1. Instructions & Contact Information

Please complete the survey online by June 18, 2024.

The Ohio Department of Higher Education (ODHE) is reaching out to collect responses from all Ohio public colleges and universities regarding the following:

- updates to the learning outcomes for two Career-Technical Assurance Guide (CTAG) courses: Emergency Medical Technician/EMT (CTEMS002) and Paramedic (CTEMS004)
- proposed alignment for two new Industry-Recognized Credential Transfer Assurance Guides (ITAGs) for EMT and Paramedic
- gathering bachelor's program information for the development of an Ohio Guaranteed Transfer Pathway (OGTP) for students who earn an associate of applied science in emergency medical services

Background Information: The ITAG initiative guarantees the award of college-level credit to students who have earned agreed-upon, industry-recognized credentials. Faculty panels align content from the specified credential to postsecondary learning outcomes. The initiative was instituted by the Chancellor in February 2021. More information about ITAGs can be found on this webpage.

EMT and Paramedic CTAGs: In 2008, the EMT (CTEMS002) and Paramedic (CTEMS004) CTAG courses established sets of statewide learning outcomes that were developed through a panel collaboration and endorsed via statewide survey. These learning outcomes have been periodically reviewed and updated. As part of the process to develop ITAGs for EMT and Paramedic certifications, a faculty panel reviewed these learning outcomes and proposed revisions to meet current standards.

Proposed EMT and Paramedic ITAGs: The same faculty panel reviewed the Ohio EMT and Paramedic certifications and aligned them to the revised CTAG learning outcomes. To obtain an initial Ohio EMT or Paramedic certification, an applicant must pass the appropriate National Registry certification examination, among other requirements. If approved, the ITAGs would guarantee students who hold a current Ohio EMT or Paramedic certification to be awarded credit toward the equivalent course(s), regardless of where the education/training occurred. 7 credit hours would be awarded for the Ohio EMT certification, and 30 credit hours would be awarded for the Ohio Paramedic certification.

OGTP: To help students who complete an AAS in emergency medical services and want to go on to pursue a bachelor's degree, we are collecting information about bachelor's degree programs that would apply all, or the majority of, their AAS coursework toward program requirements. Programs may be in a variety of areas, including, but not limited to, EMS management, healthcare, and organizational leadership. They may be designed as bachelor's completion programs, but traditional programs may also be appropriate.

What We Need from You: For institutions with EMT or Paramedic programs, please arrange for an appropriate faculty member with expertise in emergency medical services to complete this survey. For universities without EMT or Paramedic programs, please have someone complete this survey who could provide the information requested in the OGTP section above. Please complete this survey as soon as possible, but no later than June 18, 2024. We are requesting a response from only one representative per institution.

Please email Holly Hall (hhall@highered.ohio.gov) with any questions. Survey responses left in the form of comments will also be reviewed by the lead faculty member and a faculty panel.

Thank you for your valuable input.

* 1. Contact inform	nation about the person (completing this survey	
Name			
Institution			
Department			
Title			
E-mail			
Phone			
* 2. Please indic University Regional Can Community C		n that you represent	

Emergency	Medical	Services	(EMT a	& Pai	ramedic)	CTAG	& ITAG	Endorse	ment
Survey									

Burvey
2. Emergency Medical Technician Program
* 3. Does your institution offer an Emergency Medical Technician training program? Yes No

burvey
3. Emergency Medical Technician Program
* 4. Please list the course number(s) for your EMT course(s) (e.g., EMS 1001).
* 5. How many credit hours are awarded for the above course(s)?
* 6. Please list all certificate or degree programs for which the above course(s) is/are required.

4. EMT Learning Outcomes Updates

As part of the process to develop an ITAG for the Ohio EMT certification, the learning outcomes for EMT (CTEMS002) are being reviewed and revised to meet current standards. While the changes may look substantial at a glance, they represent minimal content change. The changes fall under two areas:

- 1. Updates made to reflect the current competency areas of an EMT training course, as outlined in rule <u>4765-15-05</u> of the Ohio Administrative Code; and
- 2. The addition of the associated minimum competency statement to each area, from the <u>National EMS Education</u> Standards (2021).

CTEMS002 Emergency Medical Technician (EMT)

Course Description: A combination of specialized subject matter, laboratory, clinical and field experiences designed to prepare technicians to become members of the pre-hospital health care team, working under the direction of a physician. Instruction includes patient assessment, pathophysiology and treatment of shock, airway management, cardiac management, trauma-triage, epinephrine auto-injector administration illness and injury management, and delivery and newborn care and the personnel trained may be members of fire departments, police departments, or other agencies that are involved in the emergency treatment and rescue of people.

