

**Texas Department of Health
EMS Book Review Committee**

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First Edition

Table of Contents

Forward	1
Main Text Reviews	2 - 12
Suggested Reading Lists	13 - 19
Supplemental Texts	20 - 56
Index of EMS Books Reviewed	57
Other Texts Available	58 - 60

**Emergency Medical Services Book Reviews
Advanced Life Support Category
First Edition**

This is the first of a proposed annual update of EMS Book Reviews. The purpose of these reviews is to help enlighten EMS educators and providers concerning books available in their field and help them to compare these books. As more books become available the reviews should become more specific and informative. We emphasize that any opinions expressed in these reviews are not opinions of the Texas Department of Health but only of the individual reviewers. We wish to thank the individuals and organizations who invested their time and energy in this publication. We also invite those interested that book reviews in the Basic Life Support Category are also available.

This book review handout is divided into four sections. The first section consists of reviews for complete texts in the Paramedic and Special Skills training categories. The second section offers suggested reading assignments for these texts. Because Nancy Caroline developed the Department of Transportation modules the reading assignments from her texts should be more in line with the modules. A third section reviews supplemental ALS texts. The last section lists other ALS and BLS texts that are available yet not reviewed in this ALS Book Review Handout. A final note is that we entertain no pretenses that these lists are exhaustive of all EMS books. On the contrary, our research showed many more books, particularly in the foreign language category. Publications and the EMS field itself are rapidly changing and expanding!

EMS BOOK REVIEW

1. General Information:

- a. **Title:** Emergency Care: Principles & Practices for the EMT-Paramedic 2nd Edition
- b. **Editors:** Alan B. Gazzaniga, M.D., Lloyd T. Iseri, M.D. and Martin Baren, M.D.
- c. **Publishing Company:** Reston Publishing Company, Inc., A Prentice-Hall Company
- d. **Copyright:** 1982
- e. **Cost:** \$21.95
- f. **Title of supplemental manuals or workbooks:** Available
- g. **Name of EMS Book Reviewer:** Paul A. Tabor
- h. **EMS Position of EMS Book Reviewer:** EMT-P, Field Consultant, PHR 8
- i. **Submitted to EMS Book Review Committee Membership:** Eric Kunish
- j. **Date:** 11-22-82
- k. **Pages:** 587 plus glossary and index

2. What training level(s) does this book apply?

Paramedic

3. Can this book be used as a complete text or as a supplement?

Complete Text

4. Is the writing style likeable and consistent?

Yes, and the format makes this a very readable text.

5. Is the level of presentation of material commensurate with the average student's capabilities?

This depends upon what an "average" student is. It is this reviewer's opinion that any of our students with a low education level and/or poor reading comprehension will find this book more difficult than Caroline. On the other hand it is more detailed than Caroline in many ways and many questions that I could not find answers to in Caroline were found in Emergency Care. Probably more knowledge than "average" would be required of one using this book as a text.

6. Are definitions, explanations and illustrations clear?

Yes

7. Is the content accurate?

Overall the content is very accurate. It does contain the latest AHA's CPR standards. But it adds to these. For example, after stating what the AHA says concerning when to stop CPR, this text then adds that since you are the more advanced person to whom CPR is being turned over to, as an EMT-P you may stop CPR if "cardiac death persists over 30 minutes in the presence of adequate ventilation" or "if there is clear CNS death". This type of thing happens in several places throughout the text. My only concern with this is that the text should make clear that many of these "other things" would be contingent upon local protocol.

Another example is concerning burn patients. The text says that one should never start an IV in the field on such patients because of the likelihood of infection. But again this would be a matter of local protocol.

When speaking of MAST Trousers the authors only mention one kind--the ones with pop-off valves. But the one and three gauge kinds should also be brought to the student's attention. In our area at least, these are in more widespread use anyway. The student should be made aware of all three kinds.

