



Standard Guide for Training the Emergency Medical Technician (Paramedic)¹

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1. Scope

1.1 This guide covers the training standard for the emergency medical technician (paramedic) to deal with emergencies. Primary care and wilderness/delayed/prolonged context training for the emergency medical technician (paramedic) is not within the scope of this guide, but may be dealt with in other ASTM standards.

1.2 This guide identifies the knowledge and skills that all programs that train the emergency medical technician (paramedic) should include in their training program.

1.3 *This standard does not purport to address all of the safety concerns, if any, associated with its use. It is the responsibility of the user of this standard to establish appropriate safety and health practices and determine the applicability of regulatory limitations prior to use.*

2. Referenced Documents

2.1 ASTM Standards:

F 1149 Practice for Qualifications, Responsibilities, and Authority of Individuals and Institutions Providing Medical Direction of Emergency Medical Services²

F 1220 Guide for Emergency Medical Services Systems (EMSS) Telecommunications²

F 1254 Practice for Performance of Prehospital Manual Defibrillation²

F 1255 Practice for Performance of Prehospital Automated Defibrillation²

F 1258 Practice for Emergency Medical Dispatch²

F 1288 Guide for Planning for and Response to a Multiple Casualty Incident²

F 1489 Guide for Performance of Patient Assessment by the Emergency Medical Technician (Paramedic)²

F 1517 Guide for Scope of Performance of Emergency Medical Services Ambulance Operations²

3. Terminology

3.1 Definitions of Terms Specific to This Standard:

3.1.1 *auscultation*—examination by listening with a stethoscope.

3.1.2 *EMSS communications subsystem*—comprises those resource arrangements for notifying the EMS system of an emergency, for mobilizing and dispatching resources, for exchanging information, for remote monitoring of vital indicators, and for transmission of treatment procedures and directions (see Guide F 1220).

3.1.3 *human anatomy*—the branch of science dealing with the structure of the human organisms.

3.1.4 *human physiology*—the science dealing with the functions of the human living organism.

3.1.5 *incident command system*—the combination of facilities, equipment, personnel, procedures, and communications operating within a common organizational structure with responsibility for the management of assigned resources to effectively accomplish stated objectives pertaining to an incident.

3.1.6 *inspection*—examination by careful visualization of the body or a part of the body.

3.1.7 *management*—actions taken by the emergency medical technician (paramedic) for a patient in need of assistance due to a real or perceived traumatic or medical condition.

3.1.8 *palpation*—examination by touching with the hand(s).

3.1.9 *stress*—nonspecific response of the body to any demand made upon it.

3.1.10 *topographic anatomy*—a study of all the structures and their relationships in a given region.

3.1.11 *triage*—the process of sorting and making priorities for emergency medical care of the sick and injured on the basis of urgency and type of condition present, number of patients, and resources available.

4. Significance and Use

4.1 This guide establishes the national standard for training the emergency medical technician (paramedic).

4.2 This guide shall be used by those who develop the training curriculum to be used to train the emergency medical technician (paramedic).

4.3 Every person who is identified as an emergency medical technician (paramedic) shall have been trained to this guide.

4.4 It is understood that the scope of the medical practice is constantly evolving. Therefore, this guide does not contain recommendations for the management of illnesses and injuries. Furthermore, it is not intended to supersede the protocols and standing orders of the system medical director or the on-line medical physician (see Practice F 1149).

¹ This guide is under the jurisdiction of ASTM Committee F-30 on Emergency Medical Services and is the direct responsibility of Subcommittee F30.02 on Personnel, Training and Education.

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² *Annual Book of ASTM Standards*, Vol 13.01.