



# Standard Guide for Training the Emergency Medical Technician (Basic) to Perform Patient Management Techniques<sup>1</sup>

This standard is issued under the fixed designation F 1420; the number immediately following the designation indicates the year of original adoption or, in the case of revision, the year of last revision. A number in parentheses indicates the year of last reapproval. A superscript epsilon ( $\epsilon$ ) indicates an editorial change since the last revision or reapproval.

## 1. Scope

1.1 This guide establishes the minimum national standard for training the emergency medical technician (basic) to perform patient management techniques for patients of all ages.

1.2 This guide is one of a series which together describe the minimum training standard for the emergency medical technician (basic).

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 1031 Practice for Training the Emergency Medical Technician (Basic)<sup>2</sup>

F 1219 Guide for Training the Emergency Medical Technician (Basic) to Perform Patient Initial and Detailed Assessment<sup>2</sup>

F 1255 Practice for Performance of Prehospital Automated Defibrillation<sup>2</sup>

F 1285 Guide for Training the Emergency Medical Technician (Basic) to Perform Patient Examination Techniques<sup>2</sup>

F 1328 Guide for Training Emergency Medical Technician (Basic) to Prepare Patients for Medical Transportation<sup>2</sup>

F 1329 Guide for Training the Emergency Medical Technician (Basic) in Basic Anatomy and Physiology<sup>2</sup>

F 1418 Guide for Training the Emergency Medical Technician (Basic) in Roles and Responsibilities<sup>2</sup>

F 1419 Guide for Training the Emergency Medical Technician (Basic) to Manage Shock<sup>2</sup>

F 1421 Guide for Training the Emergency Medical Technician (Basic) to Manage Obstetrical Emergencies<sup>2</sup>

### 2.2 Other Documents:

Standards and Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care<sup>3</sup>  
Textbook of Pediatric Advanced Life Support<sup>4</sup>

## 3. Terminology

### 3.1 Definition

3.1.1 *management techniques, n*—refers to those skills that constitute actions or activities conducted by the emergency medical technician (basic) for a patient in need of assistance as a result of a real or perceived traumatic or medical condition.

## 4. Significance and Use

4.1 This guide establishes the minimum national standard for training the emergency medical technician (basic) to perform management techniques for patients of all ages. This guide does not preclude additions to or modifications of the management techniques used by the emergency medical technician (basic) as authorized by local medical protocol.

4.2 This guide shall be used by those who wish to identify the minimum training standard for the emergency medical technician (basic) as it relates to the performance of management techniques.

4.3 This guide shall be used as the basis to revise Practice F 1031.

4.4 Every person who is identified as an emergency medical technician (basic) shall have been trained to this standard.

4.5 This guide does not stand alone and must be used in conjunction with all referenced documents cited in Section 2.

4.6 The management techniques outlined in this guide are not necessarily in sequential order, and they will often vary with the patient's age, size, location and condition.

## 5. Management Techniques

5.1 Use of airway management techniques and devices.

5.2 Use of techniques for management of the compromised circulatory system.

5.2.1 Direct pressure to the source of bleeding.

5.2.2 Pressure dressings.

5.2.3 Patient positioning.

<sup>1</sup> This guide is under the jurisdiction of ASTM Committee F30 on Emergency Medical Services and is the direct responsibility of Subcommittee F30.02 on Personnel, Training and Education.

Current edition approved Feb. 10, 2001. Published April 2001. Originally published as F 1420 - 92. Last previous edition F 1420 - 92.

<sup>2</sup> *Annual Book of ASTM Standards*, Vol 13.02.

<sup>3</sup> Reprinted from *Journal of American Medical Association*, June 6, 1986, Vol 255, pp 2842–3044.

<sup>4</sup> Chameides, et al., American Heart Association, Dallas, TX 1988.

- 5.2.4 The pneumatic antishock garment in accordance with local medical control protocol.
- 5.3 Use of spinal immobilization techniques.
  - 5.3.1 Manual spinal motion control.
  - 5.3.2 Cervical spine immobilization devices.
  - 5.3.3 Short spine boards.
  - 5.3.4 Long spine boards.
  - 5.3.5 Manual in-line spinal immobilization during rapid extrication.
- 5.4 Use of techniques for management of musculoskeletal injuries (nonspine).
  - 5.4.1 Manual in-line stabilization.
  - 5.4.2 External immobilization fixation devices:
    - 5.4.2.1 Traction devices.
    - 5.4.2.2 Rigid devices.
- 5.5 Use of techniques for management of soft tissue injuries.
  - 5.5.1 Aseptic technique.
  - 5.5.2 Management of amputations.
  - 5.5.3 Bandaging techniques.
- 5.6 Use of medications and techniques in accordance with local medical control protocol.
  - 5.6.1 Oxygen.
  - 5.6.2 Activated charcoal.
  - 5.6.3 Oral glucose.
  - 5.6.4 Blind insertion airway device.
  - 5.6.5 Patient-prescribed NTG.
  - 5.6.6 Patient-prescribed bronchodilator (nebulizer/MDI).
  - 5.6.7 Patient-prescribed epinephrine.

- 5.7 Use of basic life support as described in Standards and Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiac Care and the Textbook of Pediatric Advanced Life Support.
- 5.8 Use of techniques for management of the normal spontaneous vertex vaginal delivery.
  - 5.8.1 Uterine massage.
- 5.9 Use of techniques for management of the newborn.
- 5.10 Use of isolation techniques for communicable disease control.
- 5.11 Use of techniques for gaining entry/access to the patient.
- 5.12 Use of extrication techniques other than for spinal.
- 5.13 Use of techniques for restraining patients.
- 5.14 Use of patient positioning techniques for medical emergencies.
- 5.15 Use of techniques for managing penetrating injuries and blunt trauma which compromises the respiratory system.
- 5.16 Use of automated external defibrillation in accordance with Practice F 1255.
- 5.17 Endotracheal intubation in accordance with local medical control.
- 5.18 Insertion of nasogastric tube in accordance with local medical control.

## **6. Keywords**

6.1 emergency medical technician (basic); EMT, training; EMT, management techniques; EMT, skills

*ASTM International takes no position respecting the validity of any patent rights asserted in connection with any item mentioned in this standard. Users of this standard are expressly advised that determination of the validity of any such patent rights, and the risk of infringement of such rights, are entirely their own responsibility.*

*This standard is subject to revision at any time by the responsible technical committee and must be reviewed every five years and if not revised, either reapproved or withdrawn. Your comments are invited either for revision of this standard or for additional standards and should be addressed to ASTM International Headquarters. Your comments will receive careful consideration at a meeting of the responsible technical committee, which you may attend. If you feel that your comments have not received a fair hearing you should make your views known to the ASTM Committee on Standards, at the address shown below.*

*This standard is copyrighted by ASTM International, 100 Barr Harbor Drive, PO Box C700, West Conshohocken, PA 19428-2959, United States. Individual reprints (single or multiple copies) of this standard may be obtained by contacting ASTM at the above address or at 610-832-9585 (phone), 610-832-9555 (fax), or service@astm.org (e-mail); or through the ASTM website (www.astm.org).*