8. Are there numerous typographical or grammatical errors that reduce student clarity?

No

9. Are objectives presented and followed?

Strangely enough, only one chapter--Chapter 25 on "Pediatric Illnesses and Emergencies"--has objectives written out for it. But at the beginning of each chapter there is a box in the right-hand column called "Contents". This amounts to a brief outline of the chapter but, of course, this is no substitute for chapter objectives.

10. Are chapter objectives logical, reasonable, and properly sequential?

See #9 above.

11. Is the approach of this book different than other EMS books available?

No

12. Are there additions or deletions needed?

Chapter objectives could be added and the glossary should be expanded.

13. Generally, what is/are the book's strongest point(s)?

At the end of each chapter and in a different type print from the body of the chapter is a brief summary, a list of the important points to remember and a bibliography for that chapter.

Also, the thoroughness with which the content is covered is a plus for this text.

14. Generally, what is/are the book's weakest point(s)?

See #12 above?

15. What other comments do you have?

Compared to the first edition of just two years ago, this second edition expands the previous material and presents some new material as well. The chapters have been rearranged. There are some new illustrations and some information concerning specific systems was combined, generally making this second edition more readable and easily understood than the first. This is a much improved edition.

When reading this text, one should realize where the authors are coming from, i.e., it is primarily a "California text". All three editors are professors at the University of California. (And we all know California is "different", right?) This explains some of the "oddities" in the text. But don't be fooled--to date, overall, this is the best Paramedic Text this reviewer has seen and I highly recommend it. (However, don't forget #5 above.)

EMS BOOK REVIEW

1. General Information:

- a. **Title:** Emergency Care In The Streets (Second Edition)
- b. **Author:** Nancy L. Caroline, M.D.
- c. **Publisher:** Little, Brown and Company, Boston
- d. **Copyright:** 1983
- e. **Cost:** \$16.85
- f. **Title of supplemental manual or workbook:** Workbook for Emergency Care in the Streets (2nd Edition)
- g. **EMS Book Reviewer:** Rothy Moseley
- h. **Position of Reviewer:** Field Consultant, Public Health Region 8
- i. **Submitted to EMS Book Review Committee Membership:** Paul Tabor
- j. **Date:** 3/14/83

2. To what training level(s) does this book apply?

EMT-Special Skills and Paramedic

3. Can this book be used as a complete text or as a supplement?

Complete Text

4. Is the writing style likeable and consistent?

The style is readable and often humorous. An outline format is frequently used, and the use of capitalization draws attention to specific subjects. Some readers object to the animation and storytelling style of the sections on pharmacologic (alpha/beta) effects and on heart blocks. This reader appreciated the change, which creates a break in the technical material of these chapters.

5. Is the level of presentation of material commensurate with the average student's capabilities?

The level of presentation is about right for the average student. Some students may feel that the material has been somewhat oversimplified, but few should find it too difficult for an introductory advanced level text. Supplemental texts can be used as necessary for students at either end of the spectrum.

6. Are definitions, explanations and illustrations clear?

Flow charts, diagrams and explanations are reasonably clear. Illustrations of central venous cannulation and visualization of vocal cords might be clarified better with photographs or additional illustrations. Numerous supplemental texts and teaching aids, including AV materials are available to the conscientious instructor if those in the text seem insufficient or unclear on other subjects.

