Analyse, evaluate and apply the information gathered from observation, experience, reasoning, or communication to act efficiently | |

HSS/ N 9606: Maintain a safe, healthy, and secure working environment

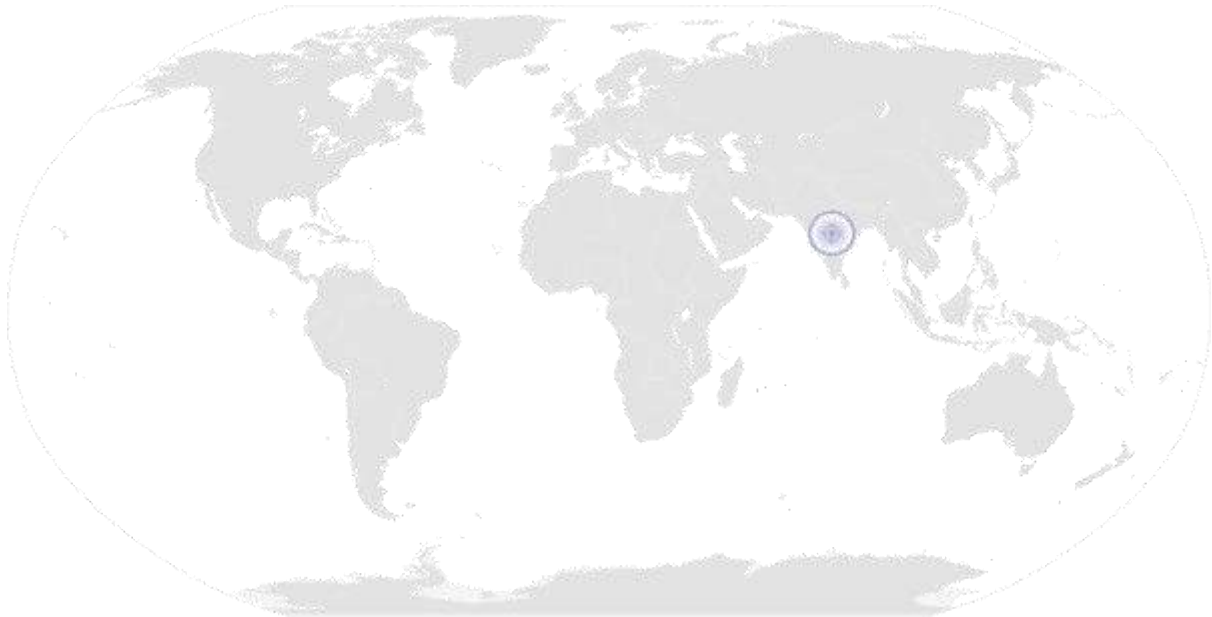
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| NOS Code | HSS/ N 9 0 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9607: Practice Code of conduct while performing duties

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health professional to practice code of conduct setup by the healthcare provider

HSS/ N 9607: Practice Code of conduct while performing duties

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| Unit Code | HSS/ N 9607 |
| Unit Title (Task) | Practice Code of conduct while performing duties |
| Description | <p>This OS unit is about following the rules, regulations and the code of conduct setup by the healthcare provider. The Allied health professional must adhere to the protocols and guidelines relevant to the field and practice.</p> <p>This OS unit applies to all Allied health professionals working in an organised environment and to whom specific regulations and codes of conduct apply.</p> |
| Scope | <p>This unit covers the following:</p> <ul style="list-style-type: none"> Recognising the guidelines and protocols relevant to the field and practice, Following the code of conduct as described by the healthcare provider, Demonstrating best practices while on the field. |
| Performance Criteria (PC) wrt The Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Adhere to protocols and guidelines relevant to the role and field of practice</p> <p>PC2. Work within organisational systems and requirements as appropriate to the role</p> <p>PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority</p> <p>PC4. Maintain competence within the role and field of practice</p> <p>PC5. Use protocols and guidelines relevant to the field of practice</p> <p>PC6. Promote and demonstrate good practice as an individual and as a team member at all times</p> <p>PC7. Identify and manage potential and actual risks to the quality and patient safety</p> <p>PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>To be competent, the user/ individual on the job needs to know and understand:</p> <p>KA1. Relevant legislation, standards, policies, and procedures followed in the hospital</p> <p>KA2. How to engage and interact with other providers in order to deliver quality and maintain continued care</p> <p>KA3. Personal hygiene measures and handling techniques</p> |
| B. Technical Knowledge | <p>To be competent, the user / individual on the job needs to know and understand:</p> <p>KB1. The limitations and scope of the role and responsibilities along with an</p> |

HSS/ N 9607: Practice Code of conduct while performing duties

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| | <p>understanding of roles and responsibilities of others</p> <p>KB2. The importance of working within the limits of one’s competence and authority</p> <p>KB3. The detrimental effects of non-compliance</p> <p>KB4. The importance of personal hygiene</p> <p>KB5. The importance of intercommunication skills</p> <p>KB6. The legislation, protocols and guidelines related to the role</p> <p>KB7. The organisational systems and requirements relevant to the role</p> <p>KB8. The sources of information and literature to maintain a constant access to upcoming research and changes in the field</p> <p>KB9. The difference between direct and indirect supervision and autonomous practice, and which combination is most applicable in different circumstances</p> <p>KB10. Implications to quality and safety arising from:</p> <ul style="list-style-type: none"> • Working outside the boundaries of competence and authority • not keeping up to date with best practice • poor communication • insufficient support • lack of resources <p>KB11. The organisational structure and the various processes related to reporting and monitoring</p> <p>KB12. The procedure for accessing training, learning and development needs</p> |
| Skills (S) | |
| A. Core Skills /Generic Skills | Writing Skills |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA1. Document reports, task lists, and schedules with co-workers</p> <p>SA2. Prepare status and progress reports related to patient care</p> <p>SA3. Update the physician and the other co-workers</p> |
| | Reading Skills |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA4. Read about procedures, regulations and guidelines related to the organisation and the profession</p> <p>SA5. Keep updated with the latest knowledge by reading internal communications and legal framework changes related to roles and responsibilities</p> |
| | Oral Communication (Listening and speaking skills) |

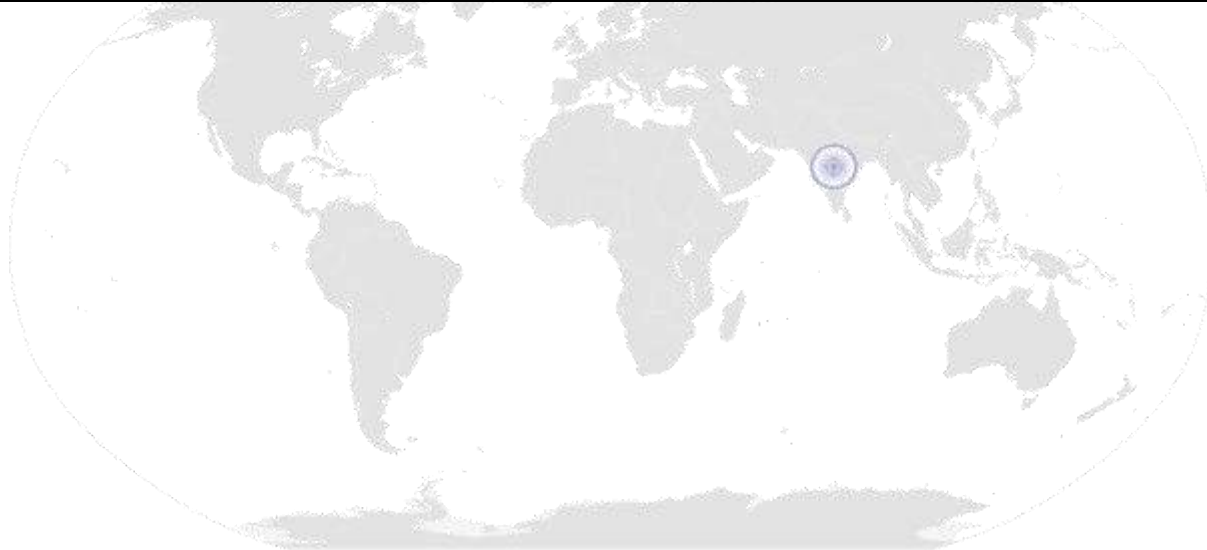
HSS/ N 9607: Practice Code of conduct while performing duties

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| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SA6. Interact with patients</p> <p>SA7. Give clear instructions to patients, patients relatives and other healthcare providers</p> <p>SA8. Avoid using jargon, slang or acronyms, while communicating with a patient</p> |
| <p>B. Professional Skills</p> | <p>Decision Making</p> |
| | <p>To be competent, the user/ individual on the job needs to know and understand how to:</p> <p>SB1. Make decisions based on applicable regulations and codes of conduct when possible conflicts arise</p> <p>SB2. Act decisively by balancing protocols and work at hand</p> |
| | <p>Plan and Organise</p> |
| | <p>Not applicable</p> |
| | <p>Patient Centricity</p> |
| | <p>To be competent, the user / individual on the job needs to know and understand how to:</p> <p>SB3. Communicate effectively with patients and their family, physicians, and other members of the health care team</p> <p>SB4. Maintain patient confidentiality</p> <p>SB5. Respect the rights of the patient(s)</p> <p>SB6. Respond patients' queries and concerns</p> <p>SB7. Maintain personal hygiene to enhance patient safety</p> |
| | <p>Problem Solving</p> |
| | <p>Not applicable</p> |
| | <p>Analytical Thinking</p> |
| | <p>Not applicable</p> |
| <p>Critical Thinking</p> | |
| <p>Not applicable</p> | |

HSS/ N 9607: Practice Code of conduct while performing duties

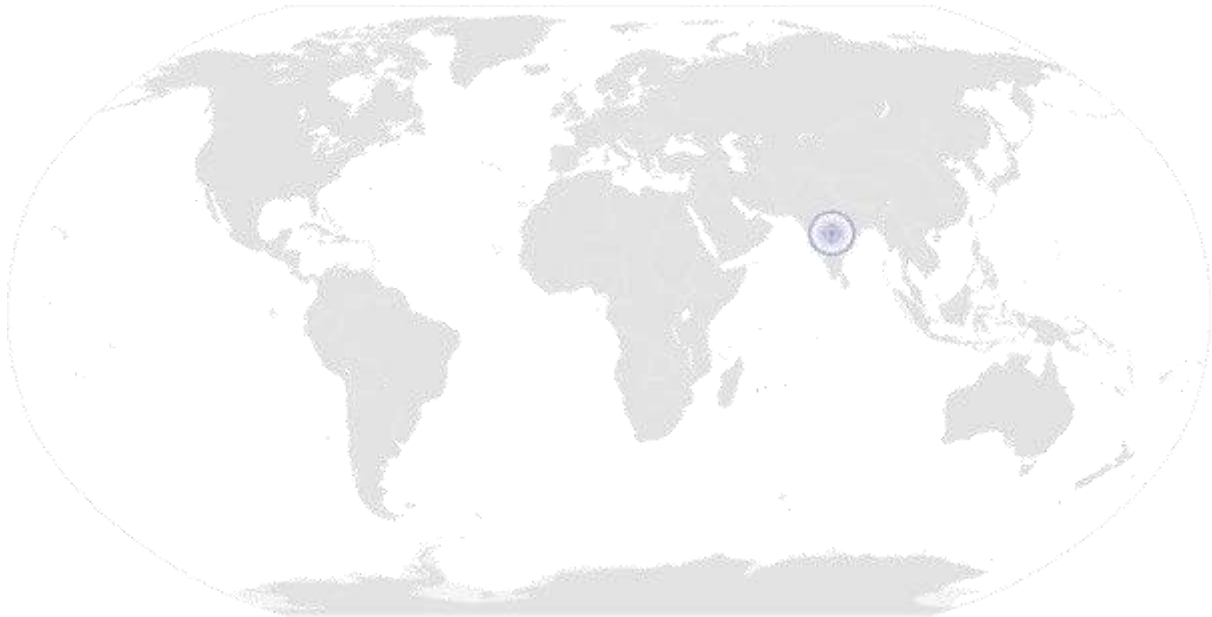
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| NOS Code | HSS/ N 9 07 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9609: Follow biomedical waste disposal protocols

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding and skills required of an Allied Health professional to manage biomedical waste

HSS/ N 9609: Follow biomedical waste disposal protocols

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| Unit Code | HSS/ N 9609 |
| Unit Title (Task) | Follow biomedical waste disposal protocols |
| Description | This OS unit is about the safe handling and management of health care waste. This unit applies to all Allied Health professionals. |
| Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Classification of the Waste Generated, Segregation of Biomedical Waste , Proper collection and storage of Waste <p>Reference : ‘The content of this National Occupational Standard is drawn from the UK Skills for Health NOS [SFHCHS212 Disposal of clinical and non-clinical waste within healthcare and SFHCHS213 Implement an audit trail for managing waste within healthcare]’</p> |
| Performance Criteria (PC) w.r.t. the Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type</p> <p>PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste</p> <p>PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements</p> <p>PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste</p> <p>PC5. Check the accuracy of the labelling that identifies the type and content of waste</p> <p>PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal</p> <p>PC7. Check the waste has undergone the required processes to make it safe for transport and disposal</p> <p>PC8. Transport the waste to the disposal site, taking into consideration its associated risks</p> <p>PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures</p> <p>PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context | The user/individual on the job needs to know and understand: |

HSS/ N 9609: Follow biomedical waste disposal protocols

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| <p>(Knowledge of the Healthcare provider/ Organisation and its processes)</p> | <p>KA1. Basic requirements of the health and safety and other legislations and regulations that apply to the organisation</p> <p>KA2. Person(s) responsible for health, safety, and security in the organisation</p> <p>KA3. Relevant up-to-date information on health, safety, and security that applies to the organisation</p> <p>KA4. Organisation’s emergency procedures and responsibilities for handling hazardous situations</p> |
| <p>B. Technical Knowledge</p> | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. How to categorise waste according to national, local and organisational guidelines</p> <p>KB2. The appropriate approved disposal routes for waste</p> <p>KB3. The appropriate containment or dismantling requirements for waste and how to make the waste safe for disposal</p> <p>KB4. The importance to adhere to the organisational and national waste management principles and procedures</p> <p>KB5. The hazards and risks associated with the disposal and the importance of risk assessments and how to provide these</p> <p>KB6. The personal protective equipment required to manage the different types of waste generated by different work activities</p> <p>KB7. The importance of working in a safe manner when carrying out procedures for biomedical waste management in line with local and national policies and legislation</p> <p>KB8. The required actions and reporting procedures for any accidents, spillages and contamination involving waste</p> <p>KB9. The requirements of the relevant external agencies involved in the transport and receipt of your waste</p> <p>KB10. The importance of segregating different types of waste and how to do this</p> <p>KB11. The safe methods of storage and maintaining security of waste and the permitted accumulation times</p> <p>KB12. The methods for transporting and monitoring waste disposal and the appropriateness of each method to a given scenario</p> <p>KB13. How to report any problems or delays in waste collection and where to seek advice and guidance</p> <p>KB14. The importance of the organisation monitoring and obtaining an assessment of the impact the waste has on the environment</p> <p>KB15. The current national legislation, guidelines, local policies and protocols which affect work practice</p> <p>KB16. The policies and guidance that clarify your scope of practice, accountabilities and the working relationship between yourself and others</p> |
| <p>Skills (S) (Optional)</p> | |
| <p>A. Core Skills/ Generic Skills</p> | <p>Writing Skills</p> <p>The user/ individual on the job needs to know and understand how to:</p> <p>SA1. Report and record incidents</p> |

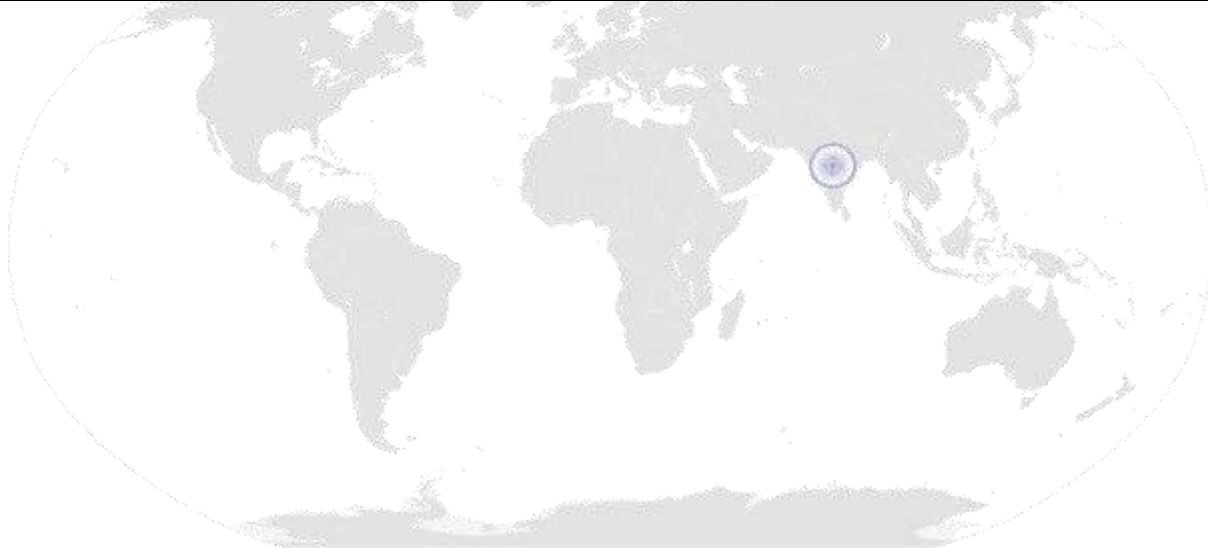
HSS/ N 9609: Follow biomedical waste disposal protocols

