EMS Educator Playbook

Tips and tricks to use real patient cases to meet National Education Standards







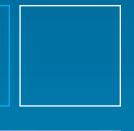








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PRIMARY/INITIAL ASSESSMENT

Course:			
Date:			

PART 1: LESSON PLAN: PRIMARY/INITIAL ASSESSMENT



TOOL KIT

- Whiteboard and markers
- EMT textbook
- Computer and projector
- PowerPoint lecture



ReelDx account

TEACHING METHODS/KEY POINTS

- Topic and Chapter(s)
- Review of Objectives-Tie lesson objectives back to course outline and Education Standards.
- Create a to do list on the board.



PRO TIP

The first thing I typically do is announce the topic for the day and remind students of the corresponding assigned materials (textbook, handouts, articles, cases, etc....) I then go over our lesson objectives and relate them back to the National Standards. All students should be familiar with the National Standards as it is the required content for certifications. I wrap up the introduction with a written to do list.

KNOWLEDGE CHECK

- Acquire student knowledge of: Patient care, Scene safety and review previous content.
- Does anyone have experience working with patients?
- Has anyone previously been taught to take patient histories?
- Suggest that students partner with experienced peers during lab practice and/or review sessions.



- PRO TIP

Before starting new material I like to review the previously covered content and assess the current knowledge/abilities of students. This can be accomplished in class through question and answer, discussion, or through more formal methods such as a graded assignment/quiz.

PART 2: LECTURE LEARNING OBJECTIVES



TOOL KIT

- Whiteboard and markers
- EMT textbook
- Computer and projector
- PowerPoint lecture
- Internet connection



ReelDx account

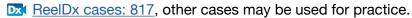
Cognitive 1: Students will be able to list the steps of the primary survey and assessment.

Cognitive 2: Students will be able to identify steps completed during the primary survey and assessment.

Cognitive 3: Students will be able to assess and critique the performance of others during the primary survey and assessment.

TEACHING METHODS/KEY POINTS

- PowerPoint lecture and lecture notes
- NREMT Psychomotor portfolio skill sheets for pediatric, adult normal and adult trauma patient assessments.





- PRO TIP

PowerPoint is a common method of content delivery. Therefore I included it in the teaching methods section. However, there are many other available options. I am a particular fan of the flipped classroom.

Students should be intimately familiar with the NREMT Paramedic Portfolio skill sheets. All students who wish to take National Registry certifying examinations must successfully complete a Paramedic Portfolio. Any skill sheet that is comparable can be used.

I would not start with case 817 since it is the focus of the lesson. I would ask students to watch some 2-3 different cases and identify steps completed or missed during the primary assessment. Have students discuss this in class.

EVALUATION METHOD

- Students will complete a guiz-based learning assessment for cognitive understanding of content. (Cognitive #1)
- Have students identify components of the primary assessment from ReelDx cases: 817. (Cognitive #2 and Psychomotor #2)
- Close all drawers on and have students view the video. Ask students to use the NREMT skill sheet to assess the initial assessment performed in the case. (Cognitive #2 and Psychomotor #2)



PRO TIP

I would ask that students complete this at the end of the cognitive lesson as individual assignments.

PART 3: LAB LEARNING OBJECTIVES



TOOL KIT

- Whiteboard and markers
- EMT textbook
- Computer and projector
- PowerPoint lecture
- Internet connection



ReelDx account

NREMT skill sheet

Psychomotor 1: Students will be able to demonstrate the steps of the primary survey and assessment.

Psychomotor 2: Students will be able to assess and critique the performance of others during the primary survey and assessment.

TEACHING METHODS/KEY POINTS

- NREMT Psychomotor portfolio skill sheets for pediatric, adult normal and adult trauma patient assessments.
- ReelDx cases: 817, other cases may be used for practice.

EVALUATION METHOD



During lab activities break students into small groups (2-3) and present them with case 817 as a scenario. Have students complete peer evaluations using the NREMT skill sheets (Psychomotor #1 and #2).



- PRO TIP

This is a hands-on activity. Once students have read, participated in class discussion, as well as, watched and evaluated a variety of primary assessments they should practice completing one. Using the information from case 817 create a lab scenario. Students should be split into groups of 2-3 members. Each member should have an active role team leader, team member, first responder, family, bystander, etc... As students complete the scenario have their peers evaluate them using NREMT skills sheets. It may also be useful to have at least one student scribe action by action.

PART 4: CONCLUSION



TOOL KIT

- EMT textbook
- Dx
- ReelDx account
- NREMT skill sheet

TEACHING METHODS/KEY POINTS

- Refer to objectives and learning outcomes
- Review and summarize main points
- · Emphasis on value of material to future careers

HOMEWORK

- Open the drawers on ReelDx cases: 817 and ask students to review the entire case for homework.
- Have students complete the scenario review worksheet on case 817 based on review of the case and in class scenario practice (Cognitive #1-3, Psychomotor #2, and Affective #1).

SUMMATIVE EVALUATION/ASSESSMENT



TOOL KIT

Student learning logs

TEACHING METHODS/KEY POINTS

Assessment (did learning take place?)

Student learning logs: Entries do not have to be lengthy or even written in structured sentences. Entry structure is up to the student and can take many forms including sentences, bulleted lists, concept maps, drawings, or charts/diagrams. Class entries should address:

- 1) What did I learn today?
- 2) What am I still confused about? Learning logs are collected at the end of class for instructor review.

Ask students to answer additional prompts in the learning logs.

- 1) Why is it important to complete a thorough primary assessment? (Affective #1)
- 2) How would the following changes effect your assessment of the patient? The patient is an adult? The mother does not speak English? The patient is with a guardian/babysitter instead of parent? (Affective #1)



PRO TIP

Learning logs can be used in a variety of ways. Students can complete them in 1-2 minutes at the end of class, as homework, or some combination. I typically have students complete the questions in bullet one at the end of class as a reflection of learning. The additional prompts are assigned as homework. Logs are collected regularly, and students receive individual feedback.

REFLECTION

- 1. Was the instructional objective met? How do I know students learned what was intended?
- 2. Were the students productively engaged? How do I know?
- 3. Did I alter my instructional plan as I taught the lesson? Why?
- 4. What additional assistance, support, and/or resources would have further enhanced this lesson?
- 5. If I had the opportunity to teach the lesson again to the same group of students, would I do anything differently? What? Why?



These are for instructor use. I include them as a reminder to assess my teaching. Did I accomplish what I intended? How do I know that? Were the students bored? If so, how do I get their attention? I may not make corrections to the lesson right away but the notes I make will be available prior to the next time it is taught.

EMT EDUCATION STANDARDS ASSOCIATED WITH LESSON

Applies scene information and patient assessment findings (scene size-up, primary and secondary assessment, patient history, reassessment) to guide emergency management.

- a. Primary Survey/Primary Assessment
 - i. Initial General Impression based on the patient's age appropriate appearance
 - ii. Level of Consciousness
 - iii. Airway status
 - iv. Breathing status
 - v. Circulatory Status
- b. Integration of treatment/procedures needed to



- PRO TIP

Directly listing the National Standards that correspond with the lesson helps to demonstrate to state, national, and accreditation bodies the curriculum is being covered.

STUDENT LEARNING OUTCOMES

Cognitive

- 1. Students will be able to list the steps of the primary survey and assessment.
- 2. Students will be able to identify steps completed during the primary survey and assessment.
- 3. Students will be able to develop a plan to complete the primary survey and assessment for alternate scenarios.

Psychomotor

- 1. Students will be able to demonstrate the steps of the primary survey and assessment.
- 2. Students will be able to assess and critique the performance of others during the primary survey and assessment.

Affective

Students will be able to argue the merit of a thorough and detailed primary survey and assessment.



- PRO TIP

Directly listing the National Standards that correspond with the lesson helps to demonstrate to state, national, and accreditation bodies the curriculum is being covered.

SCENARIO REVIEW WORKSHEET

1.	What is the first thing that comes to mind about the case and scenario experience?
2.	What went right and why?
3.	What would you differently and why?
4.	What is your impression of the patient? Sick? Not Sick? Stable? Unstable?
5.	What are your differential diagnosis?
6.	What do you think should happen with this patient? What is your patient care goal?

SCENARIO REVIEW REFLECTIVE THINKING

1.	What were your thoughts during the scenario practice or initial review of the case?
2.	What were your thoughts following the scenario practice and review of the case?
3.	Consider what you would have done differently? Create a script for a primary/initial assessment

QUIZ FOR CASE 817

- 1. Students will be able to list the steps of the primary survey and assessment.
- 2. Students will be able to identify steps completed during theprimary survey and assessment.
- 3. Students will be able to demonstrate the steps of the primary survey and assessment.
- 4. Students will be able to assess and critique the performance of others during the primary survey and assessment.
- 5. Students will be able to develop a plan to complete the primary surveyand assessment for alternate scenarios.
- 6. Students will be able to argue the merit of a thorough and detailed primary survey and assessment.

1. Which of the following is a part of the primary assessment.

- ~ Assessing the number of patients on scene and the mechanism of injury are both part of the scene size-up. Heart sounds should be assessed during the head-to-toe examination. Determining the level of consciousness should be completed early in the patient assessment as part of the primary assessment.
- @ Assessing the number of patients on scene and the mechanism of injury are both part of the scene size-up. Heart sounds should be assessed during the head-to-toe examination. Determining the level of consciousness should be completed early in the patient assessment as part of the primary assessment.
 - a. Assessing the number of patients on scene.
 - b. Assessing the mechanism of injury.
 - c. Assessing heart sounds.
 - d.* Assessing the level of consciousness. (Asterisk marks denote the correct answer)

2. Identify the list below that accurately represents the steps of the primary assessment in the suggested order.

- a. Form a general impression, determine the patient priorities, assess level of consciousness, and -spine precautions.
- b.* Complete a general impression, consider C-spine precautions, assess airway, breathing, circulation, and level of consciousness, followed by determination of patient priorities.
- c. Determine patient priorities, form a general impression, consider C-Spine precautions, assess level of consciousness, assess circulation, breathing, and airway.
- d. Assessthe level of consciousness, form a general impression, determine patient priorities, assess airway, breathing, and circulation.

3. Which observation from the across-the-room impression would be most concerning?

- a. It is a snowy day in February and your patient is dressed in jeans, a sweater, and is wearing coat.
- b. While approaching your patient you note the absence of any obvious hemorrhaging.
- c.* As you enterthe room you notice that your patient is leaning forward, has sub clavicular retractions, and rapid shallow respirations.
- d. It is a warm temperate day in May and your patient is pink and dry.
- 4. You were dispatched reference "sick call." Upon your arrival, you found a 67-year-oldfemale sitting bolt upright in bed, pale and diaphoretic, increased respirations, and audible wheezing. Your patient states she has been having trouble breathing for the last several days, with increased difficulty today. Which statement below best represents the patient's chief complaint?
 - a.* difficulty breathing
 - b. chest pain
 - c. wheezing
 - d. pneumonia

difficu	on your arrival, you find a 42-year-old male sitting on a chair in his kitchen. His wife relays it has been ult to regulate his sugar for several days. He looks at you when you enter the room, speaks in full sentences confused and answers questions inappropriately, and his skin is pale and diaphoretic. Your patient presents abnormalities of
a.	cervical spine
b.	airway
C.	breathing
d.*	disability
6. The	e patient in Case 817 presents with need for cervical spine precautions.
a.	True
b.*	False
conce	sed on theacross the room assessment of the patient in Case 817 which of the following is of the greatest ern (please note across the room assessment can be completed within the first 30-60 seconds of video ent, and not all components are easily visible)?
a.	hemorrhage
b.	normalwork of breathing
c.*	altered level of consciousness
d.	tripod positioning
8. The	e patient in Case 817 presents with which airway abnormality?
a.	tripod positioning
b.*	emesis and/or drooling
c.	edema
d.	foreign body obstruction
9. The	e patient in Case 817 presents with which abnormality of breathing?
a.	decreased respiratory rate
b.	wheezing on exhalation
c.	retractions and nasal flaring
d.*	grunting respirations
	ased on your primary survey and assessment of the patient in Case 817, what is the most appropriate initial ment?
a.	application of the cardiac monitor
b.*	airway management and oxygen therapy
C.	initiation of intravenous access
d.	application of a cervical collar