- 7. Is the content accurate?**
To the best of this reviewer's knowledge the content is accurate. The additions of several pharmacologic agents not included in the first edition, and of treatments missing from the first edition (e.g. mammalian diving reflex stimulation, updates of CPR) increase the accuracy and completeness of the text and demonstrate the need for currency in introductory texts especially in the emergency care field.
- 8. Are there numerous typographical or grammatical errors that reduce student clarity?**
None were noticed on first reading.
- 9. Are objectives presented and followed?**
Objectives are not presented, which could be considered a deficiency in light of today's emphasis on competency based education. Since Dr. Caroline was involved in the preparation of the DOT guidelines, and since they are so widely followed, possibly she felt that listing the objectives in this text would be redundant. Since many students may not have access to those guidelines, a listing of the objectives would seem to be in order in this text, preferably in each chapter.
- 10. Are chapter objectives logical, reasonable and properly sequential?**
Objectives are not presented.
- 11. Is the approach of this book different than other EMS books available?**
Flow charts such as the ones of pages 186-187, 485, and others, and summary treatment charts such as that on page 408 (among many others) make this text easier to follow than some texts. Practice strips in the arrhythmia section seem to have been adopted from the approach of other arrhythmia texts. While these elements are not unique, they add to this edition of Caroline's text some items that were not as evident in the first edition.
- 12. Are there additions or deletions needed?**
As noted in #9 and 10 above, the addition of chapter objectives would be a reasonable addition.
- 13. Generally, what is/are the book's strongest point(s)?**
The book's strongest points are first, the recognition by the author that this is not a static field and of the need for a new edition. This is especially evident in the revision of CPR and ECC sections to bring the text up to date with current standards (this was long overdue). Another strong point is the appendices of the pharmacology chapter. Substantial material has been added since the first edition, and they have been made much easier to read through enlargement of the print. Valuable additions also include information on how the drugs are supplied and more complete information on administration and dosage. The third strong point of this text, and one this reviewer especially appreciates, is the lengthy referencing on each drug and of most topics throughout the book. This will aid the reader to investigate further if he so desires and will aid the instructor in finding suitable supplementary material.

14. Generally, what is/are the book's weakest point(s)?

The book's weakest point, other than the lack of objectives, is the same as that of the first edition. Unless additional texts are used, or the student has a strong background in anatomy and physiology, the material in this text alone may not be sufficient preparation for accurate assessments.

15. What other comments do you have?

The additions in material and emphasis to the first edition of Dr. Caroline's book make this text, in my opinion, still one of the most valuable texts for paramedic training presently on the market in spite of the deficiencies listed.

EMS BOOK REVIEW

1. General Information:

- a. **Title:** Advanced Skills In Emergency Care
- b. **Author:** Alexander Butman and others
- c. **Publishing Company:** Emergency Training
- d. **Copyright:** 1982
- e. **Cost:** \$12.95
- f. **Title of supplemental manuals or workbooks:** None
- g. **Name of EMS Book Reviewer:** Eric Kunish
- h. **EMS Position of EMS Book Reviewer:** EMS Field Supervisor for PHR 1
- i. **Submitted to EMS Book Review Committee Membership:** Eric Kunish
- j. **Date:** 9-22-82
- k. **Pages:** 277

2. What training level(s) does this book apply?

EMT-Special Skills

3. Can this book be used as a complete text or as a supplement?

Complete Text

4. Is the writing style consistent and likeable?

Yes. The writers' styles are generally direct and stated succinctly.

5. Is the level of presentation of material commensurate with the average student's capabilities?

Yes. Not only is the style direct and simple but the bold print and spacing enhance the appearance of an easy-to-read text. For many of our students who have a low education and/or poor reading comprehension, this text is ideal.

6. Are definitions, explanations, and illustrations clear?

Generally yes.

- a. If the entire Chapter 5 is on "Diagnostic Skills Review", why do more than just review. Teaching and describing may be of more benefit in this case.
- b. On page 145 it says, "Note: The MAST suit cannot be safely used on a patient so large that the closures do not properly overlap." The authors could offer alternatives for a large patient such as starting IV's wide open, using air splints on the legs, alternative garments, or whatever they think are "suitable".
- c. On page 164 the authors suggest it is good to start an IV lifeline when it would be more difficult later. This good point could be enhanced if specific examples were reviewed (i.e., Patients with burns, blood loss, potential Code 3's, etc.)
- d. On page 176 concerning the administration of medication, the authors might mention that only specially qualified EMTs with Special Skills, under medical direction, can give medication. Since EMTs with Special Skills do not generally give medication in Texas, this information could be misleading.