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| | Reading Skills |
| | The user/individual on the job needs to know and understand how to: SA2. Read and understand company policies and procedures for managing biomedical waste |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: SA3. Report hazards and incidents clearly with the appropriate level of urgency |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to the area of work SB2. Exhibit commitment to the organisation and exert effort and perseverance |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand how to: SB3. Organise files and documents SB4. Plan for safety of the work environment SB5. Recommend and implement plan of action |
| | Patient Centricity |
| | The user/individual on the job needs to know and understand: SB6. How to make exceptional effort to keep the environment and work place clean |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: SB7. Identify hazards and suggest effective solutions to identified problems of waste management |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: SB8. Analyse the seriousness of hazards and proper waste management |
| | Critical Thinking |
| | The user/individual on the job needs to know and understand how to: SB9. Evaluate opportunities to improve health, safety and security SB10. Show understanding and empathy for others |

HSS/ N 9609: Follow biomedical waste disposal protocols

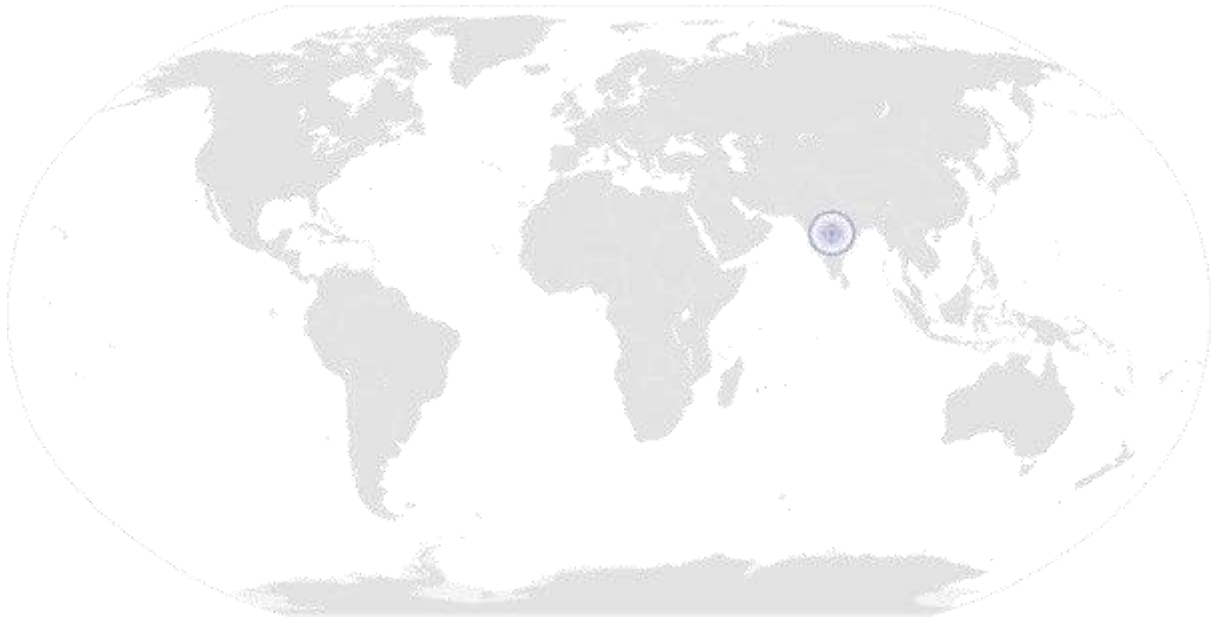
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| NOS Code | HSS/ N 9 09 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9610: Follow infection control policies and procedures

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health professional to comply with infection control policies and procedures.

HSS/ N 9610: Follow infection control policies and procedures

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| Unit Code | HSS/ N 9610 |
| Unit Title (Task) | Follow infection control policies and procedures |
| Description | <p>This OS unit is about complying with infection control policies and procedures. It is applicable to workers who are responsible for workplace procedures to maintain infection control.</p> <p>This unit applies to all Allied Health professionals.</p> |
| Scope | <p>This unit/task covers the following:</p> <ul style="list-style-type: none"> Complying with an effective infection control strategy with an effective infection control strategy that ensures the safety of the patient (or end-user of health-related products/services) , Maintaining personal protection and preventing the transmission of infections from person to person |
| Performance Criteria (PC) w.r.t. the Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Perform the standard precautions to prevent the spread of infection in accordance with organisation requirements</p> <p>PC2. Perform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection</p> <p>PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter</p> <p>PC4. Identify infection risks and implement an appropriate response within own role and responsibility</p> <p>PC5. Document and report activities and tasks that put patients and/or other workers at risk</p> <p>PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization</p> <p>PC7. Follow procedures for risk control and risk containment for specific risks</p> <p>PC8. Follow protocols for care following exposure to blood or other body fluids as required</p> <p>PC9. Place appropriate signs when and where appropriate</p> <p>PC10. Remove spills in accordance with the policies and procedures of the organization</p> <p>PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination</p> <p>PC12. Follow hand washing procedures</p> <p>PC13. Implement hand care procedures</p> <p>PC14. Cover cuts and abrasions with water-proof dressings and change as necessary</p> <p>PC15. Wear personal protective clothing and equipment that complies with Indian</p> |

HSS/ N 9610: Follow infection control policies and procedures

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| | <p>Standards, and is appropriate for the intended use</p> <p>PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact</p> <p>PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work</p> <p>PC18. Confine records, materials and medicaments to a well-designated clean zone</p> <p>PC19. Confine contaminated instruments and equipment to a well-designated contaminated zone</p> <p>PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste</p> <p>PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified</p> <p>PC22. Store clinical or related waste in an area that is accessible only to authorised persons</p> <p>PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release</p> <p>PC24. Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements</p> <p>PC25. Wear personal protective clothing and equipment during cleaning procedures</p> <p>PC26. Remove all dust, dirt and physical debris from work surfaces</p> <p>PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled</p> <p>PC28. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilisation protocols</p> <p>PC29. Dry all work surfaces before and after use</p> <p>PC30. Replace surface covers where applicable</p> <p>PC31. Maintain and store cleaning equipment</p> |
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Knowledge and Understanding (K)

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| A. Organisational Context (Knowledge of the Healthcare provider/ Organisation and its processes) | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. The organisation's infection control policies and procedures</p> <p>KA2. Organisation requirements relating to immunisation, where applicable</p> <p>KA3. Standard precautions</p> <p>KA4. Good personal hygiene practice including hand care</p> |
| B. Technical Knowledge | <p>The user/individual on the job needs to know and understand:</p> <p>KB1. Additional precautions</p> <p>KB2. Aspects of infectious diseases including: - opportunistic organisms - pathogens</p> <p>KB3. Basic microbiology including:</p> |

HSS/ N 9610: Follow infection control policies and procedures

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| | <ul style="list-style-type: none"> - bacteria and bacterial spores - fungi - viruses <p>KB4. How to clean and sterile techniques</p> <p>KB5. The path of disease transmission:</p> <ul style="list-style-type: none"> - paths of transmission including direct contact and penetrating injuries - risk of acquisition - sources of infecting microorganisms including persons who are carriers, in the incubation phase of the disease or those who are acutely ill <p>KB6. Effective hand hygiene:</p> <ul style="list-style-type: none"> - procedures for routine hand wash - procedures for surgical hand wash - when hands must be washed <p>KB7. Good personal hygiene practice including hand care</p> <p>KB8. Identification and management of infectious risks in the workplace</p> <p>KB9. How to use personal protective equipment such as:</p> <ul style="list-style-type: none"> - guidelines for glove use - guidelines for wearing gowns and waterproof aprons - guidelines for wearing masks as required - guidelines for wearing protective glasses <p>KB10. Susceptible hosts including persons who are immune suppressed, have chronic diseases such as diabetes and the very young or very old</p> <p>KB11. Surface cleaning:</p> <ul style="list-style-type: none"> - cleaning procedures at the start and end of the day - managing a blood or body fluid spill - routine surface cleaning <p>KB12. Sharps handling and disposal techniques</p> <p>KB13. The following:</p> <ul style="list-style-type: none"> - Follow infection control guidelines - Identify and respond to infection risks - Maintain personal hygiene - Use personal protective equipment - Limit contamination - Handle, package, label, store transport and dispose of clinical and other waste - Clean environmental surfaces |
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Skills (S) (Optional)

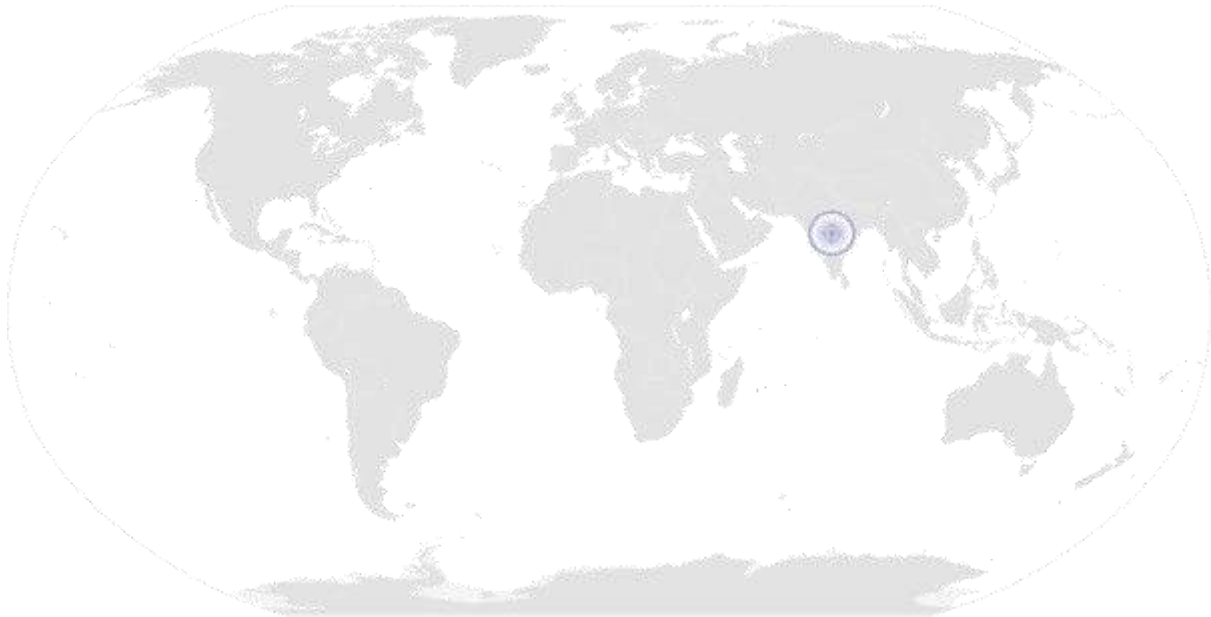
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| A. Core Skills/ Generic Skills | Writing Skills |
| | The user/ individual on the job needs to know and understand how to: |
| | <p>SA1. Consistently apply hand washing, personal hygiene and personal protection protocols</p> <p>SA2. Consistently apply clean and sterile techniques</p> <p>SA3. Consistently apply protocols to limit contamination</p> |
| | Reading Skills |

HSS/ N 9610: Follow infection control policies and procedures

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| | <p>The user/individual on the job needs to know and understand how to:</p> <p>SA4. Follow instructions as specified in the protocols</p> |
| | <p>Oral Communication (Listening and Speaking skills)</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SA5. Listen patiently SA6. Provide feedback (verbal and non-verbal) to encourage smooth flow of information</p> |
| B. Professional Skills | <p>Decision Making</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB1. Take into account opportunities to address waste minimisation, environmental responsibility and sustainable practice issues SB2. Apply additional precautions when standard precautions are not sufficient</p> |
| | <p>Plan and Organise</p> <p>The user/individual on the job needs to:</p> <p>SB3. Consistently ensure instruments used for invasive procedures are sterile at time of use (where appropriate) SB4. Consistently follow the procedure for washing and drying hands SB5. Consistently limit contamination SB6. Consistently maintain clean surfaces and manage blood and body fluid spills</p> |
| | <p>Patient Centricity</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB7. Be a good listener and be sensitive to patient SB8. Avoid unwanted and unnecessary communication with patients SB9. Maintain eye contact and non-verbal communication</p> |
| | <p>Problem Solving</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB10. Communicate only facts and not opinions SB11. Give feedback when required</p> |
| | <p>Analytical Thinking</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB12. Coordinate required processes effectively</p> |
| | <p>Critical Thinking</p> <p>The user/individual on the job needs to know and understand how to:</p> <p>SB13. Apply, analyse, and evaluate the information gathered from observation,</p> |

HSS/ N 9610: Follow infection control policies and procedures

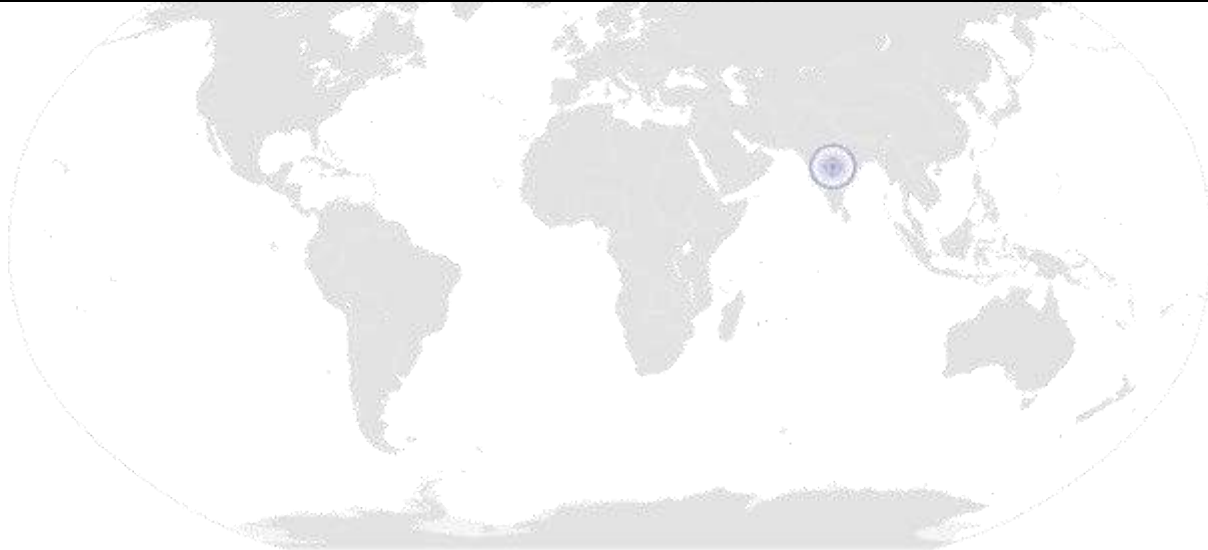
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| | experience, reasoning, or communication, as a guide to belief and action SB14. Take into account opportunities to address waste minimisation, environmental responsibility and sustainable practice issues |
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HSS/ N 9610: Follow infection control policies and procedures

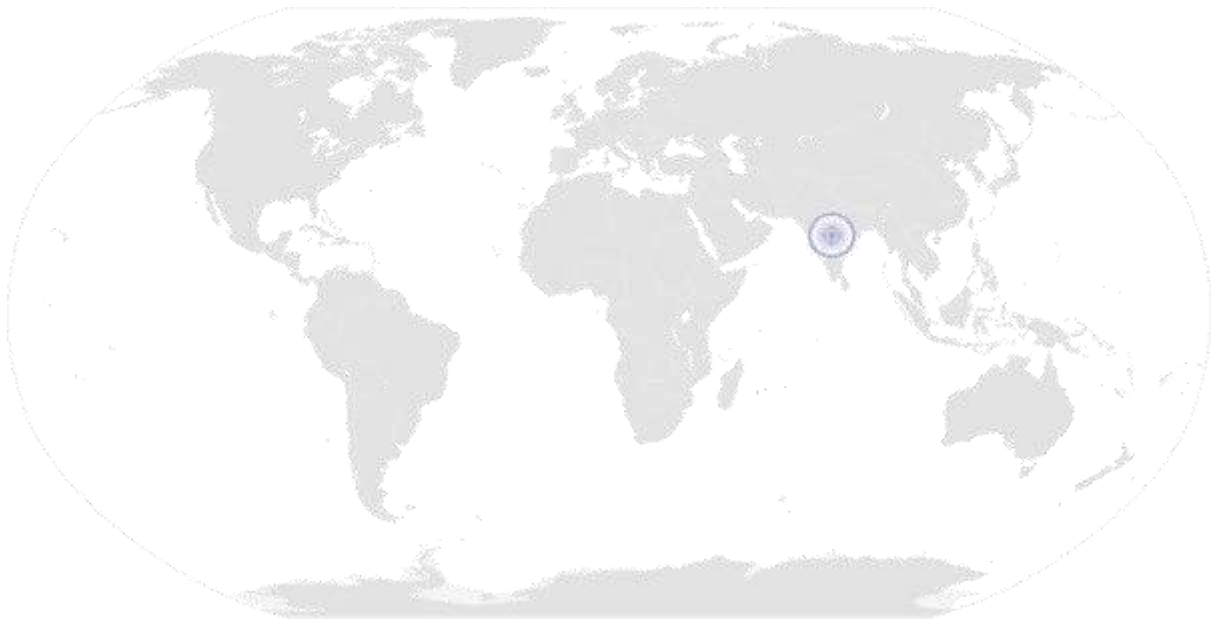
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| NOS Code | HSS/ N 9 10 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



HSS/ N 9611: Monitor and assure quality

National Occupational Standards



Overview

This Occupational Standard describes the knowledge, understanding, skills required of an Allied Health professional to monitor and assure quality

HSS/ N 9611: Monitor and assure quality

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| Unit Code | HSS/ N 9611 |
| Unit Title (Task) | Monitor and assure quality |
| Description | This OS unit is about Assuring quality in all procedures. This unit applies to all Allied Health professionals. |
| Scope | This unit/task covers the following: <ul style="list-style-type: none"> Monitor treatment process/outcomes , Identify problems in treatment process/outcomes, Solve treatment process/outcome problems , Attend class/read publications to continue industry education , Identify needs and expectations of patient/health care professionals |
| Performance Criteria (PC) w.r.t. the Scope | |
| Element | Performance Criteria |
| | <p>To be competent, the user/individual on the job must be able to:</p> <p>PC1. Conduct appropriate research and analysis</p> <p>PC2. Evaluate potential solutions thoroughly</p> <p>PC3. Participate in education programs which include current techniques, technology and trends pertaining to the dental industry</p> <p>PC4. Read Dental hygiene, dental and medical publications related to quality consistently and thoroughly</p> <p>PC5. Report any identified breaches in health, safety, and security procedures to the designated person</p> <p>PC6. Identify and correct any hazards that he/she can deal with safely, competently and within the limits of his/her authority</p> <p>PC7. Promptly and accurately report any hazards that he/she is not allowed to deal with to the relevant person and warn other people who may be affected</p> <p>PC8. Follow the organisation's emergency procedures promptly, calmly, and efficiently</p> <p>PC9. Identify and recommend opportunities for improving health, safety, and security to the designated person</p> <p>PC10. Complete any health and safety records legibly and accurately</p> |
| Knowledge and Understanding (K) | |
| A. Organisational Context (Knowledge of the Healthcare provider/ | <p>The user/individual on the job needs to know and understand:</p> <p>KA1. Basic requirements of the health and safety and other legislations and regulations that apply to the organisation</p> <p>KA2. Person(s) responsible for health, safety, and security in the organisation</p> <p>KA3. Relevant up-to-date information on health, safety, and security that applies</p> |

HSS/ N 9611: Monitor and assure quality

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| Organisation and its processes) | to the organisation KA4. Organisation’s emergency procedures and responsibilities for handling hazardous situations |
| B. Technical Knowledge | The user/individual on the job needs to know and understand how to: KB1. Evaluate treatment goals, process and outcomes KB2. Identify problems/deficiencies in dental hygiene treatment goals, processes and outcomes KB3. Accurately identify problems in dental hygiene care KB4. Conduct research KB5. Select and implement proper hygiene interventions KB6. Obtain informed consent KB7. Conduct an honest self-evaluation to identify personal and professional strengths and weaknesses KB8. Access and interpret medical, and scientific literature KB9. Apply human needs/motivational theory KB10. Provide thorough and efficient individualised care KB11. Employ methods to measure satisfaction |
| Skills (S) (Optional) | |
| A. Core Skills/ Generic Skills | Writing Skills |
| | The user/ individual on the job needs to know and understand how to: SA1. Report and record incidents |
| | Reading Skills |
| | The user/individual on the job needs to know and understand how to: SA2. Read and understand company policies and procedures |
| | Oral Communication (Listening and Speaking skills) |
| | The user/individual on the job needs to know and understand how to: SA3. Report hazards and incidents clearly with the appropriate level of urgency |
| B. Professional Skills | Decision Making |
| | The user/individual on the job needs to know and understand how to: SB1. Make decisions pertaining to the area of work SB2. Exhibit commitment to the organisation and exert effort and perseverance |
| | Plan and Organise |
| | The user/individual on the job needs to know and understand how to: SB3. Organise files and documents SB4. Plan for safety of the work environment SB1. Recommend and implement plan of action |

HSS/ N 9611: Monitor and assure quality

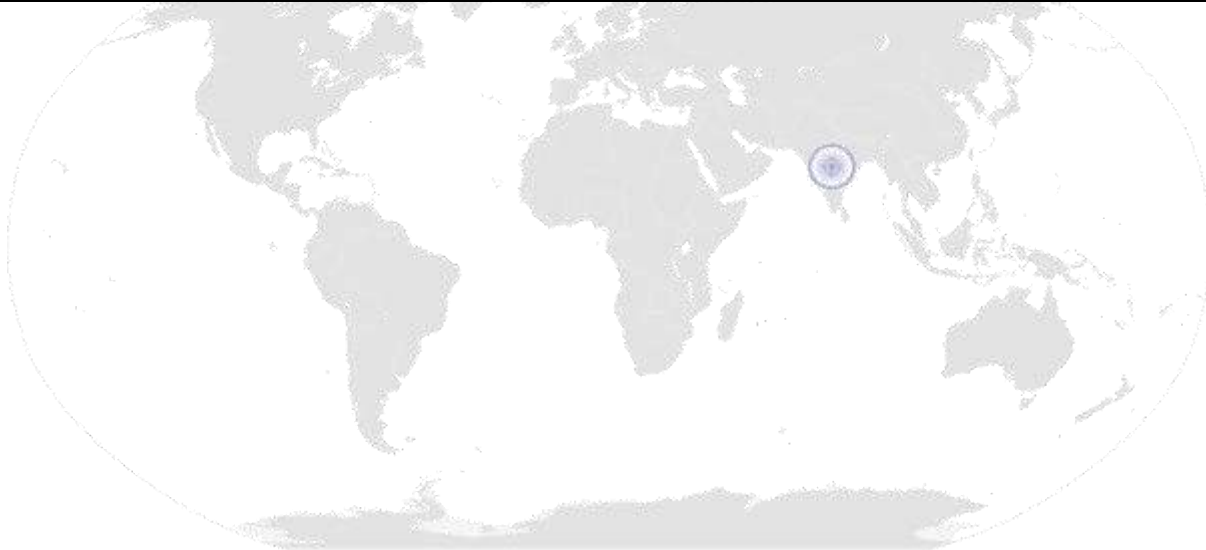
| | |
|---|--|
| | Patient Centricity |
| | The user/individual on the job needs to know and understand: |
| | SB2. How to make exceptional effort to meet patient needs and resolve conflict to patient satisfaction |
| | Problem Solving |
| | The user/individual on the job needs to know and understand how to: |
| | SB3. Identify hazards and suggest effective solutions to identified problems |
| | Analytical Thinking |
| | The user/individual on the job needs to know and understand how to: |
| SB4. Analyse the seriousness of hazards | |
| Critical Thinking | |
| The user/individual on the job needs to know and understand how to: | |
| SB5. Evaluate opportunities to improve health, safety and security | |
| SB6. Show understanding and empathy for others | |



HSS/ N 9611: Monitor and assure quality

NOS Version Control

| | | | |
|----------------------------|----------------------------------|-------------------------|----------|
| NOS Code | HSS/ N 9 11 | | |
| Credits(NSQF) | TBD | Version number | 1.0 |
| Industry | Health | Drafted on | 12/05/13 |
| Industry Sub-sector | Allied Healthcare and Paramedics | Last reviewed on | 22/05/13 |
| | | Next review date | 22/05/15 |



Assessment Form (To be filled by Assessor for Each Trainee)

| | | | | | | | |
|--|--------------------------------------|--|--|----------------|----------------------------------|--------------|--|
| Job Role | Emergency Medical technician (EMT-B) | Trainee Name | | UID No. | | Batch | |
| Qualification Pack | | Taining Partner | | Date | | | |
| Sector Skill Council | Healthcare | Name of Assessor | | | | | |
| Name & Signature of Representative & Stamp of Assessing Body: | | | | | | | |
| Skills Practical and Viva (80% weightage) | | | | | | | |
| | | Marks Alloted | | | Marks Awarded by Assessor | | |
| Grand Total-1 (Subject Domain) | | 400 | | | | | |
| Grand Total-2 (Compulsary NOS) | | 10 | | | | | |
| Grand Total-3 (Soft Skills and Comunication) | | 90 | | | | | |
| Grand Total-(Skills Practical and Viva) | | 500 | | | 0 | | |
| Passing Marks (80% of Max. Marks) | | 400 | | | PASS/FAIL | | |
| Theory (20% weightage) | | | | | | | |
| | | Marks Alloted | | | Marks Awarded by Assessor | | |
| Grand Total-1 (Subject Domain) | | 80 | | | 0 | | |
| Grand Total-2 (Soft Skills and Comunication) | | 20 | | | 0 | | |
| Grand Total-(Theory) | | 100 | | | 0 | | |
| Passing Marks (50% of Max. Marks) | | 50 | | | PASS/FAIL | | |
| Grand Total-(Skills Practical and Viva + Theory) | | 600 | | | 0 | | |
| Overall Result | | Criteria is to pass in both theory and practical individually. If fail in any one of them, then candidate is fail | | | PASS/FAIL | | |

Assessment Form (To be filled by Assessor for Each Trainee)

| Job Role | Emergency Medical technician (EMT-B) | Trainee Name | | UID No. | | Batch | | |
|---|--|-------------------------|---|------------------|----------------------------------|---------------------------|------------------|--------------------------|
| Qualification Pack | | Taining Partner | | Date | | | | |
| Sector Skill Council | Healthcare | Name of Assessor | | | | | | |
| Name & Signature of Representative & Stamp of Assessing Body: | | | | | | | | |
| Skills Practical and Viva (80% weightage) | | | | | | | | |
| | | | Marks Alloted | | Marks Awarded by Assessor | | | |
| Grand Total-1 (Subject Domain) | | | 400 | | | | | |
| Grand Total-2 (Compulsary NOS) | | | 10 | | | | | |
| Grand Total-3 (Soft Skills and Comunication) | | | 90 | | | | | |
| Grand Total-(Skills Practical and Viva) | | | 500 | | 0 | | | |
| Detailed Break Up of Marks | | | Skills Practical & Viva | | | | | |
| Subject Domain | | | Pick any 2 NOS each of 200 marks totalling 400 | | | | | |
| National Occupational Standards (NOS) | Performance Criteria (PC) | Total Marks (400) | Out Of | Marks Allocation | | Marks Awarded by Assessor | | Grand Total of Practical |
| | | | | Viva | Skills Practical | Viva | Skills Practical | |
| 1. HSS/ N 2301 (Respond to Emergency Calls) | PC1. Understand the emergency codes used in the hospital for emergency situations | 200 | 10 | 10 | 0 | | | |
| | PC2. Reflect professionalism through use of appropriate language while speaking to the dispatch team | | 4 | 0 | 4 | | | |
| | PC3. Use communication equipment such as mobile phones, radio communication equipment, megaphones and other equipment as required by the EMS provider | | 10 | 2 | 8 | | | |
| | PC4. Evaluate the situation of the patient(s) on the basis of the call with the dispatch centre | | 10 | 2 | 8 | | | |
| | PC5. Demonstrate teamwork while preparing for an emergency situation with a fellow EMT and/or a nurse | | 4 | 0 | 4 | | | |
| | PC6. Recognise the boundary of one's role and responsibility and seek supervision from the medical officer on duty when situations are beyond one's competence and authority | | 4 | 0 | 4 | | | |
| | PC7. Prepare for the emergency by practicing Body Substance Isolation (BSI). This includes putting on: | | | | | | | |
| | a. Hospital Gowns | | 10 | 0 | 10 | | | |
| | b. Medical Gloves | | 10 | 0 | 10 | | | |
| | c. Shoe Covers | | 10 | 0 | 10 | | | |
| | d. Surgical Masks | | 10 | 0 | 10 | | | |
| | e. Safety Glasses | | 10 | 0 | 10 | | | |
| | f. Helmets | | 10 | 0 | 10 | | | |
| | g. Reflective Clothing | | 10 | 0 | 10 | | | |
| PC8. Prepare the ambulance with the required medical equipment and supplies as per the medical emergency. A large selection of equipment and supplies specialised for Emergency Medical Services include diagnostic | 40 | 4 | 36 | | | | | |

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|---|--|------------|------------|-----------|------------|--|--|
| | o Asking the victim if they are able to feel their legs | | 10 | 2 | 8 | | |
| | o Observing the colour of toes to check for any circulation problems | | 10 | 2 | 8 | | |
| | PC10. Use appropriate equipment if required | | 10 | 2 | 8 | | |
| | Total | | 200 | 54 | 146 | | |
| 3. HSS/ N 2305 (Patient Triage based on the defined clinical criteria of severity of illness) | PC1. Have the expertise to quickly assess whether the patient requires immediate life-saving intervention or whether they could wait | 200 | 40 | 10 | 30 | | |
| | PC2. Know how to check all the vital signs | | 40 | 10 | 30 | | |
| | PC3. Identify a high-risk case | | 40 | 20 | 20 | | |
| | PC4. Assess the kind of resources the person will require. For e.g. The EMT should know the standard resources required for a person who comes to the emergency department for a similar ailment | | 20 | 5 | 15 | | |
| | PC5. Communicate clearly and assertively | | 3 | 0 | 3 | | |
| | PC6. Collaboratively be able to supervise/work collaboratively with other departments | | 4 | 0 | 4 | | |
| | PC7. Multitask without compromising on quality and accuracy of care provided | | 3 | 0 | 3 | | |
| | PC8. Use SALT method in day-to-day handling and START in mass casualty handling and disasters | | 50 | 10 | 40 | | |
| | Total | | 200 | 55 | 145 | | |
| 4. HSS/ N 2306 (Manage Cardiovascular Emergency) | PC1. Describe the structure and function of the cardiovascular system | | 4 | 4 | 0 | | |
| | PC2. Provide emergency medical care to a patient experiencing chest pain/discomfort | | 12 | 2 | 10 | | |
| | PC3. Identify the symptoms of hypertensive emergency | | 6 | 2 | 4 | | |
| | PC4. Identify the indications and contraindications for automated external defibrillation (AED) | | 8 | 2 | 6 | | |
| | PC5. Explain the impact of age and weight on defibrillation | | 8 | 2 | 6 | | |
| | PC6. Discuss the position of comfort for patients with various cardiac emergencies | | 4 | 4 | 0 | | |
| | PC7. Establish the relationship between airway management and the patient with cardiovascular compromise | | 10 | 2 | 8 | | |
| | PC8. Predict the relationship between the patient experiencing cardiovascular compromise and basic life support | | 8 | 2 | 6 | | |
| | PC9. Explain that not all chest pain patients result in cardiac arrest and do not need to be attached to an automated external defibrillator | | 4 | 2 | 2 | | |
| | PC10. Explain the importance of pre-hospital Advanced Life Support (ALS) intervention if it is available | | 4 | 4 | 0 | | |
| | PC11. Explain the importance of urgent transport to a facility with Advanced Life Support if it is not available in the pre-hospital setting | | 4 | 4 | 0 | | |
| | PC12. Explain the usage of aspirin and clopidogrel | | 6 | 2 | 4 | | |
| | PC13. Differentiate between the fully automated and the semi-automated defibrillator | | 4 | 4 | 0 | | |
| | PC14. Discuss the procedures that must be taken into consideration for standard operations of the various types of automated external defibrillators | | 8 | 2 | 6 | | |
| | PC15. Assure that the patient is pulseless and apnoeic when using the automated external defibrillator | | 6 | 2 | 4 | | |
| | PC16. Identify circumstances which may result in inappropriate shocks | | 6 | 2 | 4 | | |

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| PC17. Explain the considerations for interruption of CPR, when using the automated external defibrillator |
| PC18. Summarise the speed of operation of automated external defibrillation |
| PC19. Discuss the use of remote defibrillation through adhesive pads |
| PC20. Operate the automated external defibrillator |
| PC21. Discuss the standard of care that should be used to provide care to a patient with recurrent ventricular fibrillation and no available ACLS |
| PC22. Differentiate between the single rescuer and multi-rescuer care with an automated external defibrillator |
| PC23. Explain the reason for pulses not being checked between shocks with an automated external defibrillator |
| PC24. Identify the components and discuss the importance of post-resuscitation care |
| PC25. Explain the importance of frequent practice with the automated external defibrillator |
| PC26. Discuss the need to complete the Automated Defibrillator: Operator's Shift checklist |
| PC27. Explain the role medical direction plays in the use of automated external defibrillation |
| PC28. State the reasons why a case review should be completed following the use of the automated external defibrillator |
| PC29. Discuss the components that should be included in a case review |
| PC30. Discuss the goal of quality improvement in automated external defibrillation |
| PC31. Recognise the need for medical direction of protocols to assist in the emergency medical care of the patient with chest pain |
| PC32. List the indications for the use of nitro-glycerine |
| PC33. State the contraindications and side effects for the use of nitro-glycerine |
| PC34. Perform maintenance checks of the automated external defibrillator |

200

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|------------|------------|------------|--|--|
| 10 | 2 | 8 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 10 | 2 | 8 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 4 | 4 | 0 | | |
| 10 | 2 | 8 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 4 | 4 | 0 | | |
| 200 | 100 | 100 | | |

Total

5.HSS/ N 2307 (Manage Cerebrovascular Emergency)

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| PC1. Describe the basic types, causes, and symptoms of stroke |
| PC2. Provide emergency medical care to a patient experiencing symptoms of a stroke |
| PC3. Manage airway, breathing, and circulation |
| PC4. Assess the patient's level of consciousness and document any signs of stroke |
| PC5. Assess vital signs: Blood pressure, heart rate, and respiratory rate |
| PC6. Perform a standardised pre-hospital stroke scale assessment such as the Cincinnati pre-hospital stroke scale |
| PC7. Check serum blood sugar |
| PC8. Collect critical background information on the victim and the onset of the stroke symptoms such as the medical history (especially any past strokes), the estimate of the time since any potential stroke symptoms first appeared, current medical conditions of the patient and current medications |
| PC9. Determine the time of onset of symptoms |
| PC10. Explain how patients, family, or bystanders should respond to a potential stroke |

200

| | | | | |
|----|---|----|--|--|
| 8 | 4 | 4 | | |
| 30 | 5 | 25 | | |
| 16 | 2 | 14 | | |
| 10 | 2 | 8 | | |
| 30 | 5 | 25 | | |
| 20 | 5 | 15 | | |
| 6 | 2 | 4 | | |
| 20 | 5 | 15 | | |
| 6 | 2 | 4 | | |
| 2 | 2 | 0 | | |

| | | | | | | | |
|--|---|------------|------------|-----------|------------|--|--|
| | PC11. Discuss the actions recommended for emergency responders to potential stroke victims | | 2 | 2 | 0 | | |
| | PC12. Explain the importance of transporting stroke patients immediately to an emergency department that has the personnel and equipment to provide comprehensive acute stroke treatment | | 2 | 2 | 0 | | |
| | PC13. Carry out first triage of potential stroke victims | | 10 | 5 | 5 | | |
| | PC14. Expedite transport of the patient to the nearest hospital equipped to handle strokes | | 4 | 2 | 2 | | |
| | PC15. Explain the importance of immediately notifying the Emergency Department of the hospital of the arrival of a potential stroke victim | | 4 | 2 | 2 | | |
| | PC16. Administer an IV line and oxygen and monitor the functioning of the heart on-route to the hospital | | 20 | 5 | 15 | | |
| | PC17. Forward a written report to the emergency department with details on medical history and onset of the stroke symptoms | | 10 | 5 | 5 | | |
| | Total | | 200 | 57 | 143 | | |
| 6.HSS/ N 2308 (Manage Allergic Reaction) | PC1. Recognise the patient experiencing an allergic reaction | 200 | 50 | 10 | 40 | | |
| | PC2. Perform the emergency medical care of the patient with an allergic reaction | | 50 | 10 | 40 | | |
| | PC3. Establish the relationship between the patient with an allergic reaction and airway management | | 30 | 5 | 25 | | |
| | PC4. Recognise the mechanisms of allergic response and the implications for airway management | | 10 | 5 | 5 | | |
| | PC5. State the generic and trade names, medication forms, dose, administration, action, and contraindications for the epinephrine auto-injector | | 20 | 5 | 15 | | |
| | PC6. Administer treatment appropriately in case of not having access to epinephrine auto-injectors | | 20 | 5 | 15 | | |
| | PC7. Evaluate the need for medical emergency medical care for the patient with an allergic reaction | | 10 | 2 | 8 | | |
| | PC8. Differentiate between the general category of those patients having an allergic reaction and those patients having a severe allergic reaction, requiring immediate medical care including immediate use of epinephrine auto-injector | | 10 | 3 | 7 | | |
| | Total | | 200 | 45 | 155 | | |
| 7.HSS/ N 2309 (Manage Poisoning or Overdose) | PC1. Recognise various ways that poisons enter the body | 200 | 10 | 10 | 0 | | |
| | PC2. Recognise signs/symptoms associated with various poisoning | | 20 | 10 | 10 | | |
| | PC3. Perform the emergency medical care for the patient with possible overdose | | 40 | 10 | 30 | | |
| | PC4. Perform the steps in the emergency medical care for the patient with suspected poisoning | | 40 | 10 | 30 | | |
| | PC5. Establish the relationship between the patient suffering from poisoning or overdose and airway management | | 30 | 10 | 20 | | |
| | PC6. State the generic and trade names, indications, contraindications, medication form, dose, administration, actions, side effects and re-assessment strategies for activated charcoal | | 30 | 10 | 20 | | |
| | PC7. Recognise the need for medical direction in caring for the patient with poisoning or overdose | | 30 | 10 | 20 | | |
| | Total | | 200 | 70 | 130 | | |
| 8.HSS/ N 2310 (Manage Environmental Emergency) | PC1. Recognise the various ways by which body loses heat | | 10 | 10 | 0 | | |
| | PC2. List the signs and symptoms of exposure to cold | | 10 | 10 | 0 | | |
| | PC3. Perform the steps in providing emergency medical care to a patient exposed to cold | | 40 | 10 | 30 | | |

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|--|---|------------|------------|------------|------------|--|--|
| | PC4. List the signs and symptoms of exposure to heat | 200 | 10 | 10 | 0 | | |
| | PC5. Perform the steps in providing emergency care to a patient exposed to heat | | 40 | 10 | 30 | | |
| | PC6. Recognise the signs and symptoms of water-related emergencies | | 10 | 10 | 0 | | |
| | PC7. Identify the complications of near-drowning | | 10 | 10 | 0 | | |
| | PC8. Perform emergency medical care for bites and stings | | 40 | 10 | 30 | | |
| | PC9. Explain various relevant National Disaster Management Agency (NDMA) guidelines | | 30 | 20 | 10 | | |
| | Total | | 200 | 100 | 100 | | |
| 9.HSS/ N 2311 (Manage Behavioural Emergency) | PC1. Recognise the general factors that may cause an alteration in a patient's behaviour | 200 | 40 | 20 | 20 | | |
| | PC2. Recognise the various reasons for psychological crises | | 40 | 20 | 20 | | |
| | PC3. Identify the characteristics of an individual's behaviour which suggest that the patient is at risk for suicide | | 20 | 20 | 0 | | |
| | PC4. Identify special medical/legal considerations for managing behavioural emergencies | | 20 | 20 | 0 | | |
| | PC5. Recognise the special considerations for assessing a patient with behavioural problems | | 20 | 20 | 0 | | |
| | PC6. Identify the general principles of an individual's behaviour, which suggest the risk for violence | | 20 | 0 | 20 | | |
| | PC7. Identify methods to calm behavioural emergency patients | | 40 | 0 | 40 | | |
| | Total | 200 | 100 | 100 | | | |
| 10.HSS/ N 2312 (Manage Obstetrics/Gynaecology emergencies) | PC1. Identify the following structures: Uterus, vagina, foetus, placenta, umbilical cord, amniotic sac, and perineum | 200 | 4 | 4 | 0 | | |
| | PC2. Identify and explain the use of the contents of an obstetrics kit | | 10 | 2 | 8 | | |
| | PC3. Identify pre-delivery emergencies | | 4 | 4 | 0 | | |
| | PC4. State indications of an imminent delivery | | 4 | 4 | 0 | | |
| | PC5. Differentiate the emergency medical care provided to a patient with pre-delivery emergencies from a normal delivery | | 4 | 4 | 0 | | |
| | PC6. Perform the steps in pre-delivery preparation of the mother | | 20 | 2 | 18 | | |
| | PC7. Establish the relationship between body substance isolation and childbirth | | 4 | 4 | 0 | | |
| | PC8. Perform the steps to assist in the delivery | | 20 | 2 | 18 | | |
| | PC9. State the steps required for care of the baby as the head appears | | 4 | 4 | 0 | | |
| | PC10. Explain how and when to cut the umbilical cord | | 10 | 2 | 8 | | |
| | PC11. Perform the steps in the delivery of the placenta | | 20 | 2 | 18 | | |
| | PC12. Perform the steps in the emergency medical care of the mother post-delivery | | 20 | 2 | 18 | | |
| | PC13. Summarise neonatal resuscitation procedures | | 10 | 2 | 8 | | |
| | PC14. Identify the procedures for the following abnormal deliveries: Breech birth, multiple births, prolapsed cord, limb presentation | | 10 | 8 | 2 | | |
| | PC15. Differentiate the special considerations for multiple births | | 4 | 4 | 0 | | |
| | PC16. Recognise special considerations of meconium | | 4 | 4 | 0 | | |
| | PC17. Identify special considerations of a premature baby | | 4 | 4 | 0 | | |
| | PC18. Perform the emergency medical care of a patient with a gynaecological emergency | | 20 | 2 | 18 | | |
| | PC19. Perform steps required for emergency medical care of a mother with excessive bleeding | | 20 | 2 | 18 | | |
| | PC20. Complete a Pre-Hospital Care report for patients with obstetrical/gynaecological emergencies | | 4 | 4 | 0 | | |
| | Total | 200 | 66 | 134 | | | |

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| 11.HSS/ N 2313 (Manage Bleeding and Shock) | PC1. Recognise the structure and function of the circulatory system | 200 | 5 | 5 | 0 | | |
| | PC2. Differentiate between arterial, venous and capillary bleeding | | 5 | 5 | 0 | | |
| | PC3. State methods of emergency medical care of external bleeding | | 30 | 5 | 25 | | |
| | PC4. Establish the relationship between body substance isolation and bleeding | | 20 | 2 | 18 | | |
| | PC5. Establish the relationship between airway management and the trauma patient | | 20 | 2 | 18 | | |
| | PC6. Establish the relationship between mechanism of injury and internal bleeding | | 20 | 2 | 18 | | |
| | PC7. Recognise the signs of internal bleeding | | 10 | 5 | 5 | | |
| | PC8. Perform the steps in the emergency medical care of the patient with signs and symptoms of internal bleeding | | 30 | 5 | 25 | | |
| | PC9. Recognise the signs and symptoms of shock (hypo perfusion) | | 10 | 5 | 5 | | |
| | PC10. Perform the steps in the emergency medical care of the patient with signs and symptoms of shock (hypo perfusion) | | 30 | 5 | 25 | | |
| | PC11. Recognize different types of shock and initiate appropriate medical management | | 20 | 10 | 10 | | |
| | Total | | 200 | 51 | 149 | | |
| 12. HSS/ N 2314 (Manage Soft Tissue Injury and Burns) | PC1. Recognise the major functions of the skin | 200 | 1 | 1 | 0 | | |
| | PC2. Recognise the layers of the skin | | 1 | 1 | 0 | | |
| | PC3. Establish the relationship between body substance isolation (BSI) and soft tissue injuries | | 10 | 2 | 8 | | |
| | PC4. Recognise the types of closed soft tissue injuries | | 3 | 3 | 0 | | |
| | PC5. Perform the emergency medical care of the patient with a closed soft tissue injury | | 10 | 2 | 8 | | |
| | PC6. State the types of open soft tissue injuries | | 3 | 3 | 0 | | |
| | PC7. Recognise the emergency medical care of the patient with an open soft tissue injury | | 3 | 3 | 0 | | |
| | PC8. Recognise the emergency medical care considerations for a patient with a penetrating chest injury | | 3 | 3 | 0 | | |
| | PC9. Perform the emergency medical care considerations for a patient with an open wound to the abdomen | | 10 | 2 | 8 | | |
| | PC10. Differentiate the care of an open wound to the chest from an open wound to the abdomen | | 2 | 2 | 0 | | |
| | PC11. Classify burns | | 10 | 10 | 0 | | |
| | PC12. Recognise superficial burn | | 3 | 3 | 0 | | |
| | PC13. Recognise the characteristics of a superficial burn | | 3 | 3 | 0 | | |
| | PC14. Recognise partial thickness burn | | 3 | 3 | 0 | | |
| | PC15. Recognise the characteristics of a partial thickness burn | | 3 | 3 | 0 | | |
| | PC16. Recognise full thickness burn | | 3 | 3 | 0 | | |
| | PC17. Recognise the characteristics of a full thickness burn | | 3 | 3 | 0 | | |
| | PC18. Perform the emergency medical care of the patient with a superficial burn | | 10 | 2 | 8 | | |
| | PC19. Perform the emergency medical care of the patient with a partial thickness burn | | 10 | 2 | 8 | | |
| | PC20. Perform the emergency medical care of the patient with a full thickness burn | | 10 | 2 | 8 | | |
| | PC21. Recognise the functions of dressing and bandaging | | 10 | 2 | 8 | | |
| | PC22. Describe the purpose of a bandage | | 10 | 2 | 8 | | |
| | PC23. Perform the steps in applying a pressure dressing | | 10 | 2 | 8 | | |

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|--|---|------------|------------|-----------|------------|--|--|
| | PC24. Establish the relationship between airway management and the patient with chest injury, burns, blunt and penetrating injuries | | 6 | 2 | 4 | | |
| | PC25. Know the ramification of improperly applied dressings, splints and tourniquets | | 10 | 2 | 8 | | |
| | PC26. Perform the emergency medical care of a patient with an impaled object | | 10 | 2 | 8 | | |
| | PC27. Perform the emergency medical care of a patient with an amputation | | 10 | 2 | 8 | | |
| | PC28. Perform the emergency care for a chemical burn | | 10 | 2 | 8 | | |
| | PC29. Perform the emergency care for an electrical burn | | 10 | 2 | 8 | | |
| | PC30. Recognise inhalation injury and perform emergency care | | 10 | 2 | 8 | | |
| | Total | | 200 | 76 | 124 | | |
| 13.HSS/ N 2315 (Manage Musculoskeletal injuries) | PC1. Recognise the function of the muscular system | 200 | 4 | 4 | 0 | | |
| | PC2. Recognise the function of the skeletal system | | 4 | 4 | 0 | | |
| | PC3. Recognise the major bones or bone groupings of the spinal column; the thorax; the upper extremities; the lower extremities | | 6 | 6 | 0 | | |
| | PC4. Differentiate between an open and a closed painful, swollen, deformed extremity | | 6 | 6 | 0 | | |
| | PC5. Manage musculoskeletal injuries including thoracic and abdominal injuries | | 20 | 10 | 10 | | |
| | PC6. State the reasons for splinting | | 20 | 10 | 10 | | |
| | PC7. List the general rules of splinting | | 40 | 10 | 30 | | |
| | PC8. Ramification & complications of splinting | | 20 | 2 | 18 | | |
| | PC9. Perform the emergency medical care for a patient with a painful, swollen, deformed extremity | | 40 | 10 | 30 | | |
| | PC10. How to apply pelvic binder techniques for fracture of pelvis | | 40 | 10 | 30 | | |
| | Total | | 200 | 72 | 128 | | |
| 14.HSS/ N 2316 (Manage Injuries to head and spine Description) | PC1. State the components of the nervous system | 200 | 1 | 1 | 0 | | |
| | PC2. List the functions of the central nervous system | | 1 | 1 | 0 | | |
| | PC3. Recognise the structure of the skeletal system as it relates to the nervous system | | 3 | 3 | 0 | | |
| | PC4. Relate mechanism of injury to potential injuries of the head and spine | | 5 | 5 | 0 | | |
| | PC5. Recognise the implications of not properly caring for potential spine injuries | | 5 | 5 | 0 | | |
| | PC6. State the signs and symptoms of a potential spine injury | | 5 | 5 | 0 | | |
| | PC7. Recognise the method of determining if a responsive patient may have a spine injury | | 5 | 5 | 0 | | |
| | PC8. Relate the airway emergency medical care techniques to the patient with a suspected spine injury | | 10 | 2 | 8 | | |
| | PC9. Identify how to stabilise the cervical spine | | 10 | 2 | 8 | | |
| | PC10. Indications for sizing and using a cervical spine immobilisation device | | 10 | 2 | 8 | | |
| | PC11. Establish the relationship between airway management and the patient with head and spine injuries | | 10 | 2 | 8 | | |
| | PC12. Recognise a method for sizing a cervical spine immobilisation device | | 10 | 2 | 8 | | |
| | PC13. Log roll a patient with a suspected spine injury | | 10 | 2 | 8 | | |
| | PC14. Secure a patient to a long spine board | | 10 | 2 | 8 | | |
| | PC15. List instances when a short spine board should be used | | 5 | 5 | 0 | | |
| | PC16. Immobilise a patient using a short spine board | | 10 | 2 | 8 | | |
| | PC17. Recognise the indications for the use of rapid extrication | | 5 | 5 | 0 | | |
| | PC18. Understand the steps in performing rapid extrication | | 10 | 2 | 8 | | |

| | | | | | | | |
|--|---|------------|------------|------------|------------|--|--|
| | PC19. Identify the circumstances when a helmet should be left on the patient | | 10 | 2 | 8 | | |
| | PC20. Identify the circumstances when a helmet should be removed | | 10 | 2 | 8 | | |
| | PC21. Identify alternative methods for removal of a helmet | | 10 | 2 | 8 | | |
| | PC22. Stabilise patient's head to remove the helmet | | 10 | 2 | 8 | | |
| | PC23. Differentiate how the head is stabilised with a helmet compared to without a helmet | | 5 | 5 | 0 | | |
| | PC24. Immobilise paediatric and geriatric victims | | 10 | 2 | 8 | | |
| | PC25. Manage scalp bleeding | | 10 | 2 | 8 | | |
| | PC26. Manage eye injury | | 10 | 2 | 8 | | |
| | Total | | 200 | 72 | 128 | | |
| 15.HSS/ N 2317 (Manage Infants, Neonates and Children) | PC1. Identify the developmental considerations for the age groups of infants, toddlers, pre-school, school age and adolescent | 200 | 6 | 4 | 2 | | |
| | PC2. Identify differences in anatomy and physiology of the infant, child and adult patient | | 6 | 2 | 4 | | |
| | PC3. Differentiate the response of the ill or injured infant or child (age specific) from that of an adult | | 4 | 4 | 0 | | |
| | PC4. Understand various causes of respiratory emergencies | | 4 | 4 | 0 | | |
| | PC5. Differentiate between respiratory distress and respiratory failure | | 4 | 4 | 0 | | |
| | PC6. Perform the steps in the management of foreign body airway obstruction | | 20 | 2 | 18 | | |
| | PC7. Implement emergency medical care strategies for respiratory distress and respiratory failure | | 20 | 2 | 18 | | |
| | PC8. Identify the signs and symptoms of shock (hypoperfusion) in the infant and child patient | | 20 | 2 | 18 | | |
| | PC9. Recognise the methods of determining end organ perfusion in the infant and child patient | | 20 | 2 | 18 | | |
| | PC10. Identify the usual cause of cardiac arrest in infants and children versus adults | | 20 | 2 | 18 | | |
| | PC11. Recognise the common causes of seizures in the infant and child patient | | 4 | 4 | 0 | | |
| | PC12. Perform the management of seizures in the infant and child patient | | 20 | 2 | 18 | | |
| | PC13. Differentiate between the injury patterns in adults, infants, and children | | 4 | 4 | 0 | | |
| | PC14. Perform the field management of the infant and child trauma patient | | 20 | 2 | 18 | | |
| | PC15. Summarise the indicators of possible child abuse and neglect | | 4 | 4 | 0 | | |
| | PC16. Recognise the medical legal responsibilities in suspected child abuse | | 4 | 4 | 0 | | |
| | PC17. Recognise need for EMT debriefing following a difficult infant or child transport | | 20 | 2 | 18 | | |
| | Total | 200 | 50 | 150 | | | |
| 16.HSS/ N 2318 (Manage respiratory emergency) | PC1. Recognise the anatomical components of the upper airway including: | | | | | | |
| | a. Nasopharynx | | 1 | 1 | 0 | | |
| | b. Nasal air passage | | 1 | 1 | 0 | | |
| | c. Pharynx | | 1 | 1 | 0 | | |
| | d. Mouth | | 1 | 1 | 0 | | |
| | e. Oropharynx | | 1 | 1 | 0 | | |
| | f. Epiglottis | | 1 | 1 | 0 | | |
| | PC2. Recognise the anatomical components of the lower airway including: | | | | | | |

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|--|
| a. Larynx |
| b. Trachea |
| c. Alveoli |
| d. Bronchi |
| e. Carina |
| f. Diaphragm |
| PC3. Recognise the characteristics of normal breathing |
| PC4. Recognise the signs of abnormal breathing including: |
| a. Dyspnoea |
| b. Upper airway obstruction |
| c. Acute pulmonary oedema |
| d. Chronic obstructive pulmonary disease |
| e. Bronchitis |
| f. Emphysema |
| g. Pneumothorax |
| h. Asthma |
| i. Pneumonia |
| j. Pleural effusion |
| k. Pulmonary embolism |
| l. Hyperventilation |
| PC5. Recognise the characteristics of abnormal breath sounds |
| PC6. Recognise the characteristics of irregular breathing patterns |
| PC7. Complete a focused history and physical exam of the patient |
| PC8. Establish airway in patient with respiratory difficulties |
| PC9. Contact Dispatch and Medical Control for choosing nebulizer therapy |
| PC10. Understand the various types of Metered Dose Inhalers including: |
| a. Preventil |
| b. Ventolin |
| c. Alupent |
| d. Metaprel |
| e. Brethine |
| f. Albuterol |
| g. Metaproterenol |
| h. Terbutaline |
| PC11. Understand the contraindications and side effects for various types of Metered Dose Inhalers |

200

| | | | | |
|------------|-----------|------------|--|--|
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 4 | 2 | 2 | | |
| | | | | |
| 48 | 24 | 24 | | |
| | | | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 24 | 4 | 20 | | |
| 20 | 2 | 18 | | |
| 20 | 2 | 18 | | |
| | | | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 6 | 2 | 4 | | |
| 4 | 4 | 0 | | |
| 200 | 70 | 130 | | |

17.HSS/ N 2319 (Manage severe abdominal pain)

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|--|
| PC1. Recognise the anatomical components of the abdomen and their functions including: |
| a. Left Upper Quadrant |
| o Most of the stomach |
| o Spleen |
| o Pancreas |
| o Large intestine |
| o Small intestine |
| o Left kidney (upper portion) |
| b. Right Upper Quadrant |
| o Liver |
| o Gallbladder |
| o Part of the large intestine |
| o Right kidney (upper portion) |
| o Small intestine |
| c. Right Lower Quadrant |

| | | | | |
|---|---|---|--|--|
| | | | | |
| 1 | 1 | 0 | | |
| | | | | |
| 1 | 1 | 0 | | |
| | | | | |

| |
|---|
| o Appendix |
| o Large intestine |
| o Female reproductive organs |
| o Small intestine |
| o Right kidney (lower portion) |
| o Right ureter |
| o Right ovary & fallopian tube |
| d. Left Lower Quadrant |
| o Large intestine |
| o Small intestine |
| o Left kidney (lower portion) |
| o Left ureter |
| o Left ovary |
| o Left fallopian tube |
| e. Midline structures |
| o Small intestine |
| o Urinary bladder |
| o Uterus |
| PC2. Recognise the symptoms and cause of visceral pain |
| PC3. Recognise the symptoms and causes of parietal pain |
| PC4. Recognise the symptoms and possible causes of referred pain including: |
| a. Right shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the right); gallstone; subphrenic abscess; free abdominal blood |
| b. Left shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the left); ruptured spleen; pancreatic disease or cancer; subphrenic abscess; abdominal blood |
| c. Midline, back pain – aortic aneurysm or dissection; pancreatitis, pancreatic cancer, kidney stone |
| d. Mid-abdominal pain – small bowel irritation, gastroenteritis, early appendicitis |
| e. Lower abdominal pain – diverticular disease (herniations of the mucosa and submucosa of the intestines), Crohn’s disease (a type of inflammatory bowel disease), ulcerative colitis |
| f. Sacrum pain – perirectal abscess, rectal disease |
| g. Epigastrium pain – peptic, duodenal ulcer; gallstone, hepatitis, pancreatitis, angina pectoris |
| h. Testicular pain – renal colic; appendicitis |
| PC5. Complete a focused history and physical exam of the patient including: |
| a. Visual inspection |
| b. Auscultating the abdomen |
| c. Palpating the abdomen |
| PC6. Establish airway in patient |
| PC7. Place patient in position of comfort |
| PC8. Calm and reassure the patient |
| PC9. Look for signs of hypoperfusion |
| PC10. Recognise possible diagnoses for abdominal pain |
| PC11. State the treatment for managing various causes of abdominal pain |
| PC12. Recognise potential diagnoses which imply the condition of the patient may deteriorate and highlight the need for frequent reassessment and advanced life support interventions |
| PC13. Alert the Emergency Centre/ Healthcare provider in advance of a priority case (when required) |

200

| | | | | |
|----|---|----|--|--|
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 1 | 1 | 0 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 6 | 4 | 2 | | |
| 20 | 2 | 18 | | |
| 20 | 2 | 18 | | |
| 20 | 2 | 18 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 10 | 2 | 8 | | |
| 5 | 3 | 2 | | |

| | | Total | 200 | 68 | 132 | | |
|---|---|--------------|------------|------------|------------|------------|--|
| 18.HSS/ N 2320 (Manage Mass Casualty Incident) | PC1. Establish an Incident Management Structure on arrival at the scene including: | 200 | | | | | |
| | a. Designating an Incident Commander to manage the incident | | 4 | 4 | 0 | | |
| | b. As Incident Commander, designating Triage Team(s), Treatment Team(s), and a Transport Officer | | 4 | 4 | 0 | | |
| | PC2. Set up separate areas for treatment, triage and transport | | 10 | 2 | 8 | | |
| | PC3. Conduct an initial triage of patients by using the START triage model for adult patients, JumpSTART Triage for paediatric patients and the SMART triage tagging system | | 24 | 6 | 18 | | |
| | PC4. Use appropriate personal protective equipment while conducting initial triage | | 20 | 2 | 18 | | |
| | PC5. Tag severity/ criticality of patient using colour coded tags | | 20 | 2 | 18 | | |
| | PC6. Direct non-injured and/or slightly injured victims to the triage area set up for those with minor injuries | | 10 | 10 | 0 | | |
| | PC7. Monitor patients with minor injuries for changes in their condition | | 20 | 2 | 18 | | |
| | PC8. Maintain an open airway and stop uncontrolled bleeding | | 20 | 2 | 18 | | |
| | PC9. Extract patients from the casualty area based on initial triage to designated triage and treatment areas | | 20 | 2 | 18 | | |
| | PC10. Use equipment like cots and litters for extraction where required | | 20 | 2 | 18 | | |
| | PC11. Re-triage patients extracted to the triage and treatment areas | | 10 | 2 | 8 | | |
| | PC12. Provide treatment and deliver patients to transport area | | 6 | 4 | 2 | | |
| | PC13. Transport patients to healthcare facility | | 6 | 4 | 2 | | |
| PC14. Alert healthcare facilities in advance of possible arrival of multiple patients | 6 | 4 | 2 | | | | |
| Total | | | 200 | 52 | 148 | | |
| 19.HSS/ N 2324 (Manage diabetes emergency) | PC1. Identify the patient taking diabetic medications and the implications of a diabetes history | 200 | 30 | 20 | 10 | | |
| | PC2. Perform the steps in the emergency medical care of the patient taking diabetic medicine with a history of diabetes | | 50 | 10 | 40 | | |
| | PC3. Establish the relationship between airway management and the patient with altered mental status | | 40 | 10 | 30 | | |
| | PC4. Recognize the generic and trade names, medication forms, dose, administration, action, and contraindications for oral glucose | | 50 | 20 | 30 | | |
| | PC5. Evaluate the need for medical direction in the emergency medical care of the diabetic patient | | 30 | 10 | 20 | | |
| | Total | | | 200 | 70 | 130 | |
| 20. HSS/ N 9610 (Follow infection control policies and procedures) | PC1. Perform the standard precautions to prevent the spread of infection in accordance with organisation requirements | | 5 | 0 | 5 | | |
| | PC2. Perform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection | | 5 | 0 | 5 | | |
| | PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter | | 5 | 5 | 0 | | |
| | PC4. Identify infection risks and implement an appropriate response within own role and responsibility | | 20 | 10 | 10 | | |
| | PC5. Document and report activities and tasks that put patients and/or other workers at risk | | 5 | 0 | 5 | | |
| | PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization | | 5 | 0 | 5 | | |
| | PC7. Follow procedures for risk control and risk containment for specific risks | | 10 | 0 | 10 | | |

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| PC8. Follow protocols for care following exposure to blood or other body fluids as required |
| PC9. Place appropriate signs when and where appropriate |
| PC10. Remove spills in accordance with the policies and procedures of the organization |
| PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination |
| PC12. Follow hand washing procedures |
| PC13. Implement hand care procedures |
| PC14. Cover cuts and abrasions with water-proof dressings and change as necessary |
| PC15. Wear personal protective clothing and equipment that complies with Indian Standards, and is appropriate for the intended use |
| PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact |
| PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work |
| PC18. Confine records, materials and medicaments to a well-designated clean zone |
| PC19. Confine contaminated instruments and equipment to a well-designated contaminated zone |
| PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste |
| PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified |
| PC22. Store clinical or related waste in an area that is accessible only to authorised persons |
| PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release |
| PC24. Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements |
| PC25. Wear personal protective clothing and equipment during cleaning procedures |
| PC26. Remove all dust, dirt and physical debris from work surfaces |
| PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled |
| PC28. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilisation protocols |
| PC29. Dry all work surfaces before and after use |
| PC30. Replace surface covers where applicable |
| PC31. Maintain and store cleaning equipment |
| Total |

200

| | | | | |
|------------|-----------|------------|--|--|
| 10 | 0 | 10 | | |
| 20 | 10 | 10 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 5 | 0 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 20 | 10 | 10 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 5 | 0 | | |
| 5 | 0 | 5 | | |
| 5 | 5 | 0 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 0 | 5 | | |
| 5 | 5 | 0 | | |
| 200 | 55 | 145 | | |

Grand Total-1 (Subject Domain)

400

Compulsory NOS with Clinical NOS

Perform this NOS compulsarily with the clinical NOS of subject domain carrying 10 marks totalling 10

| National Occupational Standards (NOS) | Performance Criteria (PC) | Total Marks (100) | Out Of | Marks Allocation | | Marks Awarded by Assessor | | Grand Total of Practical |
|---|--|--|-----------|------------------|------------------------|---------------------------|------------------------|--------------------------|
| | | | | Viva | Observation/ Role Play | Viva | Observation/ Role Play | |
| 20. HSS/ N 2302 (Size up the scene at the site) | PC1. Ensure that all safety precautions are taken at the scene of the emergency | 10 | 1 | 0 | 1 | | | |
| | PC2. Introduce themselves to patient(s) and ask for their consent to any treatment | | 0.5 | 0 | 0.5 | | | |
| | PC3. Understand the implications of nuclear, radioactive, biological, chemical and explosive incidents and take appropriate action | | 1 | 0.5 | 0.5 | | | |
| | PC4. Collaborate effectively with other emergency response agencies and explain the situation clearly to them. This includes bomb disposal squads, fire departments, chemical, biological and nuclear agencies | | | | | | | |
| | PC5. Reassure patient(s) and bystanders by working in a confident, efficient manner | | 0.5 | 0 | 0.5 | | | |
| | PC6. Work expeditiously while avoiding mishandling of patient(s) and undue haste | | 0.5 | 0 | 0.5 | | | |
| | PC7. Recognise and react appropriately to persons exhibiting emotional reactions | | 0.5 | 0 | 0.5 | | | |
| | PC8. Interact effectively with the patient(s), relatives and bystanders who are in stressful situations | | 0.5 | 0 | 0.5 | | | |
| | PC9. Obtain information regarding the incident through accurate and complete scene assessment and document it accordingly | | 0.5 | 0 | 0.5 | | | |
| | PC10. Evaluate the scene and call for backup if required | | 0.5 | 0 | 0.5 | | | |
| | PC11. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority | | 0.5 | 0 | 0.5 | | | |
| | PC12. Maintain competence within one's role and field of practice | | 0.5 | 0 | 0.5 | | | |
| | PC13. Collaborate with the law agencies at a crime scene | | 1 | 0.5 | 0.5 | | | |
| | PC14. Promote and demonstrate good practice as an individual and as a team member at all times | | 0.5 | 0 | 0.5 | | | |
| | PC15. Identify and manage potential and actual risks to the quality and safety of work done | | 0.5 | 0 | 0.5 | | | |
| | PC16. Evaluate and reflect on the quality of one's work and make continuing improvements | | 0.5 | 0 | 0.5 | | | |
| | PC17. Understand relevant medico-legal principles | | 0.5 | 0 | 0.5 | | | |
| | PC18. Function within the scope of care defined by state, regional and local regulatory | | 0.5 | 0 | 0.5 | | | |
| Total | | | 10 | 1 | 9 | | | |
| Grand Total-2 (Compulsory NOS) | | | 10 | | | | | |
| Soft Skills and Communication | | Pick one field from both part 1 and part 2 randomly each carrying 45 marks totalling 90 | | | | | | |
| National Occupational Standards (NOS) | Performance Criteria (PC) | Total Marks (100) | Out Of | Marks Allocation | | Marks Awarded by Assessor | | Grand Total of Practical |
| | | | | Viva | Observation/ Role Play | Viva | Observation/ Role Play | |
| Part 1 (Pick one field randomly carrying 45 marks) | | | | | | | | |
| 1. Decision making and leadership quality | | | | | | | | |
| HSS/ N 2321 (Select the proper provider institute) | PC1. Explain to the patient about his role and the reason for selecting a particular health provider | | 2 | 2 | 0 | | | |

| | | | | | | | |
|---|---|-----------|-----------|-----------|-----------|----------|----------|
| for transfer) | PC2. Consolidate complete medical history of the patient with the severity of the damage and impending risk in terms of time and the kind of treatment required | 18 | 4 | 2 | 2 | | |
| | PC3. Allocate patient to the nearest provider institute | | 2 | 2 | 0 | | |
| | PC4. Base the allocation on the kind of care required namely primary, secondary or tertiary care centres | | 2 | 2 | 0 | | |
| | PC5. Make sure that the selection of the institute is in adherence with the legal regulation | | 2 | 2 | 0 | | |
| | PC6. Obtain guidance from medical officer for selection of proper provider institute | | 2 | 2 | 0 | | |
| | PC7. Provide pre-arrival information to the receiving hospital | | 2 | 2 | 0 | | |
| | PC8. Obtain guidance of medical officer when ambulance needed to be stopped en-route (e.g. during emergency child birth) | | 2 | 2 | 0 | | |
| | Total | | 18 | 16 | 2 | | |
| HSS/ N 2322 (Transport patient to the provider institute) | PC1. Adhere fully to the rules and regulations related to the usage of ground and air transport | 16 | 2 | 2 | 0 | | |
| | PC2. Adhere fully to the steps involved in treating and transporting the patient | | 4 | 2 | 2 | | |
| | PC3. Positively manage situations where transport is a problem | | 2 | 2 | 0 | | |
| | PC4. Allocate the means of transport keeping in mind the emergency, weather conditions and availability of transport | | 2 | 2 | 0 | | |
| | PC5. Adhere fully to procedures once the patient reaches the hospital | | 2 | 2 | 0 | | |
| | PC6. Use correct medication and equipment for treatment of immediate threats to life | | 4 | 2 | 2 | | |
| Total | 16 | 12 | 4 | | | | |
| HSS/ N 2323 (Manage Patient Handover to the provider institute) | PC1. Provide a verbal report to the medical staff on the condition of the patient and initial findings | 11 | 4 | 2 | 2 | | |
| | PC2. Complete the Patient Care Report (PCR) and hand it over to the medical staff | | 4 | 2 | 2 | | |
| | PC3. Hand over the consent form signed by the patient or a relative | | 3 | 1 | 2 | | |
| Total | 11 | 5 | 6 | | | | |
| Decision making and leadership quality Total | | 45 | 45 | 33 | 12 | 0 | 0 |
| 2. Attitude | | | | | | | |
| HSS/ N 9603 (Act within the limits of one's competence and authority) | PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice | 25 | 2 | 2 | 0 | | |
| | PC2. Work within organisational systems and requirements as appropriate to one's role | | 5 | 0 | 5 | | |
| | PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority | | 5 | 0 | 5 | | |
| | PC4. Maintain competence within one's role and field of practice | | 5 | 5 | 0 | | |
| | PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice | | 2 | 2 | 0 | | |
| | PC6. Promote and demonstrate good practice as an individual and as a team member at all times | | 2 | 2 | 0 | | |
| | PC7. Identify and manage potential and actual risks to the quality and safety of practice | | 2 | 2 | 0 | | |
| | PC8. Evaluate and reflect on the quality of one's work and make continuing improvements | | 2 | 2 | 0 | | |
| Total | 25 | 15 | 10 | | | | |
| HSS/ N 9607 (Practice Code of conduct while | PC1. Adhere to protocols and guidelines relevant to the role and field of practice | | 3 | 1 | 2 | | |

| | | | | | | | |
|-----------------------|---|-----------|-----------|-----------|-----------|--|--|
| performing duties) | PC2. Work within organisational systems and requirements as appropriate to the role | 20 | 3 | 1 | 2 | | |
| | PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority | | 3 | 1 | 2 | | |
| | PC4. Maintain competence within the role and field of practice | | 1 | 0 | 1 | | |
| | PC5. Use protocols and guidelines relevant to the field of practice | | 4 | 2 | 2 | | |
| | PC6. Promote and demonstrate good practice as an individual and as a team member at all times | | 1 | 0 | 1 | | |
| | PC7. Identify and manage potential and actual risks to the quality and patient safety | | 1 | 0 | 1 | | |
| | PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem | | 4 | 2 | 2 | | |
| | Total | | 20 | 7 | 13 | | |
| Attitude Total | 45 | 45 | 22 | 23 | | | |

| | | | | | | | |
|--|---|-----------|-----------|-----------|-----------|--|--|
| 3. Attiquete | | | | | | | |
| HSS/ N 9605 (Manage work to meet requirements) | PC1. Clearly establish, agree, and record the work requirements | 20 | 10 | 5 | 5 | | |
| | PC2. Utilise time effectively | | 2 | 0 | 2 | | |
| | PC3. Ensure his/her work meets the agreed requirements | | 2 | 0 | 2 | | |
| | PC4. Treat confidential information correctly | | 2 | 2 | 0 | | |
| | PC5. Work in line with the organisation's procedures and policies and within the limits of his/her job role | | 4 | 2 | 2 | | |
| | Total | | 20 | 9 | 11 | | |
| HSS/ N 9601 (Collate and Communicate Health Information) | PC1. Respond to queries and information needs of all individuals | 25 | 2 | 2 | 0 | | |
| | PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics | | 5 | 0 | 5 | | |
| | PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them | | 5 | 0 | 5 | | |
| | PC4. Utilise all training and information at one's disposal to provide relevant information to the individual | | 5 | 5 | 0 | | |
| | PC5. Confirm that the needs of the individual have been met | | 2 | 2 | 0 | | |
| | PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality | | 2 | 2 | 0 | | |
| | PC7. Respect the individual's need for privacy | | 2 | 2 | 0 | | |
| | PC8. Maintain any records required at the end of the interaction | | 2 | 2 | 0 | | |
| Total | 25 | 15 | 10 | | | | |
| Attiquete Total | 45 | 45 | 24 | 21 | | | |

Part 2 (Pick one field randomly carrying 45 marks)

| | | | | | | | |
|--|--|----|---|---|---|--|--|
| 1. Safety management | | | | | | | |
| HSS/ N 9606 (Maintain a safe, healthy, and secure working environment) | PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements | 45 | 6 | 2 | 4 | | |
| | PC2. Comply with health, safety and security procedures for the workplace | | 2 | 0 | 2 | | |
| | PC3. Report any identified breaches in health, safety, and security procedures to the designated person | | 2 | 1 | 1 | | |
| | PC4. Identify potential hazards and breaches of safe work practices | | 6 | 4 | 2 | | |
| | PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority | | 6 | 4 | 2 | | |
| | PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected | | 6 | 4 | 2 | | |
| | PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently | | 6 | 2 | 4 | | |

| | | | | | | | |
|--|---|----|-----------|-----------|-----------|--|--|
| | PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person | | 5 | 3 | 2 | | |
| | PC9. Complete any health and safety records legibly and accurately | | 6 | 2 | 4 | | |
| | Total | | 45 | 22 | 23 | | |
| 2. Waste Management | | | | | | | |
| HSS/ N 9609 (Follow biomedical waste disposal protocols) | PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type | 45 | 6 | 2 | 4 | | |
| | PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste | | 6 | 3 | 3 | | |
| | PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements | | 4 | 0 | 4 | | |
| | PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste | | 6 | 3 | 3 | | |
| | PC5. Check the accuracy of the labelling that identifies the type and content of waste | | 4 | 2 | 2 | | |
| | PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal | | 4 | 4 | 0 | | |
| | PC7. Check the waste has undergone the required processes to make it safe for transport and disposal | | 4 | 4 | 0 | | |
| | PC8. Transport the waste to the disposal site, taking into consideration its associated risks | | 4 | 4 | 0 | | |
| | PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures | | 4 | 4 | 0 | | |
| | PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols | | 3 | 3 | 0 | | |
| | Total | | 45 | 29 | 16 | | |
| 3. Team Work | | | | | | | |
| HSS/ N 9604 (Work effectively with others) | PC1. Communicate with other people clearly and effectively | 45 | 2 | 0 | 2 | | |
| | PC2. Integrate one's work with other people's work effectively | | 2 | 0 | 2 | | |
| | PC3. Pass on essential information to other people on timely basis | | 2 | 0 | 2 | | |
| | PC4. Work in a way that shows respect for other people | | 2 | 0 | 2 | | |
| | PC5. Carry out any commitments made to other people | | 6 | 6 | 0 | | |
| | PC6. Reason out the failure to fulfil commitment | | 6 | 6 | 0 | | |
| | PC7. Identify any problems with team members and other people and take the initiative to solve these problems | | 15 | 10 | 5 | | |
| | PC8. Follow the organisation's policies and procedures | | 10 | 4 | 6 | | |
| | Total | | 45 | 26 | 19 | | |
| 4. Ethics | | | | | | | |
| HSS/ N 2303 (Follow evidence based Protocol while managing patients) | PC1. Understand the appropriate and permissible medical service procedures which may be rendered by an EMT to a patient not in a hospital. For example, steps to be followed for cardiovascular emergencies or emergency of an environmental nature like burns, hypothermia | 45 | 9 | 4 | 5 | | |
| | PC2. Understand the communication protocols for medical situations that require direct voice communication between the EMT and the Medical officer prior to the EMT rendering medical services to the patients outside the hospital | | 9 | 4 | 5 | | |
| | PC3. Adhere to laws, regulations and procedures relating to the work of an EMT | | 9 | 4 | 5 | | |

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|--|--|----|-----------|-----------|-----------|--|--|
| | PC4. Demonstrate professional judgement in determining treatment modalities within the parameters of relevant protocols | | 9 | 4 | 5 | | |
| | PC5. Understand the universal approach to critical patient care and package-up-patient-algorithm(transport protocol) | | 9 | 4 | 5 | | |
| | Total | | 45 | 20 | 25 | | |
| 5. Quality | | | | | | | |
| HSS/ N 9611: Monitor and assure quality | PC1. Conduct appropriate research and analysis | 45 | 5 | 5 | 0 | | |
| | PC2. Evaluate potential solutions thoroughly | | 5 | 0 | 5 | | |
| | PC3. Participate in education programs which include current techniques, technology and trends pertaining to the dental industry | | 3 | 3 | 0 | | |
| | PC4. Read Dental hygiene, dental and medical publications related to quality consistently and thoroughly | | 5 | 5 | 0 | | |
| | PC5. Report any identified breaches in health, safety, and security procedures to the designated person | | 3 | 0 | 3 | | |
| | PC6. Identify and correct any hazards that he/she can deal with safely, competently and within the limits of his/her authority | | 3 | 0 | 3 | | |
| | PC7. Promptly and accurately report any hazards that he/she is not allowed to deal with to the relevant person and warn other people who may be affected | | 3 | 0 | 3 | | |
| | PC8. Follow the organisation's emergency procedures promptly, calmly, and efficiently | | 3 | 0 | 3 | | |
| | PC9. Identify and recommend opportunities for improving health, safety, and security to the designated person | | 5 | 2 | 3 | | |
| | PC10. Complete any health and safety records legibly and accurately | | 10 | 5 | 5 | | |
| | Total | | 45 | 20 | 25 | | |
| Grand Total-3 (Soft Skills and Communication) | | | 90 | | | | |

Assessment Form (To be filled by Assessor for Each Trainee)

| | | | | | | | |
|-----------------------------|--------------------------------------|------------------------------|--|----------------|--|--------------|--|
| Job Role | Emergency Medical technician (EMT-B) | Trainee Name | | UID No. | | Batch | |
| Qualification Pack | | Taining Partner | | Date | | | |
| Sector Skill Council | Healthcare | Signature of Assessor | | | | | |

Theory (20% weightage)

| | Marks Alloted | Marks Awarded by Assessor |
|---|----------------------|----------------------------------|
| Grand Total-1 (Subject Domain) | 80 | |
| Grand Total-2 (Soft Skills and Comunication) | 20 | |
| Grand Total-(Theory) | 100 | |

| | |
|-----------------------|---|
| Subject Domain | Select any 40 PCs each carrying 2 marks totalling 80 |
|-----------------------|---|

| National Occupational Standards (NOS) | Performance Criteria (PC) | Marks Allocation | Marks Awarded by Assessor | Grand Total of Theory |
|--|--|-------------------------|----------------------------------|------------------------------|
| | | Theory | Theory | |
| 1. HSS/ N 2301 (Respond to Emergency Calls) | PC1. Understand the emergency codes used in the hospital for emergency situations | | | |
| | PC2. Reflect professionalism through use of appropriate language while speaking to the dispatch team | | | |
| | PC3. Use communication equipment such as mobile phones, radio communication equipment, megaphones and other equipment as required by the EMS provider | | | |
| | PC4. Evaluate the situation of the patient(s) on the basis of the call with the dispatch centre | | | |
| | PC5. Demonstrate teamwork while preparing for an emergency situation with a fellow EMT and/or a nurse | | | |
| | PC6. Recognise the boundary of one's role and responsibility and seek supervision from the medical officer on duty when situations are beyond one's competence and authority | | | |

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|--|---|---|--|--|--|
| PC7. Prepare for the emergency by practicing Body Substance Isolation (BSI). This includes putting on: | a. Hospital Gowns | 4 | | | |
| | b. Medical Gloves | | | | |
| | c. Shoe Covers | | | | |
| | d. Surgical Masks | | | | |
| | e. Safety Glasses | | | | |
| | f. Helmets | | | | |
| | g. Reflective Clothing | | | | |
| | PC8. Prepare the ambulance with the required medical equipment and supplies as per the medical emergency. A large selection of equipment and supplies specialised for Emergency Medical Services include diagnostic kits, | | | | |
| | PC9. Demonstrate active listening in interactions with the dispatch team, colleagues and the medical officer | | | | |
| | PC10. Establish trust and rapport with colleagues | | | | |
| | PC11. Maintain competence within one's role and field of practice | | | | |
| | PC12. Promote and demonstrate good practice as an individual and as a team member at all times | | | | |
| | PC13. Identify and manage potential and actual risks to the quality and safety of practice | | | | |
| | PC14. Evaluate and reflect on the quality of one's work and make continuing improvements | | | | |
| | PC15. Understand basic medico-legal principles | | | | |
| | PC16. Function within the scope of care as defined by state, regional and local regulatory agencies | | | | |
| Total | 4 | | | | |
| 2. HSS/ N 2304 (Assess Patient at the site) | PC1. Explain clearly: | | | | |
| | o An EMT's role and scope, responsibilities and accountability in relation to the assessment of health status and needs | | | | |
| | o What information need to be obtained and stored in records | | | | |
| | o With whom the information might be shared | | | | |
| | o What is involved in the assessment | | | | |
| PC2. Obtain informed consent of the patient for the assessment process, unless impossible as a consequence of their condition | | | | | |
| PC3. Conduct all observations and measurements systematically and thoroughly in order of priority (including Airway, Breathing, Circulation) | | | | | |
| PC4. Respect the patient's privacy, dignity, wishes and beliefs | | | | | |

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| | PC5. Minimise any unnecessary discomfort and encourage the patient to participate as fully as possible in the process | | |
| | PC6. Communicate with the patient clearly and in a manner and pace that is appropriate to: | | |
| | o Their level of understanding | | |
| | o Their culture and background | | |
| | o Their need for reassurance and support | | |
| | PC7. Recognise promptly any life-threatening or high risk conditions | | |
| | PC8. Make full and effective use of any protocols, guidelines and other sources of guidance and advice to inform decision making | 4 | |
| | PC9. Assess the condition of the patient by: | | |
| | o Observing patient position | | |
| | o Observing the colour of the skin as well as ease of breathing and paying attention to any signs of laboured breathing or coughing | | |
| | o Checking if there is any bleeding from the nose or ears | | |
| | o Looking at the pupil dilation/difference in pupil sizes, as it may be suggestive of concussion | | |
| | o Checking if the patient is under the effect of alcohol or any other drug | | |
| | o Checking the patient's mouth to ensure the airway is clear | | |
| | o Gently checking the neck, starting from the back | | |
| | o Checking for any swelling or bruises | | |
| | o Checking the chest to ascertain if any object is stuck | | |
| | o Checking the ribcage for bruising or swelling and the abdomen for any kind of swelling or lumps | | |
| | o Checking for any damage to the pelvis | | |
| | o Asking the victim if they are able to feel their legs | | |
| | o Observing the colour of toes to check for any circulation problems | | |
| | PC10. Use appropriate equipment if required | | |
| | Total | 4 | |
| 3. HSS/ N 2305 (Patient Triage based on the defined clinical criteria of severity of illness) | PC1. Have the expertise to quickly assess whether the patient requires immediate life-saving intervention or whether they could wait | | |
| | PC2. Know how to check all the vital signs | | |
| | PC3. Identify a high-risk case | | |
| | PC4. Assess the kind of resources the person will require. For e.g. The EMT should know the standard resources required for a person who comes to the emergency department for a similar ailment | 4 | |

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| | PC5. Communicate clearly and assertively | | |
| | PC6. Collaboratively be able to supervise/work collaboratively with other departments | | |
| | PC7. Multitask without compromising on quality and accuracy of care provided | | |
| | PC8. Use SALT method in day-to-day handling and START in mass casualty handling and disasters | | |
| | Total | 4 | |
| 4. HSS/ N 2306 (Manage Cardiovascular Emergency) | PC1. Describe the structure and function of the cardiovascular system | | |
| | PC2. Provide emergency medical care to a patient experiencing chest pain/discomfort | | |
| | PC3. Identify the symptoms of hypertensive emergency | | |
| | PC4. Identify the indications and contraindications for automated external defibrillation (AED) | | |
| | PC5. Explain the impact of age and weight on defibrillation | | |
| | PC6. Discuss the position of comfort for patients with various cardiac emergencies | | |
| | PC7. Establish the relationship between airway management and the patient with cardiovascular compromise | | |
| | PC8. Predict the relationship between the patient experiencing cardiovascular compromise and basic life support | | |
| | PC9. Explain that not all chest pain patients result in cardiac arrest and do not need to be attached to an automated external defibrillator | | |
| | PC10. Explain the importance of pre-hospital Advanced Life Support (ALS) intervention if it is available | | |
| | PC11. Explain the importance of urgent transport to a facility with Advanced Life Support if it is not available in the pre-hospital setting | | |
| | PC12. Explain the usage of aspirin and clopidogrel | | |
| | PC13. Differentiate between the fully automated and the semi-automated defibrillator | | |
| | PC14. Discuss the procedures that must be taken into consideration for standard operations of the various types of automated external defibrillators | | |
| | PC15. Assure that the patient is pulseless and apnoeic when using the automated external defibrillator | | |
| | PC16. Identify circumstances which may result in inappropriate shocks | | |

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| | PC4. Assess the patient's level of consciousness and document any signs of stroke | | |
| | PC5. Assess vital signs: Blood pressure, heart rate, and respiratory rate | | |
| | PC6. Perform a standardised pre-hospital stroke scale assessment such as the Cincinnati pre-hospital stroke scale | | |
| | PC7. Check serum blood sugar | | |
| | PC8. Collect critical background information on the victim and the onset of the stroke symptoms such as the medical history (especially any past strokes), the estimate of the time since any potential stroke symptoms first appeared, current medical conditions of the patient and current medications | | |
| | PC9. Determine the time of onset of symptoms | | |
| | PC10. Explain how patients, family, or bystanders should respond to a potential stroke | 4 | |
| | PC11. Discuss the actions recommended for emergency responders to potential stroke victims | | |
| | PC12. Explain the importance of transporting stroke patients immediately to an emergency department that has the personnel and equipment to provide comprehensive acute stroke treatment | | |
| | PC13. Carry out first triage of potential stroke victims | | |
| | PC14. Expedite transport of the patient to the nearest hospital equipped to handle strokes | | |
| | PC15. Explain the importance of immediately notifying the Emergency Department of the hospital of the arrival of a potential stroke victim | | |
| | PC16. Administer an IV line and oxygen and monitor the functioning of the heart on-route to the hospital | | |
| | PC17. Forward a written report to the emergency department with details on medical history and onset of the stroke symptoms | | |
| | Total | 4 | |
| 6.HSS/ N 2308 (Manage Allergic Reaction) | PC1. Recognise the patient experiencing an allergic reaction | | |
| | PC2. Perform the emergency medical care of the patient with an allergic reaction | | |
| | PC3. Establish the relationship between the patient with an allergic reaction and airway management | | |
| | PC4. Recognise the mechanisms of allergic response and the implications for airway management | | |

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| | PC5. State the generic and trade names, medication forms, dose, administration, action, and contraindications for the epinephrine auto-injector | 4 | | |
| | PC6. Administer treatment appropriately in case of not having access to epinephrine auto-injectors | | | |
| | PC7. Evaluate the need for medical emergency medical care for the patient with an allergic reaction | | | |
| | PC8. Differentiate between the general category of those patients having an allergic reaction and those patients having a severe allergic reaction, requiring immediate medical care including immediate use of epinephrine auto-injector | | | |
| | Total | 4 | | |
| 7.HSS/ N 2309 (Manage Poisoning or Overdose) | PC1. Recognise various ways that poisons enter the body | 4 | | |
| | PC2. Recognise signs/symptoms associated with various poisoning | | | |
| | PC3. Perform the emergency medical care for the patient with possible overdose | | | |
| | PC4. Perform the steps in the emergency medical care for the patient with suspected poisoning | | | |
| | PC5. Establish the relationship between the patient suffering from poisoning or overdose and airway management | | | |
| | PC6. State the generic and trade names, indications, contraindications, medication form, dose, administration, actions, side effects and re- | | | |
| | PC7. Recognise the need for medical direction in caring for the patient with poisoning or overdose | | | |
| | Total | 4 | | |
| 8.HSS/ N 2310 (Manage Environmental Emergency) | PC1. Recognise the various ways by which body loses heat | 4 | | |
| | PC2. List the signs and symptoms of exposure to cold | | | |
| | PC3. Perform the steps in providing emergency medical care to a patient exposed to cold | | | |
| | PC4. List the signs and symptoms of exposure to heat | | | |
| | PC5. Perform the steps in providing emergency care to a patient exposed to heat | | | |
| | PC6. Recognise the signs and symptoms of water-related emergencies | | | |
| | PC7. Identify the complications of near-drowning | | | |
| | PC8. Perform emergency medical care for bites and stings | | | |
| | PC9. Explain various relevant National Disaster Management Agency (NDMA) guidelines | | | |
| | Total | 4 | | |

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| 9.HSS/ N 2311 (Manage Behavioural Emergency) | PC1. Recognise the general factors that may cause an alteration in a patient's behaviour | 4 | | |
| | PC2. Recognise the various reasons for psychological crises | | | |
| | PC3. Identify the characteristics of an individual's behaviour which suggest that the patient is at risk for suicide | | | |
| | PC4. Identify special medical/legal considerations for managing behavioural emergencies | | | |
| | PC5. Recognise the special considerations for assessing a patient with behavioural problems | | | |
| | PC6. Identify the general principles of an individual's behaviour, which suggest the risk for violence | | | |
| | PC7. Identify methods to calm behavioural emergency patients | | | |
| | Total | 4 | | |
| 10.HSS/ N 2312 (Manage Obstetrics/Gynaecology emergencies) | PC1. Identify the following structures: Uterus, vagina, foetus, placenta, umbilical cord, amniotic sac, and perineum | 2 | | |
| | PC2. Identify and explain the use of the contents of an obstetrics kit | | | |
| | PC3. Identify pre-delivery emergencies | | | |
| | PC4. State indications of an imminent delivery | | | |
| | PC5. Differentiate the emergency medical care provided to a patient with pre-delivery emergencies from a normal delivery | | | |
| | PC6. Perform the steps in pre-delivery preparation of the mother | | | |
| | PC7. Establish the relationship between body substance isolation and childbirth | | | |
| | PC8. Perform the steps to assist in the delivery | | | |
| | PC9. State the steps required for care of the baby as the head appears | | | |
| | PC10. Explain how and when to cut the umbilical cord | | | |
| | PC11. Perform the steps in the delivery of the placenta | | | |
| | PC12. Perform the steps in the emergency medical care of the mother post-delivery | | | |
| | PC13. Summarise neonatal resuscitation procedures | | | |
| | PC14. Identify the procedures for the following abnormal deliveries: Breech birth, multiple births, prolapsed cord, limb presentation | | | |
| | PC15. Differentiate the special considerations for multiple births | | | |
| | PC16. Recognise special considerations of meconium | | | |
| | PC17. Identify special considerations of a premature baby | | | |
| | PC18. Perform the emergency medical care of a patient with a gynaecological emergency | | | |

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| | PC19. Perform steps required for emergency medical care of a mother with excessive bleeding | | | |
| | PC20. Complete a Pre-Hospital Care report for patients with obstetrical/gynaecological emergencies | | | |
| | Total | 2 | | |
| 11.HSS/ N 2313 (Manage Bleeding and Shock) | PC1. Recognise the structure and function of the circulatory system | 4 | | |
| | PC2. Differentiate between arterial, venous and capillary bleeding | | | |
| | PC3. State methods of emergency medical care of external bleeding | | | |
| | PC4. Establish the relationship between body substance isolation and bleeding | | | |
| | PC5. Establish the relationship between airway management and the trauma patient | | | |
| | PC6. Establish the relationship between mechanism of injury and internal bleeding | | | |
| | PC7. Recognise the signs of internal bleeding | | | |
| | PC8. Perform the steps in the emergency medical care of the patient with signs and symptoms of internal bleeding | | | |
| | PC9. Recognise the signs and symptoms of shock (hypo perfusion) | | | |
| | PC10. Perform the steps in the emergency medical care of the patient with signs and symptoms of shock (hypo perfusion) | | | |
| | PC11. Recognize different types of shock and initiate appropriate medical management | | | |
| | Total | | 4 | |
| 12. HSS/ N 2314 (Manage Soft Tissue Injury and Burns) | PC1. Recognise the major functions of the skin | | | |
| | PC2. Recognise the layers of the skin | | | |
| | PC3. Establish the relationship between body substance isolation (BSI) and soft tissue injuries | | | |
| | PC4. Recognise the types of closed soft tissue injuries | | | |
| | PC5. Perform the emergency medical care of the patient with a closed soft tissue injury | | | |
| | PC6. State the types of open soft tissue injuries | | | |
| | PC7. Recognise the emergency medical care of the patient with an open soft tissue injury | | | |
| | PC8. Recognise the emergency medical care considerations for a patient with a penetrating chest injury | | | |
| | PC9. Perform the emergency medical care considerations for a patient with an open wound to the abdomen | | | |
| | PC10. Differentiate the care of an open wound to the chest from an open wound to the abdomen | | | |
| | PC11. Classify burns | | | |

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| | PC10. How to apply pelvic binder techniques for fracture of pelvis | | | |
| | Total | 4 | | |
| 14.HSS/ N 2316 (Manage Injuries to head and spine Description) | PC1. State the components of the nervous system | 4 | | |
| | PC2. List the functions of the central nervous system | | | |
| | PC3. Recognise the structure of the skeletal system as it relates to the nervous system | | | |
| | PC4. Relate mechanism of injury to potential injuries of the head and spine | | | |
| | PC5. Recognise the implications of not properly caring for potential spine injuries | | | |
| | PC6. State the signs and symptoms of a potential spine injury | | | |
| | PC7. Recognise the method of determining if a responsive patient may have a spine injury | | | |
| | PC8. Relate the airway emergency medical care techniques to the patient with a suspected spine injury | | | |
| | PC9. Identify how to stabilise the cervical spine | | | |
| | PC10. Indications for sizing and using a cervical spine immobilisation device | | | |
| | PC11. Establish the relationship between airway management and the patient with head and spine injuries | | | |
| | PC12. Recognise a method for sizing a cervical spine immobilisation device | | | |
| | PC13. Log roll a patient with a suspected spine injury | | | |
| | PC14. Secure a patient to a long spine board | | | |
| | PC15. List instances when a short spine board should be used | | | |
| | PC16. Immobilise a patient using a short spine board | | | |
| | PC17. Recognise the indications for the use of rapid extrication | | | |
| | PC18. Understand the steps in performing rapid extrication | | | |
| | PC19. Identify the circumstances when a helmet should be left on the patient | | | |
| | PC20. Identify the circumstances when a helmet should be removed | | | |
| | PC21. Identify alternative methods for removal of a helmet | | | |
| | PC22. Stabilise patient's head to remove the helmet | | | |
| | PC23. Differentiate how the head is stabilised with a helmet compared to without a helmet | | | |
| | PC24. Immobilise paediatric and geriatric victims | | | |
| | PC25. Manage scalp bleeding | | | |
| | PC26. Manage eye injury | | | |
| | Total | 4 | | |

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| 15.HSS/ N 2317 (Manage Infants, Neonates and Children) | PC1. Identify the developmental considerations for the age groups of infants, toddlers, pre-school, school age and adolescent | 2 | | |
| | PC2. Identify differences in anatomy and physiology of the infant, child and adult patient | | | |
| | PC3. Differentiate the response of the ill or injured infant or child (age specific) from that of an adult | | | |
| | PC4. Understand various causes of respiratory emergencies | | | |
| | PC5. Differentiate between respiratory distress and respiratory failure | | | |
| | PC6. Perform the steps in the management of foreign body airway obstruction | | | |
| | PC7. Implement emergency medical care strategies for respiratory distress and respiratory failure | | | |
| | PC8. Identify the signs and symptoms of shock (hypoperfusion) in the infant and child patient | | | |
| | PC9. Recognise the methods of determining end organ perfusion in the infant and child patient | | | |
| | PC10. Identify the usual cause of cardiac arrest in infants and children versus adults | | | |
| | PC11. Recognise the common causes of seizures in the infant and child patient | | | |
| | PC12. Perform the management of seizures in the infant and child patient | | | |
| | PC13. Differentiate between the injury patterns in adults, infants, and children | | | |
| | PC14. Perform the field management of the infant and child trauma patient | | | |
| | PC15. Summarise the indicators of possible child abuse and neglect | | | |
| | PC16. Recognise the medical legal responsibilities in suspected child abuse | | | |
| | PC17. Recognise need for EMT debriefing following a difficult infant or child transport | | | |
| Total | 2 | | | |
| 16.HSS/ N 2318 (Manage respiratory emergency) | PC1. Recognise the anatomical components of the upper airway including: | | | |
| | a. Nasopharynx | | | |
| | b. Nasal air passage | | | |
| | c. Pharynx | | | |
| | d. Mouth | | | |
| | e. Oropharynx | | | |

| Total | | 4 | | |
|---|--|---|--|--|
| 17.HSS/ N 2319 (Manage severe abdominal pain) | PC1. Recognise the anatomical components of the abdomen and their functions including: | | | |
| | a. Left Upper Quadrant | | | |
| | o Most of the stomach | | | |
| | o Spleen | | | |
| | o Pancreas | | | |
| | o Large intestine | | | |
| | o Small intestine | | | |
| | o Left kidney (upper portion) | | | |
| | b. Right Upper Quadrant | | | |
| | o Liver | | | |
| | o Gallbladder | | | |
| | o Part of the large intestine | | | |
| | o Right kidney (upper portion) | | | |
| | o Small intestine | | | |
| | c. Right Lower Quadrant | | | |
| | o Appendix | | | |
| | o Large intestine | | | |
| | o Female reproductive organs | | | |
| | o Small intestine | | | |
| | o Right kidney (lower portion) | | | |
| | o Right ureter | | | |
| | o Right ovary & fallopian tube | | | |
| | d. Left Lower Quadrant | | | |
| | o Large intestine | | | |
| | o Small intestine | | | |
| | o Left kidney (lower portion) | | | |
| | o Left ureter | | | |
| | o Left ovary | | | |
| | o Left fallopian tube | | | |
| | e. Midline structures | | | |
| | o Small intestine | | | |
| | o Urinary bladder | | | |
| o Uterus | | | | |
| PC2. Recognise the symptoms and cause of visceral pain | 4 | | | |
| PC3. Recognise the symptoms and causes of parietal pain | | | | |
| PC4. Recognise the symptoms and possible causes of referred pain including: | | | | |
| | | | | |

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| | a. Right shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the right); gallstone; subphrenic abscess; free abdominal blood | | |
| | b. Left shoulder (or neck, jaw, scapula) – possible irritation of the diaphragm (usually on the left); ruptured spleen; pancreatic disease or cancer; subphrenic abscess; abdominal blood | | |
| | c. Midline, back pain – aortic aneurysm or dissection; pancreatitis, pancreatic cancer, kidney stone | | |
| | d. Mid-abdominal pain – small bowel irritation, gastroenteritis, early appendicitis | | |
| | e. Lower abdominal pain – diverticular disease (herniations of the mucosa and submucosa of the intestines), Crohn’s disease (a type of inflammatory bowel disease), ulcerative colitis | | |
| | f. Sacrum pain – perirectal abscess, rectal disease | | |
| | g. Epigastrium pain – peptic, duodenal ulcer; gallstone, hepatitis, pancreatitis, angina pectoris | | |
| | h. Testicular pain – renal colic; appendicitis | | |
| | PC5. Complete a focused history and physical exam of the patient including: | | |
| | a. Visual inspection | | |
| | b. Auscultating the abdomen | | |
| | c. Palpating the abdomen | | |
| | PC6. Establish airway in patient | | |
| | PC7. Place patient in position of comfort | | |
| | PC8. Calm and reassure the patient | | |
| | PC9. Look for signs of hypoperfusion | | |
| | PC10. Recognise possible diagnoses for abdominal pain | | |
| | PC11. State the treatment for managing various causes of abdominal pain | | |
| | PC12. Recognise potential diagnoses which imply the condition of the patient may deteriorate and highlight the need for frequent reassessment and advanced life support interventions | | |
| | PC13. Alert the Emergency Centre/ Healthcare provider in advance of a priority case (when required) | | |
| | Total | 4 | |
| 18.HSS/ N 2320 (Manage Mass Casualty Incident) | PC1. Establish an Incident Management Structure on arrival at the scene including: | | |
| | a. Designating an Incident Commander to manage the incident | | |
| | b. As Incident Commander, designating Triage Team(s), Treatment Team(s), and a Transport Officer | | |
| | PC2. Set up separate areas for treatment, triage and transport | | |

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| | PC3. Conduct an initial triage of patients by using the START triage model for adult patients, JumpSTART Triage for paediatric patients and the SMART triage tagging system | | | |
| | PC4. Use appropriate personal protective equipment while conducting initial triage | | | |
| | PC5. Tag severity/ criticality of patient using colour coded tags | | | |
| | PC6. Direct non-injured and/or slightly injured victims to the triage area set up for those with minor injuries | 4 | | |
| | PC7. Monitor patients with minor injuries for changes in their condition | | | |
| | PC8. Maintain an open airway and stop uncontrolled bleeding | | | |
| | PC9. Extract patients from the casualty area based on initial triage to designated triage and treatment areas | | | |
| | PC10. Use equipment like cots and litters for extraction where required | | | |
| | PC11. Re-triage patients extracted to the triage and treatment areas | | | |
| | PC12. Provide treatment and deliver patients to transport area | | | |
| | PC13. Transport patients to healthcare facility | | | |
| | PC14. Alert healthcare facilities in advance of possible arrival of multiple patients | | | |
| | Total | 4 | | |
| 19.HSS/ N 2324 (Manage diabetes emergency) | PC1. Identify the patient taking diabetic medications and the implications of a diabetes history | | | |
| | PC2. Perform the steps in the emergency medical care of the patient taking diabetic medicine with a history of diabetes | | | |
| | PC3. Establish the relationship between airway management and the patient with altered mental status | 4 | | |
| | PC4. Recognize the generic and trade names, medication forms, dose, administration, action, and contraindications for oral glucose | | | |
| | PC5. Evaluate the need for medical direction in the emergency medical care of the diabetic patient | | | |
| | Total | 4 | | |
| 20. HSS/ N 2302 (Size up the scene at the site) | PC1. Ensure that all safety precautions are taken at the scene of the emergency | | | |
| | PC2. Introduce themselves to patient(s) and ask for their consent to any treatment | | | |
| | PC3. Understand the implications of nuclear, radioactive, biological, chemical and explosive incidents and take appropriate action | | | |

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| | PC4. Collaborate effectively with other emergency response agencies and explain the situation clearly to them. This includes bomb disposal squads, fire departments, chemical, biological and nuclear agencies | | |
| | PC5. Reassure patient(s) and bystanders by working in a confident, efficient manner | | |
| | PC6. Work expeditiously while avoiding mishandling of patient(s) and undue haste | | |
| | PC7. Recognise and react appropriately to persons exhibiting emotional reactions | | |
| | PC8. Interact effectively with the patient(s), relatives and bystanders who are in stressful situations | 4 | |
| | PC9. Obtain information regarding the incident through accurate and complete scene assessment and document it accordingly | | |
| | PC10. Evaluate the scene and call for backup if required | | |
| | PC11. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority | | |
| | PC12. Maintain competence within one's role and field of practice | | |
| | PC13. Collaborate with the law agencies at a crime scene | | |
| | PC14. Promote and demonstrate good practice as an individual and as a team member at all times | | |
| | PC15. Identify and manage potential and actual risks to the quality and safety of work done | | |
| | PC16. Evaluate and reflect on the quality of one's work and make continuing improvements | | |
| | PC17. Understand relevant medico-legal principles | | |
| | PC18. Function within the scope of care defined by state, regional and local regulatory | | |
| | Total | 4 | |
| 21. HSS/ N 9610 (Follow infection control policies and procedures) | PC1. Perform the standard precautions to prevent the spread of infection in accordance with organisation requirements | | |
| | PC2. Perform the additional precautions when standard precautions alone may not be sufficient to prevent transmission of infection | | |
| | PC3. Minimise contamination of materials, equipment and instruments by aerosols and splatter | | |
| | PC4. Identify infection risks and implement an appropriate response within own role and responsibility | | |
| | PC5. Document and report activities and tasks that put patients and/or other workers at risk | | |

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| PC6. Respond appropriately to situations that pose an infection risk in accordance with the policies and procedures of the organization |
| PC7. Follow procedures for risk control and risk containment for specific risks |
| PC8. Follow protocols for care following exposure to blood or other body fluids as required |
| PC9. Place appropriate signs when and where appropriate |
| PC10. Remove spills in accordance with the policies and procedures of the organization |
| PC11. Maintain hand hygiene by washing hands before and after patient contact and/or after any activity likely to cause contamination |
| PC12. Follow hand washing procedures |
| PC13. Implement hand care procedures |
| PC14. Cover cuts and abrasions with water-proof dressings and change as necessary |
| PC15. Wear personal protective clothing and equipment that complies with Indian Standards, and is appropriate for the intended use |
| PC16. Change protective clothing and gowns/aprons daily, more frequently if soiled and where appropriate, after each patient contact |
| PC17. Demarcate and maintain clean and contaminated zones in all aspects of health care work |
| PC18. Confine records, materials and medicaments to a well-designated clean zone |
| PC19. Confine contaminated instruments and equipment to a well-designated contaminated zone |
| PC20. Wear appropriate personal protective clothing and equipment in accordance with occupational health and safety policies and procedures when handling waste |
| PC21. Separate waste at the point where it has been generated and dispose of into waste containers that are colour coded and identified |
| PC22. Store clinical or related waste in an area that is accessible only to authorised persons |
| PC23. Handle, package, label, store, transport and dispose of waste appropriately to minimise potential for contact with the waste and to reduce the risk to the environment from accidental release |
| PC24. Dispose of waste safely in accordance with policies and procedures of the organisation and legislative requirements |

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| PC25. Wear personal protective clothing and equipment during cleaning procedures | | |
| PC26. Remove all dust, dirt and physical debris from work surfaces | | |
| PC27. Clean all work surfaces with a neutral detergent and warm water solution before and after each session or when visibly soiled | | |
| PC28. Decontaminate equipment requiring special processing in accordance with quality management systems to ensure full compliance with cleaning, disinfection and sterilisation protocols | | |
| PC29. Dry all work surfaces before and after use | | |
| PC30. Replace surface covers where applicable | | |
| PC31. Maintain and store cleaning equipment | | |
| Total | 4 | |

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| Grand Total-1 (Subject Domain) | 80 | |
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| Soft Skills and Communication | Pick all NOS compulsarilly totalling 20 marks |
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| National Occupational Standards (NOS) | Performance Criteria (PC) | Out Of | Marks Awarded by Assessor |
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| 1. Decision making and leadership quality | | | |
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| HSS/ N 2321 (Select the proper provider institute for transfer) | PC1. Explain to the patient about his role and the reason for selecting a particular health provider | 2 | |
| | PC2. Consolidate complete medical history of the patient with the severity of the damage and impending risk in terms of time and the kind of treatment required | | |
| | PC3. Allocate patient to the nearest provider institute | | |
| | PC4. Base the allocation on the kind of care required namely primary, secondary or tertiary care centres | | |
| | PC5. Make sure that the selection of the institute is in adherence with the legal regulation | | |
| | PC6. Obtain guidance from medical officer for selection of proper provider institute | | |
| | PC7. Provide pre-arrival information to the receiving hospital | | |
| | PC8. Obtain guidance of medical officer when ambulance needed to be stopped en-route (e.g. during emergency child birth) | | |
| HSS/ N 2322 (Transport patient to the provider) | PC1. Adhere fully to the rules and regulations related to the usage of ground and air transport | | |

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| institute) | <p>PC2. Adhere fully to the steps involved in treating and transporting the patient</p> <p>PC3. Positively manage situations where transport is a problem</p> <p>PC4. Allocate the means of transport keeping in mind the emergency, weather conditions and availability of transport</p> <p>PC5. Adhere fully to procedures once the patient reaches the hospital</p> <p>PC6. Use correct medication and equipment for treatment of immediate threats to life</p> | 2 | |
| HSS/ N 2323 (Manage Patient Handover to the provider institute) | <p>PC1. Provide a verbal report to the medical staff on the condition of the patient and initial findings</p> <p>PC2. Complete the Patient Care Report (PCR) and hand it over to the medical staff</p> <p>PC3. Hand over the consent form signed by the patient or a relative</p> | 2 | |
| 2. Attitude | | | |
| HSS/ N 9603 (Act within the limits of one's competence and authority) | <p>PC1. Adhere to legislation, protocols and guidelines relevant to one's role and field of practice</p> <p>PC2. Work within organisational systems and requirements as appropriate to one's role</p> <p>PC3. Recognise the boundary of one's role and responsibility and seek supervision when situations are beyond one's competence and authority</p> <p>PC4. Maintain competence within one's role and field of practice</p> <p>PC5. Use relevant research based protocols and guidelines as evidence to inform one's practice</p> <p>PC6. Promote and demonstrate good practice as an individual and as a team member at all times</p> <p>PC7. Identify and manage potential and actual risks to the quality and safety of practice</p> <p>PC8. Evaluate and reflect on the quality of one's work and make continuing improvements</p> | 2 | |
| HSS/ N 9607 (Practice Code of conduct while performing duties) | <p>PC1. Adhere to protocols and guidelines relevant to the role and field of practice</p> <p>PC2. Work within organisational systems and requirements as appropriate to the role</p> <p>PC3. Recognise the boundary of the role and responsibility and seek supervision when situations are beyond the competence and authority</p> <p>PC4. Maintain competence within the role and field of practice</p> <p>PC5. Use protocols and guidelines relevant to the field of practice</p> | | |

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| PC6. Promote and demonstrate good practice as an individual and as a team member at all times |
| PC7. Identify and manage potential and actual risks to the quality and patient safety |
| PC8. Maintain personal hygiene and contribute actively to the healthcare ecosystem |

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| HSS/ N 9605 (Manage work to meet requirements) | PC1. Clearly establish, agree, and record the work requirements | 2 | |
| | PC2. Utilise time effectively | | |
| | PC3. Ensure his/her work meets the agreed requirements | | |
| | PC4. Treat confidential information correctly | | |
| | PC5. Work in line with the organisation's procedures and policies and within the limits of his/her job role | | |
| HSS/ N 9601 (Collate and Communicate Health Information) | PC1. Respond to queries and information needs of all individuals | | |
| | PC2. Communicate effectively with all individuals regardless of age, caste, gender, community or other characteristics | | |
| | PC3. Communicate with individuals at a pace and level fitting their understanding, without using terminology unfamiliar to them | | |
| | PC4. Utilise all training and information at one's disposal to provide relevant information to the individual | | |
| | PC5. Confirm that the needs of the individual have been met | | |
| | PC6. Adhere to guidelines provided by one's organisation or regulatory body relating to confidentiality | | |
| | PC7. Respect the individual's need for privacy | | |
| | PC8. Maintain any records required at the end of the interaction | | |

4. Safety management

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| HSS/ N 9606 (Maintain a safe, healthy, and secure working environment) | PC1. Identify individual responsibilities in relation to maintaining workplace health safety and security requirements | 2 | |
| | PC2. Comply with health, safety and security procedures for the workplace | | |
| | PC3. Report any identified breaches in health, safety, and security procedures to the designated person | | |
| | PC4. Identify potential hazards and breaches of safe work practices | | |
| | PC5. Correct any hazards that individual can deal with safely, competently and within the limits of authority | | |
| | PC6. Promptly and accurately report the hazards that individual is not allowed to deal with, to the relevant person and warn other people who may get affected | | |

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| PC7. Follow the organisation's emergency procedures promptly, calmly, and efficiently |
| PC8. Identify and recommend opportunities for improving health, safety, and security to the designated person |
| PC9. Complete any health and safety records legibly and accurately |

5. Waste Management

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| HSS/ N 9609 (Follow biomedical waste disposal protocols) | PC1. Follow the appropriate procedures, policies and protocols for the method of collection and containment level according to the waste type | 2 |
| | PC2. Apply appropriate health and safety measures and standard precautions for infection prevention and control and personal protective equipment relevant to the type and category of waste | |
| | PC3. Segregate the waste material from work areas in line with current legislation and organisational requirements | |
| | PC4. Segregation should happen at source with proper containment, by using different colour coded bins for different categories of waste | |
| | PC5. Check the accuracy of the labelling that identifies the type and content of waste | |
| | PC6. Confirm suitability of containers for any required course of action appropriate to the type of waste disposal | |
| | PC7. Check the waste has undergone the required processes to make it safe for transport and disposal | |
| | PC8. Transport the waste to the disposal site, taking into consideration its associated risks | |
| | PC9. Report and deal with spillages and contamination in accordance with current legislation and procedures | |
| | PC10. Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols | |

6. Team Work

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| HSS/ N 9604 (Work effectively with others) | PC1. Communicate with other people clearly and effectively | 2 |
| | PC2. Integrate one's work with other people's work effectively | |
| | PC3. Pass on essential information to other people on timely basis | |
| | PC4. Work in a way that shows respect for other people | |
| | PC5. Carry out any commitments made to other people | |
| | PC6. Reason out the failure to fulfil commitment | |
| | PC7. Identify any problems with team members and other people and take the initiative to solve these problems | |
| | PC8. Follow the organisation's policies and procedures | |

| 7. Ethics | | | |
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| HSS/ N 2303 (Follow evidence based Protocol while managing patients) | PC1. Understand the appropriate and permissible medical service procedures which may be rendered by an EMT to a patient not in a hospital. For example, steps to be followed for cardiovascular emergencies or emergency of an environmental nature like burns, hypothermia | 2 | |
| | PC2. Understand the communication protocols for medical situations that require direct voice communication between the EMT and the Medical officer prior to the EMT rendering medical services to the patients outside the hospital | | |
| | PC3. Adhere to laws, regulations and procedures relating to the work of an EMT | | |
| | PC4. Demonstrate professional judgement in determining treatment modalities within the parameters of relevant protocols | | |
| | PC5. Understand the universal approach to critical patient care and package-up-patient-algorithm(transport protocol) | | |
| 5. Quality | | | |
| HSS/ N 9611: Monitor and assure quality | PC1. Conduct appropriate research and analysis | 2 | |
| | PC2. Evaluate potential solutions thoroughly | | |
| | PC3. Participate in education programs which include current techniques, technology and trends pertaining to the dental industry | | |
| | PC4. Read Dental hygiene, dental and medical publications related to quality consistently and thoroughly | | |
| | PC5. Report any identified breaches in health, safety, and security procedures to the designated person | | |
| | PC6. Identify and correct any hazards that he/she can deal with safely, competently and within the limits of his/her authority | | |
| | PC7. Promptly and accurately report any hazards that he/she is not allowed to deal with to the relevant person and warn other people who may be affected | | |
| | PC8. Follow the organisation's emergency procedures promptly, calmly, and efficiently | | |
| | PC9. Identify and recommend opportunities for improving health, safety, and security to the designated person | | |
| | PC10. Complete any health and safety records legibly and accurately | | |
| Grand Total-2 (Soft Skills and Comunication) | | 20 | |