Credits: 7

CTAG Note: Per rule $\underline{4765-15-05}$ of the Ohio Administrative Code:

The EMS training program shall be conducted in accordance with the "National EMS Education Standards" approved by NHTSA, the "Ohio Approved EMS Curriculum Standards" approved by the board, and consistent with the scope of practice set forth in rule 4765-15-04 of the Administrative Code.

At the conclusion of the EMT training program, the student will demonstrate entry level competency in the affective, psychomotor, and cognitive domains related to each of the areas of instruction listed in the learning outcomes section.

Submitted course work must include proof of laboratory and clinical components.

Learning Outcomes Note: All outcomes are essential and must be taught.

To limit the size of the CTAG, listed outcomes summarize the competency areas of the EMT training course, as outlined in rule <u>4765-15-05</u> of the Ohio Administrative Code, and the associated minimum competency statements of the <u>National EMS Education Standards</u> (2021). For elaboration of the knowledge within each competency, the reader is referred to the <u>National EMS Education Standards</u>, the <u>Ohio Approved EMS Curriculum Standards</u>, and the <u>Scope of Practice</u> approved by the State Board of EMS. EMT students will need to know all material within the EMT curriculum as well as that of the emergency medical responder.

Please review the proposed learning outcomes changes below. Changes highlighted in yellow indicate updates based on Ohio Administrative Code.

Original Learning Outcomes	Proposed New Learning Outcomes
1. Preparatory	1. Preparatory - Applies knowledge of the EMS system,
	safety/well-being of the EMT, medical/legal and ethical issues to
	the provision of emergency care.
2. Anatomy and physiology	2. Anatomy and physiology - Applies knowledge of the anatomy
	and function of all human systems to the practice of EMS.
3. Medical terminology	3. Medical terminology - Uses anatomical and medical terms and
	abbreviations in written and oral communication with colleagues
4. Pathophysiology	and other health care professionals. 4. Pathophysiology - Applies knowledge of the pathophysiology
4. Patriophysiology	of respiration and perfusion to patient assessment and
	management.
5. Life span development	5. Life span development - Applies knowledge of life span
3. the span development	development to patient assessment and management.
6. Public health	Public health - Applies knowledge of the principles of public
of Capital Capital	health epidemiology including public health emergencies, public
	health monitoring, health promotion and illness and injury
	prevention.
7. Pharmacology	7. Pharmacology - Applies knowledge of the medications the
	EMT may administer to a patient during an emergency and
	chronic or maintenance medications the patient may be taking.
8. Airway management, respiration, and artificial	8. Airway management, respiration, and artificial ventilation -
ventilation, to include:	Applies knowledge of anatomy and physiology to patient
(a) Insertion of extraglottic and dual lumen airway	assessment and management in order to assure a patent airway,
devices on apneic and pulseless patients;	adequate mechanical ventilation and respiration for patients of
(b) Endotracheal suctioning through a stoma;	all ages, including:
(c) Continuous positive airway pressure device	(a) Insertion of extraglottic and dual lumen airway devices on
administration and management;	apneic and pulseless patients;
(d) Flow restricted oxygen powered device;	(b) Endotracheal suctioning through a stoma;
(e) End tidal carbon dioxide monitoring and	(c) Continuous positive airway pressure device administration
detection;	and management;
(f) Pulse oximeter and capnography equipment	(d) Flow restricted oxygen powered device;
application and reading; (g) Use of a positive pressure ventilation device:	(e) End tidal carbon dioxide monitoring and detection; (f) Pulse oximeter and capnography equipment application and
(i) Manually triggered ventilation;	
(ii) Automatic transportation ventilators.	reading; (g) Use of a positive pressure ventilation device:
(ii/Automatic transportation ventilators.	(i) Manually triggered ventilation device.
	(ii) Automatic transportation ventilators;
	9. Negative impedance threshold devices
9. Assessment	10. Patient assessment - Applies scene information and patient
	assessment findings (scene size up, primary and secondary
	assessment, patient history and reassessment) to guide
	emergency management.
	0 ,

10. Medicine, to include:	11. Medicine - Applies knowledge to provide basic emergency	
(a) Blood glucose monitoring;	care and transportation based on assessment findings for an	
(b) Chest compression assist device;	acutely ill patient, including:	
(c) Patient-assisted epinephrine auto-injection	(a) Blood glucose monitoring;	
administration.	(b) Chest compression assist device;	
	(c) Epinephrine auto-injection administration;	
	(d) Naloxone administration via auto-injector and intranasal	
	route;	
	/-> T	
	(e) Transport of a central/peripheral intravenous access	
dd Ob advard account to the	without an infusion;	
11. Shock and resuscitation	12. Shock and resuscitation - Applies knowledge of the causes,	
	pathophysiology and management of shock, respiratory failure	
	or arrest, cardiac failure or arrest, termination of resuscitative	
40.7	efforts and post resuscitation management.	
12. Trauma, to include:	13. Trauma - Applies knowledge to provide basic emergency care	
(a) Care and transportation of a trauma patient;	and transportation based on assessment findings for an acutely	
(b) Helmet removal;	injured patient, including:	
(c) Trauma triage determination pursuant to rule	(a) Care and transportation of a trauma patient;	
4765-14-02 of the Administrative Code.	(b) Helmet removal;	
	(c) Trauma triage determination pursuant to rule 4765-14-02 of	
	the Administrative Code.	
13. Special patient populations	14. Special patient populations - Applies knowledge of growth,	
	development and aging and assessment findings to provide basic	
	emergency care and transportation for a patient with special	
	needs.	
	15. Two hours on identifying and interacting with individuals	
	with dementia	
14 FMC		
14. EMS operations	16. EMS operations - Knowledge of operational roles and	
•	responsibilities to ensure patient, public and personnel safety	
15. Behavior/Judgement (Clinical prehospital), to	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include:	
15. Behavior/Judgement (Clinical prehospital), to include:	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship;	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship;	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship;	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship;	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric	
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment.	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment.	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above?	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above?	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes No	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes No	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes No	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as
15. Behavior/Judgement (Clinical prehospital), to include: (a) At least ten hours devoted to combined clinical experience and prehospital internship; (b) Ten patient assessments to include one pediatric patient assessment. * 7. Do you agree with the changes shown above? Yes No	responsibilities to ensure patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	as

5. EMT Alignment

Please review the proposed alignment for EMT below. The learning outcomes are in the left column, with their proposed updated language; the alignment of the Ohio EMT Certification and National Registry EMT cognitive exam to the updated learning outcomes is in the right column.

	Alignment	
	Postsecondary Learning Outcomes: Emergency Medical Technician (CTEMS002)	Content from Credential: Ohio EMT Certification & National Registry EMT cognitive examination
	Preparatory - Applies knowledge of the EMS system, safety/well-being of the EMT, medical/legal and ethical issues to the provision of emergency care.	The <u>National Registry Examination</u> content is based on the <u>National EMS Scope of Practice</u>
2.	Anatomy and physiology - Applies knowledge of the anatomy and function of all human systems to the practice of EMS.	Model, the National EMS Education Standards, and the National Registry Practice Analysis.
3.	Medical terminology - Uses anatomical and medical terms and abbreviations in written and oral communication with colleagues and other health care professionals.	Postsecondary learning outcomes 1-16 are base on these same standards.
4.	Pathophysiology - Applies knowledge of the pathophysiology of respiration and perfusion to patient assessment and management.	
5.	Life span development - Applies knowledge of life span development to patient assessment and management.	
6.	Public health - Applies knowledge of the principles of public health epidemiology including public health emergencies, public health monitoring, health promotion and illness and injury prevention.	
7.	Pharmacology - Applies knowledge of the medications the EMT may administer to a patient during an emergency and chronic or maintenance medications the patient may be taking.	
8.	Airway management, respiration, and artificial ventilation - Applies knowledge of anatomy and physiology to patient assessment and management in order to assure a patent airway, adequate mechanical ventilation and respiration for patients of all ages, including: (a) Insertion of extraglottic and dual lumen airway devices on apneic and pulseless patients;	
	(b) Endotracheal suctioning through a stoma;(c) Continuous positive airway pressure device administration and management;(d) Flow restricted oxygen powered device;	
	(e) End tidal carbon dioxide monitoring and detection; (f) Pulse oximeter and capnography equipment application and reading; (g) Use of a positive pressure ventilation device:	
	(i) Manually triggered ventilators; (ii) Automatic transportation ventilators;	
	Negative impedance threshold devices	
10.	Patient assessment - Applies scene information and patient assessment findings (scene size up, primary and secondary assessment, patient history and	
11.	reassessment) to guide emergency management. Medicine - Applies knowledge to provide basic emergency care and transportation based on assessment findings for an acutely ill patient, including:	
	(a) Blood glucose monitoring; (b) Chest compression assist device; (c) Epinephrine auto-injection administration; (d) Naloxone administration via auto-injector and intranasal route; (e) Transport of a central/peripheral intravenous access without an infusion;	
12.	Shock and resuscitation - Applies knowledge of the causes, pathophysiology and management of shock, respiratory failure or arrest, cardiac failure or arrest, termination of resuscitative efforts and post resuscitation management.	

 13. Trauma - Applies knowledge to provide basic emergency care and transportation based on assessment findings for an acutely injured patient, including: (a) Care and transportation of a trauma patient; (b) Helmet removal; 	
(c) Trauma triage determination pursuant to rule 4765-14-02 of the Administrative Code.	
 Special patient populations - Applies knowledge of growth, development and aging and assessment findings to provide basic emergency care and transportation for a patient with special needs. Two hours on identifying and interacting with individuals with dementia 	
16. EMS operations - Knowledge of operational roles and responsibilities to ensure	
patient, public and personnel safety 17. Clinical experience, to include: (a) At least ten hours devoted to combined hospital and prehospital clinical internship; (b) At least ten patient assessments to include one pediatric patient assessment.	Application requirement for Ohio EMS certification: Successfully complete an EMS training program through an accredited institution and receive a certificate verifying completion of such program.
* 8. Do you agree that the content from the credential list with the learning outcomes in the left-hand column in the	
Yes	
○ No	
If you feel there was a major omission in the content to support a learn	ing outcome, please indicate.
*0 D	
* 9. Do you support the awarding of 7 credit hours toward	-
4 for students who hold a current Ohio EMT certification,	regardless of where the student
learned the content to obtain the certification?	
Yes	
○ No	
If no, please explain.	
ir no, piedse explain.	
<u></u>	ez
* 10. Do you support the creation of an ITAG for the Ohio	EMT certification?
Yes	
○ No	
If no, please explain.	
11. If you have any additional comments regarding the properties below.	osed EMT ITAG, please leave

Emergency Medical Services (EMT & Paramedic) CTAG & ITAG Endorsement Survey
6. Paramedic Program
* 12. Does your institution offer a Paramedic training program? Yes
○ No

Emergency	Medical	Services	(EMT	&	Paramedic)	CTAG	&	ITAG	Endo	rseme	ent
Survey											

7. Paramedic Program
* 13. Please list all course numbers for your paramedic program with credit hours in parentheses. You do not need to include required prerequisite courses, such as anatomy and physiology. For example: EMS 1002 (7 cr.), EMS 1003 (3 cr.), EMS 2001 (8 cr.), EMS 2002 (2 cr.), EMS
2101 (9 cr.), EMS 2102 (1 cr.)
* 14. Please list all certificate or degree programs for which the above courses are required.

8. Paramedic Learning Outcomes Updates

As part of the process to develop an ITAG for the Ohio Paramedic certification, the learning outcomes for Paramedic (CTEMS004) are being reviewed and revised to meet current standards. While the changes may look substantial at a glance, they represent minimal content change. The changes fall under two areas:

- 1. Updates made to reflect the current competency areas of an EMT training course, as outlined in rule $\underline{4765-17-04}$ of the Ohio Administrative Code; and
- 2. The addition of the associated minimum competency statement to each area, from the <u>National EMS Education</u> Standards (2021).

CTEMS004 Paramedic

Course Description: Paramedic curriculum provides specialized subject matter, laboratory, clinical and field experiences designed to prepare individuals to provide advanced life support in the pre-hospital phase of an emergency. Instruction includes patient assessment, trauma-triage, advanced airway management, cardiac management, ECG monitoring and electrical intervention, defibrillation, intravenous, intramuscular, and subcutaneous administration of medications, and other invasive procedures, delivery and newborn care, in-depth study of the pathophysiology of illness and injuries. The personnel trained may be members of fire departments, police departments, or other agencies that are involved in the emergency treatment and rescue of people.

Credits: 30

CTAG Note: Per rule 4765-17-04 of the Ohio Administrative Code:

An EMS training program for a certificate to practice as a paramedic shall be in accordance with division (E) of section 4765.16 of the Revised Code and this rule and shall require all students complete an anatomy and physiology course as a prerequisite for admission into the EMS training program for a certificate to practice as a paramedic. The EMS training program shall be conducted in accordance with the "National EMS Education Standards" approved by NHTSA, the "Ohio Approved EMS Curriculum Standards" approved by the board, and consistent with the scope of practice set forth in rule 4765-17-03 of the Administrative Code.

At the conclusion of the paramedic training program, the student will demonstrate entry level competency in the affective, psychomotor, and cognitive domains related to each of the areas of instruction listed in the learning outcomes section.

Submitted course work must include proof of laboratory and clinical components. The coursework must be part of a paramedic training program which is CAAHEP-accredited or that has been issued a CoAEMSP "Letter of Review."

Learning Outcomes Note: All outcomes are essential and must be taught.

To limit the size of the CTAG, listed outcomes summarize the competency areas of the paramedic training course, as outlined in rule <u>4765-17-04</u> of the Ohio Administrative Code, and the associated minimum competency statements of the <u>National EMS Education Standards</u> (2021). For elaboration of the knowledge within each competency, the reader is referred to the <u>National EMS Education Standards</u>, the <u>Ohio Approved EMS Curriculum Standards</u>, and the <u>Scope of Practice</u> approved by the State Board of EMS. Paramedic students will need to know all material within the paramedic curriculum as well as that of the advanced EMT, EMT, and emergency medical responder.

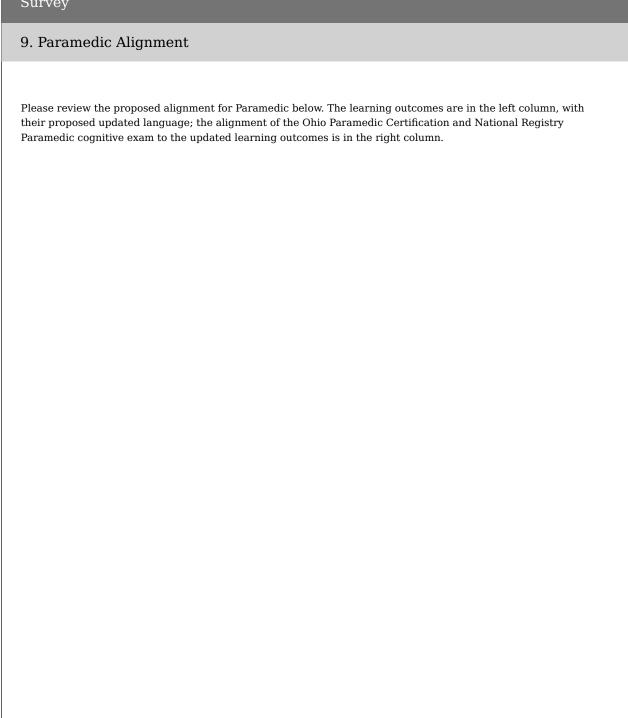
 $Please\ review\ the\ proposed\ learning\ outcomes\ changes\ below.\ Changes\ highlighted\ in\ yellow\ indicate\ updates\ based\ on\ Ohio\ Administrative\ Code.$

Original Learning Outcomes	Proposed New Learning Outcomes
1. Preparatory	Preparatory - Integrates knowledge of EMS systems, the safety/well-being of the paramedic, and medical/ legal and ethical issues intended to improve the health of EMS personnel, patients and the community.
2. Anatomy and physiology	Anatomy and physiology - Integrates knowledge of the anatomy and physiology of all human systems.
3. Medical terminology	3. Medical terminology - Integrates anatomical and medical terminology and abbreviations into written and oral communication with colleagues and other health care professionals.
4. Pathophysiology	Pathophysiology - Integrates knowledge of pathophysiology of major human systems.
5. Life span development	Life span development - Integrates knowledge of life span development.
6. Public health	6. Public health - Applies knowledge of principles of public health and epidemiology including public health emergencies, health promotion and illness and injury prevention.
7. Pharmacology	7. Pharmacology - Integrates knowledge of pharmacology to formulate a treatment plan intended to mitigate emergencies and improve the overall health of the patient.
8. Airway management, respiration, and artificial ventilation	8. Airway management, respiration, and artificial ventilation - Integrates knowledge of anatomy, physiology and pathophysiology into the assessment to develop and implement a treatment plan with the goal of assuring a patent airway, adequate mechanical ventilation and respiration for patients of all ages.
9. Assessment	9. Patient assessment - Integrate scene and patient assessment findings with knowledge of epidemiology and pathophysiology to form a field impression. This includes developing a list of differential diagnoses through clinical reasoning to modify the assessment and formulate a treatment plan.
10. Medicine, to include chest compression assist devices	10. Medicine - (to include chest compression assist devices) - Integrates assessment findings with principles of epidemiology and pathophysiology to formulate a field impression and implement a treatment/ disposition plan for a patient with a medical complaint.
11. Shock and resuscitation	11. Shock and resuscitation - Integrates knowledge of causes and pathophysiology into the management of cardiac arrest and peri-arrest states.
12. Trauma, to include trauma triage determination	'

13. Special patient populations	13. Special patient populations - Integrates assessment findings with principles of pathophysiology and knowledge of psychosocial needs to formulate a field impression and implement a treatment/disposition plan for patients with specia needs.
	15. Two hours on identifying and interacting with individuals with dementia
14 EMS operations	with dementia

14. EMS operations	16. EMS operations - Knowledge of operational roles and	
	responsibilities to ensure patient, public and personnel safety	

Yes		
O No		
If no, please elaborate.		



	Align	ment
	Postsecondary Learning Outcomes: Paramedic (CTEMS004)	Content from Credential: Ohio Paramedic Certification & National Registry Paramedic cognitive examination
L.	Preparatory - Integrates knowledge of EMS systems, the safety/well-being of the paramedic, and medical/ legal and ethical issues intended to improve the health of EMS	The National Registry Examination content is based on the National EMS Scope of Practice Model, the National EMS Education Standards, and the National Registry Practice Analysis. Postsecondary learning
2.	personnel, patients and the community. Anatomy and physiology - Integrates knowledge of the	outcomes 1-15 are based on these same standards.
3.	terminology and abbreviations into written and oral	
	communication with colleagues and other health care professionals.	
	Pathophysiology - Integrates knowledge of pathophysiology of major human systems.	
	Life span development - Integrates knowledge of life span development.	
	health and epidemiology including public health emergencies, health promotion and illness and injury prevention.	
7.	Pharmacology - Integrates knowledge of pharmacology to formulate a treatment plan intended to mitigate emergencies and improve the overall health of the patient.	
3.	Airway management, respiration, and artificial ventilation - Integrates knowledge of anatomy, physiology and	
	pathophysiology into the assessment to develop and implement a treatment plan with the goal of assuring a patent airway, adequate mechanical ventilation and	
).	respiration for patients of all ages. Patient assessment - Integrate scene and patient assessment findings with knowledge of epidemiology and	
	pathophysiology to form a field impression. This includes	
	developing a list of differential diagnoses through clinical reasoning to modify the assessment and formulate a treatment plan.	
.0.	Medicine (to include chest compression assist devices) - Integrates assessment findings with principles of epidemiology and pathophysiology to formulate a field impression and implement a treatment/ disposition plan for a	
1.	patient with a medical complaint. Shock and resuscitation - Integrates knowledge of causes and pathophysiology into the management of cardiac arrest and peri-arrest states.	
.2.	Trauma (to include trauma triage determination pursuant to rule 4765-14-02 of the Administrative Code) - Integrates assessment findings with principles of epidemiology and	
	pathophysiology to formulate a field impression to implement a treatment/ disposition plan for an acutely injured patient.	
.3.	Special patient populations - Integrates assessment findings with principles of pathophysiology and knowledge of psychosocial needs to formulate a field impression and	
	implement a treatment/disposition plan for patients with special needs.	
	Two hours on identifying and interacting with individuals with dementia	
.5.	EMS operations - Knowledge of operational roles and responsibilities to ensure patient, public and personnel safety	
	h the learning outcomes in the left-hand of Yes	e credential listed in the right-hand column ali column in the template?
) No	
yo	ou feel there was a major omission in the content to	support a learning outcome, please indicate.

Yes				
No				
no, please explain.				
18. Do you suppo	rt the creation of a	n ITAG for the C	Ohio Paramedic co	ertification?
Yes				
No				
no, please explain.				
	lditional comments	s regarding the p	proposed Parame	dic ITAG, please
thom bolour				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				e e
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				
e them below.				

10. Bachelor's Pathway Information

This final section of the survey is not related to CTAG or ITAG endorsement. Community colleges may skip this section and proceed to survey submission.

We are gathering information for the development of an Ohio Guaranteed Transfer Pathway for students who complete an associate degree in the area of emergency medical services.

Background Information: Transfer and articulation of applied associate degree coursework into bachelor's degree programs can be challenging, particularly when there is not a major that directly aligns. To help students who complete an AAS in emergency medical services and want to go on to pursue a bachelor's degree, we are collecting information about bachelor's degree programs that would apply all, or the majority, of their AAS coursework toward program requirements. