

STUDY GUIDE
for
Roles and Responsibilities of the EMT-P
EMS Systems

1. EMS prior to the late 1960's was characterized by
 - a. fast, horizontal transport
 - b. elaborate communications networks
 - c. intensive training programs
 - d. strict medical direction
2. How did Dr. Frank Pantridge of Belfast, Ireland plant the seed for prehospital emergency care?
 - a. he trained the first paramedics
 - b. he brought ALS to the patient
 - c. he developed a way to send ECG by radio
 - d. he authored the "white paper"
3. The physician credited with training the first paramedics in the U.S. is
 - a. Dr. Frank Pantridge
 - b. Dr. Eugene Nagel
 - c. Dr. Mickey Eisenberg
 - d. Dr. Jeffrey Clawson
4. The rules that govern the conduct of members of a particular group are called
 - a. ethics
 - b. morals
 - c. standards
 - d. principles
5. Professionalism is exhibited by all of the following except
 - a. setting high standards
 - b. seeking self improvement
 - c. earning the respect of your peers
 - d. aiming for the minimum standard
6. Which of the following is not an on-scene duty of the paramedic?
 - a. patient care
 - b. leadership
 - c. certification
 - d. customer service
7. The process by which an agency or association grants recognition to an individual who

has met its qualifications is known as

- a. licensure
 - b. certification
 - c. reciprocity
 - d. censure
8. The process by which a governmental agency grants permission to engage in a given occupation to an individual who has attained the degree of competency required to ensure the public's protection is known as
- a. licensure
 - b. certification
 - c. reciprocity
 - d. censure
9. The process by which an agency grants credentials to an individual who has comparable credentials from another agency is known as
- a. licensure
 - b. certification
 - c. reciprocity
 - d. consensus
10. NASAR, NAEMSP, and NAEMT are examples of
- a. professional organizations
 - b. EMS journals
 - c. licensing agencies
 - d. national testing agencies
11. Which of the following is not a responsibility of the National Registry?
- a. administering testing materials
 - b. establishing national standards
 - c. assisting in evaluating training programs
 - d. licensing and certifying EMT's in each state
12. Paramedics spend the majority of their time
- a. answering emergency calls
 - b. in self-preparation
 - c. providing patient care
 - d. answering system abuse calls
13. Which of the following statements regarding ethics is false?
- a. ethics are principles governing the conduct of the paramedic

- b. ethics deal with the relationship of a paramedic to her/his patient the patient's family
 - c. ethics deal with the relationship of a paramedic to her/his peers and society at large
 - d. ethics set standards regarding right and wrong human conduct, but do not address morality
 - e. if the paramedic places personal considerations above all else when providing medical care, she/he will rarely have to worry about committing an unethical act
14. Which of the following statements regarding professionalism is false?
- a. A professional receives monetary compensation for her/his work on a regular basis
 - b. a professional has certain special skills and knowledge in a specific area
 - c. a professional conforms to the standards of conduct and performance in a specific field of knowledge
 - d. professionalism promotes quality in patient care
 - e. professionalism instills pride in the profession and earns the respect of the medical team
15. The role of a paramedic includes all of the following, except
- a. initiating and continuing emergency care under medical direction and providing appropriate invasive and noninvasive treatments
 - b. exercising personal judgment in case of immediate life-threatening conditions or interruption in medical direction
 - c. attempting rescue despite lack of personal training during incidents where adequately trained rescue personnel are not available, and the patient is in immediate life-threat
 - d. directing the maintenance and preparation of emergency care equipment and supplies
 - e. recording the details related to the incident and the patient's emergency care
16. Which of the following statements regarding the requirement of continuing education is false?
- a. skills and knowledge acquired in a paramedic course may not be used with great frequency, and will quickly decay without periodic refreshment.
 - b. maintenance of continuing education assures the public and medical community that quality patient care continues to be delivered
 - c. maintenance of continuing education is a basis for reciprocity between many states.
 - d. continuing education is a requirement that has little worth to the active street paramedic
 - e. continuing education keeps providers informed of changes in medical protocol and the development of new skills and equipment
17. Major benefits of subscribing to professional journals include all of the following, except that

- a. they are a tax deduction
 - b. they are a source of continuing education
 - c. they provide an opportunity for the paramedic to publish articles
 - d. they are an information source whereby paramedics can learn about other local, state, regional, or national advancements and/or issues
 - e. they encourage professional growth and awareness
18. The EMS system includes
- a. citizen-initiated care and paramedic-initiated care
 - b. care received in the emergency department
 - c. preincident planning and incident follow-up
 - d. A and B
 - e. A, B, and C
19. Standing orders regarding patient management guidelines are examples of
- a. direct medical control
 - b. indirect medical control
 - c. intermittent medical control
 - d. all of the above
 - e. none of the above
20. Verbal orders regarding patient management guidelines are examples of
- a. direct medical control
 - b. indirect medical control
 - c. intermittent medical control
 - d. all of the above
 - e. none of the above
21. Major incident protocols are examples of
- a. direct medical control
 - b. indirect medical control
 - c. intermittent medical control
 - d. all of the above
 - e. none of the above
22. Training , education, and chart review requirements are examples of
- a. direct medical control
 - b. indirect medical control

- c. intermittent medical control
 - d. all of the above
 - e. none of the above
23. Emergency medical control at the scene should go to
- a. the responder who arrives at the scene first
 - b. any licensed physician on scene, despite a lack of emergency medical knowledge
 - c. the responder with the most knowledge and experience in prehospital care
 - d. the fire chief
 - e. the police department
24. Which of the following are not a part of the EMS system
- a. lay citizen trained in CPR
 - b. first responder
 - c. paramedic
 - d. emergency department physician
 - e. all of the above are part of the EMS system
25. An EMS system whereby a BLS first responder ambulance is dispatched and arrives on the scene first, followed by an ALS level ambulance is called a
- a. inefficient system
 - b. tiered system
 - c. category 3 system
 - d. system status management system
26. System status management refers to a system that
- a. repositions ambulances based on available resources and historical fluctuations in demand
 - b. dispatches BLS first responders and ALS ambulances
 - c. prioritizes calls based on first-come, first-serve basis
 - d. provides pre-arrival instructions to 911 callers
27. Emergency medical dispatch refers to a system that
- a. repositions ambulances based on available resources and historical fluctuations in demand
 - b. dispatches BLS first responders and ALS ambulances
 - c. prioritizes calls based on first-come, first-serve basis
 - d. provides pre-arrival instructions to 911 callers
28. An ambulance with a conventional cab and chassis on which a modular ambulance body is mounted with no passageway between driver's and patient's compartments is called a _____ ambulance.
- a. Type I

- b. Type II
 - c. Type III
 - d. Type IV
29. An ambulance with a standard van chassis and raised roof is called a _____ ambulance.
- a. Type I
 - b. Type II
 - c. Type III
 - d. Type IV
30. An ambulance mounted on a specialty van chassis with a passageway between the driver's compartment and a modular style patient compartment is called a _____ ambulance.
- a. Type I
 - b. Type II
 - c. Type III
 - d. Type IV
31. The federal specifications that govern ambulance design are known as the _____ specifications.
- a. KKK-A-1822
 - b. NHTSA
 - c. DOT
 - d. OEMS
32. Which legislative action forced the states to develop effective EMS systems?
- a. EMS systems act
 - b. National Highway Safety Act
 - c. COBRA
 - d. EMTLA
33. Which of the following is not one of the original 15 components of the EMS systems act?
- a. communications
 - b. training
 - c. critical care units
 - d. mutual aid
 - e. finance
34. Which administration ended federal funding for EMS systems?
- a. Carter
 - b. Ford
 - c. Reagan
 - d. Bush

35. What year was the EMS Systems Act passed?
- 1966
 - 1971
 - 1973
 - 1977
36. Who publishes the national standard curriculum for the EMT-paramedic?
- DOT
 - NHTSA
 - OEMS
 - Department of Health and Human Services
37. The mechanism which permits a paramedic to perform procedures in the field prior to contacting medical control is called _____.
- triage
 - protocols
 - standing orders
 - physician extender
38. IN what year was the first 9-1-1 telephone number established as the universal emergency number?
- 1950
 - 1967
 - 1971
 - 1985
39. The levels of certification recognized by the Department of Transportation are _____.
- EMT, EMT-I, EMT-P
 - AA, EMT, EMT-I, EMT-P
 - EMT, EMT-I, EMT-AI, EMT-P
 - AA, EMT, EMT-I, EMT-AI, EMT-P
40. In North Carolina, the EMT-P can accept orders from all of the following except _____.
- physician
 - physician assistant
 - MICN
 - RN
 - B and D
41. Who has the ultimate authority in all patient care related issues in a local EMS system?
- state EMS director
 - system medical director
 - chief paramedic
 - local EMS nurse liaison

42. In 1970, the MAST program was established to
- raise the blood pressure in shock victims
 - bring military air medical transport capabilities to civilian accident scenes
 - lower the evacuation times for wounded soldiers in Vietnam
 - to raise funds to establish regional EMS systems
43. Research in EMS is important in order to
- justify future funding allocations
 - scientifically evaluate paramedical care
 - weigh the benefits versus the risks of certain prehospital treatments
 - all of the above
44. Hospital categorization is important because
- not every patient can afford every hospital
 - receiving facilities have varying capabilities
 - not all patients can be transported to the appropriate facility
 - it is impossible to match patient needs with hospital resources
45. Quality assurance differs from quality improvement in that
- quality assurance deals with patient perceptions of quality
 - quality improvement is an objective look at clinical care
 - quality assurance is often viewed as punitive and negative
 - quality improvement does not elicit customer satisfaction information
46. The Public Utility Model and the Failsafe Franchise are examples of
- CQI programs
 - KKK standards
 - system financing
 - dispatching protocols
47. State EMS agencies are usually responsible for all of the following except
- contracting local medical directors
 - enacting EMS legislation
 - licensing and certifying field personnel
 - enforcing statewide EMS regulations
48. In 1966, the "White Paper"
- deleted all federal funding for EMS
 - outlined deficiencies in emergency care
 - established the "15 components" of an EMS system
 - appropriated over \$200 million dollars for EMS
49. Which of the following is a component of a modern E-911 system?

- a. instant call-back capabilities
- b. automatic caller location
- c. instant routing of the call
- d. all of the above

50. Which of the following are important areas in which to educate the public?

- a. how to easily access the EMS system
- b. how to initiate CPR
- c. how to recognize a medical emergency
- d. all of the above

51. Of the following, who should be involved in prehospital care research?

- a. paramedic
- b. training officer
- c. medical director
- d. all of the above