- e. Some more words used could be defined in the text and/or glossary such as lassitude, resilient, or synchrony.
- f. Illustrations are usually clearly and correctly displayed close to explanations about them. However, pictures of different oxygen delivery devices described in the table on page 190 could be beneficial.
- g. On page 201 the text summarizes this chapter mentioning head tilt-neck lift and head tilt-chin lift. Why not also summarize the jaw-thrust without head tilt method for patients with possible spinal injuries?
- h. Concerning abnormal breathing patterns on page 66, the text could include central neurogenic hyperventilation.

7. Is the content accurate?

The content is overall very accurate. There are only a couple of minor points of difference on MAST trousers that may vary according to local medical control. On page 140 the text states to inflate all MAST chambers at once. It appears that in some areas ambulance providers are taught to inflate each chamber separately and sometimes check vitals after each chamber inflation.

On page 152 the text states a traction splint should never be placed inside the anti-shock garments because it is less effective. That appears true because you could lose some of the pressure of the garment; however, you may not be able to secure the traction splint very well over the MAST trousers. Another point is that a Sager traction is made to fit under a MAST suit. In some cases, therefore, it would be preferable to fit the splint inside the garment.

8. Are there numerous typographical or grammatical errors that reduce student clarity?

There are few if any of these errors in the text. On page 234 at the end of sentence two it should possibly say, "so keep holding on to the tube" instead of "so keeping holding on to the tube." However, it took a long time to even find this possible error.

9. Are objectives presented and followed?

Chapter 2 was a comprehensive outline for the text. It was complete and the text met these objectives. Most books that state objectives state them at the beginning of each chapter. Stating the objectives at the beginning of each chapter is probably preferable since the objectives would be fresh on the student's mind.

10. Are chapter objectives logical, reasonable, and properly sequential?

Whether the chapters are in proper order is questionable. Chapter 5 entitled "Diagnostic Skills Review" and Chapter 6 entitled "How Patients Die: A Pathophysiological Model", are really parts of Chapter 7 entitled "Patient Assessment". However, if these are to be separate chapters at least they are placed together.

Chapter 3 entitled "Circulation, Fluids, and Shock", should probably be followed by Chapter 9 entitled "Using Anti-Shock Trousers" and Chapter 10 entitled "Intravenous Infusion", since together they address the causes and treatment of circulatory problems.

For the same reasons Chapter 4 on "Ventilation and Respiration", Chapter 11 entitled "Airway Management", Chapter 12 entitled "Esophageal Intubation", and Chapter 13 entitled "Endotracheal Intubation", should be together since they address causes and treatment of respiratory problems.

11. Is the approach of this book different than other EMS books available?

This is possibly the first book that is specifically written for the EMT with Special Skills (the Intermediate EMT if one prefers). Some people think more efforts should be made to encourage EMTs toward the Special Skills level rather than the Paramedic level, for economic and utilitarian reasons. The Special Skills level is directed mostly to the trauma patient who is very likely to survive if treated rapidly. Cardiac patients, which the full Paramedic course spends much time in discussing, generally have a short-term and/or relatively low chance of survival. A shift in emphasis, perhaps exemplified by this text and a new text by Nancy Caroline for the EMT and EMT-Intermediate, may be coming where more prehospital efforts are trauma life support rather than cardiac life support oriented.

12. Are there additions or deletions needed?

In Chapter 1 entitled "Roles and Responsibilities", the information on EMS Systems was very good. It was aptly stated that EMS personnel often have the best information on the need and effectiveness of preventive medicine and injury control (highway guardrails, seat belts, motorcycle helmets, etc.). Few books mention preventive aspects of EMS. However, it would be even better if a book would go beyond mentioning them to suggesting ways to implement these preventive ideas.

13. Generally, what is/are the book's strongest point(s)?

As stated in #5 of this review, the text addresses its subject matter simply, directly and basically. For EMS personnel who are not quick to learn new skills (which includes many of us), the writing is an excellent primer.

14. Generally, what is/are the book's weakest point(s)?

The strongest point of this book is paradoxically its weakest. The information may be too basic for some experienced or enthused readers who want more thorough knowledge. Such a reader would need more thorough information from other texts such as Emergency Care: Principles and Practices for the EMT-Paramedic, or Emergency Care in the Streets.

15. What other comments do you have?

- a. It's interesting to note on page 65 that in respiratory failure it may not be hypoxia but a calcium electrolyte shift from extracellular fluid to intracellular fluid that causes a vasospasm that shuts down cerebral circulation within 4 to 6 minutes. It's also informative to note that this shift has been reversed in the emergency department without patients suffering from brain damage. This could mean prehospital care efforts could continue longer with better results.
- b. It was informative on page 153 that pediatric usage of an adult MAST could be done by placing both legs of a small child in one leg of a suit.
- c. Despite some shortcomings of this text, it is a good pioneer training text for EMTs with Special Skills. We should carefully observe this and future texts that address this training level.

EMS BOOK REVIEW

1. **General Information:**
 - a. **Title:** Emergency Medical Treatment
 - b. **Author:** Nancy L. Caroline, M.D.
 - c. **Publishing Company:** Little, Brown and Co.
 - d. **Copyright:** 1982
 - e. **Cost:**
 - f. **Title of supplemental manuals or workbooks:** None
 - g. **Name of EMS Book Reviewer:** Rick Murray
 - h. **EMS Position of EMS Book Reviewer:** Field Supervisor, PHR 5
 - i. **Submitted to EMS Book Review Committee Membership:**
 - j. **Date:** December 1982
 - k. **Pages:** 581 pages
2. **What training level(s) does this book apply?**
EMT or EMT-Special Skills
3. **Can this book be used as a complete text or as a supplement?**
Complete or Supplemental Text
4. **Is the writing style likeable and consistent?**
Yes. The writing is very good.
5. **Is the level of presentation of material commensurate with the average student's capabilities?**
Yes
6. **Are definitions, explanations, and illustrations clear?**
Generally, yes.
7. **Is the content accurate?**
Overall, the content is accurate.
8. **Are there numerous typographical or grammatical errors that reduce student clarity?**
No errors to be corrected.
9. **Are objectives presented and followed?**
I found this book to follow the objectives very well.
10. **Are chapter objectives logical, reasonable, and properly sequential?**
I would say so. Yes.
11. **Is the approach of this book different than other EMS books available?**
Yes. This is the first text I know of that is designed at an intermediate EMT level, i.e., without the cardiology and pharmacology chapters.
12. **Are there additions or deletions needed?**
Text needs more skills discussion.

13. **Generally, what is/are the book's strongest point(s)?**
I wasn't too impressed at a strong point. It is just general.
14. **Generally, what is/are the book's weakest point(s)?**
The lack of basic skills discussion, the text tries to cover the defibrillation of ventricular fibrillation with very little background in the electrocardiogram. There is not even a comparison of the similarities between ventricular fibrillation and ventricular tachycardia.
15. **What other comments do you have?**
Before this text is used as the primary text for any course, I feel it should be compared point to point with the other authoritative EMT test, i.e., Emergency Care, Brady; and Emergency Care and Transportation, A.A.O.S.

Paramedic Reading Assignments
from

Emergency Care: Principles and Practices for the EMT-Paramedic
2nd Edition by Alan Gazzaniga, Lloyd Iseri and Martin Baren

and
Emergency Care in the Streets
2nd Edition by Nancy Caroline

Unit	GAZZANIGA Page #	CAROLINE Page #	Classro Hours	
MODULE I: The Emergency Medical Technician				
1	Role of the EMT	1-12, 13-30	1-15	0.5
2	Laws Governing the EMT	2	5-8	0.5
3	Orientation to the EMT Training Program	3	2	0.5
4	Issues Concerning the Health Professional	7-8	8-9	1.5
	EVALUATION			<u>0.5</u>
		TOTAL		<u>3.5</u>
MODULE II: Human Systems & Patient Assessment				
1	Overview of Anatomy & Physiology	31-58	13-57	1.5
2	Medical Terminology	588-602	11-13	2.0
3	Patient Assessment	115-134	38-54	5.0
	EVALUATION			<u>1.0</u>
		TOTAL		<u>9.5</u>
MODULE III: Shock & Fluid Therapy				
1	Fluids & Electrolytes	59-65	58-70	1.5
2	Blood and its Components	61-62	70-77	0.5
3	Disorders of Hydration	66-70	77-78	0.5
4	Shock	389-395	78-83	2.0
5	Techniques of Management	101-114, 395-400	83-96	
	5.1 Peripheral IV Insertion	101-114	83-89	3.0
	5.2 MAST	395-400	89-92	1.0
	*5.3 Subclavian and Internal Jugular IV Insertion	109	92-97	(3.0)
	EVALUATION			<u>1.0</u>
		TOTAL		<u>9.5</u>
MODULE IV: General Pharmacology				
1	Effects of Drugs	71-78	99-116	1.5
2	Drug Information	84-100	100-103, 126-156	0.5
3	Weights and Measures	577-582	117-123	2.0
4	Administration of Drugs	79-82	116	1.0
5	Techniques of Administration	82-83	123-125	3.0
	EVALUATION			<u>1.0</u>
		TOTAL		<u>9.0</u>

MODULE V: Respiratory System

1	Anatomy & Physiology	135-143	159-170	1.0
2	Patient Assessment	144-149	174-207	2.5
3	Pathophysiology & Management	426-442, 309-325	207-230	6.0
4	Techniques of Management			
	4.1 Oxygen Administration	164-172	207-210	1.0
	4.2 Use of Adjuncts	152-153	210-214	2.0
	4.3 Demand Valve	167-168	214	0.5
	4.4 Suctioning	168	214-216	0.5
	4.5 Use of Hand-powered & Gas-powered Nebulizers	None	None	0.2
	4.6 Direct Laryngoscopy	None	216-217	0.8
	4.7 Endotracheal Intubation	155-158	217-222	6.0
	4.8 Esophageal Obturator Airway	153-155	222-225	2.0
	*4.9 Chest Decompression	318-320	225-226	(1.0)
	*4.10 Use of Positive End Expiratory Pressure Devices	167-168	226-227	(0.5)
	*4.11 Circothyrectomy	158-159	227-228	(2.0)
	*4.12 Transtracheal Jet Insufflation	None	228-230	(2.0)
	EVALUATION			<u>2.0</u>
			TOTAL	<u>24.5</u>

MODULE VI: Cardiovascular System

1	Anatomy & Physiology	173-176	236-243	3.0
2	Patient Assessment	182-190	244-245	2.0
3	Pathophysiology & Management	176-182	245-259	6.0
4	Recognition & Management of Specific Dysrhythmias	190-201, 203-226	259-297	10.0
5	Techniques of Management	207-250	297-318	
	5.1 Cardiopulmonary Resuscitation	227-232	298-308	4.0
	5.2 Monitoring the Patient	201-203	259	2.0
	5.3 Defibrillation & Cardioversion	233-235	314-316	1.5
	5.4 Cardiac Arrest	233-250	308-314	3.0
	5.5 Rotating Tourniquets	186-187	253	0.5
	5.6 Carotid Sinus Pressure	213	316	1.0
	*5.7 Phlebotomy	110	253	(1.0)
	*5.8 Intracardiac Injections	235	316-317	(2.0)
	*5.9 Transthoracic Pacemakers	223-224, 598	None	(2.0)
	*5.10 Mechanical Heart-Lung Resuscitators	None	317-318	(2.5)
	EVALUATION			<u>2.0</u>
			TOTAL	<u>35.0</u>

MODULE VII: Central Nervous System

1	Anatomy & Physiology	275-283	323-325	1.0
2	Patient Assessment	288-296	325-327	2.0
3	Pathophysiology & Management	283-287	327-347	3.0
4	Techniques of Management	296-308	347-349	3.0
	EVALUATION			<u>1.0</u>
			TOTAL	<u>10.0</u>

MODULE VIII: Soft Tissue Injuries

1	Anatomy & Physiology of the Skin	251-256	351-353	0.5
2	Patient Assessment	337	353-354	0.5
3	Pathophysiology & Management	259-257	354-375	1.5
4	Techniques of Management	333-342, 257-259	375-378	2.0
	*4.1 Hemorrhage Control	337-338	375-378	(1.0)
	*4.2 Dressing & Bandaging	337-338	375	(1.0)
	*4.3 Suturing	None	None	(5.0)
5	Trauma to Specific Regions	333-342	365-375	2.5
	EVALUATION			<u>1.0</u>
			TOTAL	<u>8.0</u>

MODULE IX: Musculoskeletal Injuries

1	Anatomy & Physiology	343-356	381-383	0.5
2	Patient Assessment	356-361	383-384	0.5
3	Pathophysiology & Management	364-366	384-388	2.0
4	Techniques of Management	362-364	388-394	
	4.1 Splinting & Immobilization			2.0
	EVALUATION			<u>1.0</u>
			TOTAL	<u>6.0</u>

MODULE X: Medical Emergencies

1	Diabetic Emergencies	409-412, 413-418	398-400	1.5
2	Anaphylactic Reactions	476-477	400-401	1.0
3	Exposure to Environmental Extremes	465-475, 480-488	401-412	1.0
4	Alcohol & Drug Abuse	447-464	412-415	1.5
5	Poisoning and Overdose	439-446, 475-480	415-431	2.0
6	Acute Abdomen	325-332, 401-409, 424-425	431-435	1.5
7	Genito-Urinary Problems	418-424	435	1.0
8	Medical Emergencies in Geriatric Patients	116-118	435-437	1.0
9	Techniques of Management	None	437-443	
	*9.1 Nasogastric Tube Insertion		437-438	(2.0)
	*9.2 Urinary Catheterization		438-440	(3.0)
	EVALUATION			<u>1.0</u>
			TOTAL	<u>11.5</u>

MODULE XI: Obstetric/Gynecologic Emergencies

1	Anatomy & Physiology	489-490	445-446	0.5
2	Patient Assessment	492	None	1.0
3	Pathophysiology & Management of GYN Emergencies	490-492	446	1.0
4	Pathophysiology & Management of Obstetric Emergencies	492-500	449-463	2.0
5	Techniques of Management	500-516	450-463	
	5.1 Cephalic Delivery	497-500	451-458	2.0
	5.2 Abnormal Delivery	500-506	458-461	2.0
	a. Prolapsed Cord	504-505	459-460	
	b. Breech Delivery	502-503	458-459	
	c. Limb Presentation	504	461	
	d. Multiple Birth	505	461	
	e. Premature Birth	409	461	
	5.3 Uterine Massage	500	457, 467	0.5
	5.4 APGAR Scoring	509	458	0.5
	EVALUATION			1.0
			TOTAL	10.5

MODULE XII: Pediatrics & Neonatal Transport

1	Approach to Pediatric Patient	517-521	465-469	1.0
2	Pathophysiology & Management	529-550	469-480	1.5
3	Techniques of Management	521-529	489-491	
	3.1 Cardiopulmonary Resuscitation	521-528	480-486	1.0
	3.2 IV Insertion	541-542	486-489	1.0
	3.3 Endotracheal Intubation	524	489-491	1.0
4*	Neonatal Transport	512-513	491-492	(8.5)
	EVALUATION			1.0
			TOTAL	6.5

MODULE XIII: Management of the Emotionally Disturbed

1	Emotional Aspects of Injury and Illness	551-552	495-498	1.0
2	Approach to the Patient - Assessment	552-553	489-501	0.5
3	Psychiatric Emergencies	553-557	501-505	1.5
4	Techniques of Management	558-560	505-506	1.5
	EVALUATION			1.0
			TOTAL	5.5

MODULE XIV: Rescue Techniques - Optional

1	Introduction	367	None	3.0
2	Hazard Control	368-369	None	6.0
3	Access and Entry to the Patient	369	None	1.0
4	Disentanglement	369-379	None	0.5
5	Packaging & Transport of the Patient	379-380	None	4.5
6	Special Rescue Techniques	380-388	None	(7.5)
	EVALUATION			1.0
			TOTAL	16.0

MODULE XV: Telemetry & Communications

1	Use of Radio Equipment and Practice	561-562, 563-568	507-514	2.0
2	Protocols for Relaying Information to Physician	568-576	517-518	2.0
3	Dispatching Procedures	562-563	514-517	1.0
	EVALUATION			<u>1.0</u>
			TOTAL	6.0
			TOTAL CLASSROOM HOURS	160.0

* Indicates Optional Skill

Advanced Skills in Emergency Care: A Text for the Intermediate EMT
by Alexander Butman and Others

and

Emergency Medical Treatment: A Text for Special Skills, EMT-A and EMT-Intermediates
by Nancy Caroline, M.D.

Unit	BUTMAN Page #	CAROLINE Page #	Classroom Hours
MODULE I: The Emergency Medical Technician			
1 Role of the EMT	2-5, 125-134	3-5	0.5
2 Laws Governing the EMT	5-8	10-14	0.5
3 Orientation to the EMT Training Program	8, 11-28	6-10	0.5
4 Issues Concerning the Health Professionals	9-10	14-17	1.5
EVALUATION			<u>0.5</u>
		TOTAL	<u>3.5</u>
MODULE II: Human Systems & Patient Assessment			
1 Overview of Anatomy & Physiology	103-110, 29-35	21-32	1.5
2 Medical Terminology	244-263	33-35	2.0
3 Patient Assessment	83-102, 111-124	173-197	5.0
EVALUATION			<u>1.0</u>
		TOTAL	<u>9.5</u>
MODULE III: Shock & Fluid Therapy			
1 Fluids & Electrolytes	38-52	154-156	1.5
2 Blood and Its Components	35-38	102	0.5
3 Disorders of Hydration	52-53	None	0.5
4 Shock	53-56	108-114	2.0
5 Techniques of Management	135-182		
Peripheral IV Insertion	159-182	156-162	3.0
MAST	135-158	150-154	1.0
EVALUATION			<u>1.0</u>
		TOTAL	<u>9.5</u>

MODULE V: Respiratory System

1	Anatomy & Physiology	57-65	43-46	1.0
2	Patient Assessment	86-87	187-197	2.5
3	Pathophysiology & Management	66-82	46-59, 61-72	6.0
4	Techniques of Management			
	Oxygen Administration	183-201	120-133	1.0
	Use of Adjuncts	201	116-118	2.0
	Demand Valve	193	133	0.5
	Suctioning	195-197	118-120	0.5
	Use of Hand-Powered and Gas Powered Nebulizers	None	None	0.2
	Direct Laryngoscopy	204, 224-226, 232	None	0.8
	Endotracheal Intubation (ET)	223-243	None	6.0
	Esophageal Obturator Airway (EOA)	183-202	133-137	2.0
	*EOA/ET Skills Instruction			3.0
	EVALUATION			<u>2.0</u>
			TOTAL	27.5
		TOTAL CLASSROOM HOURS		60.0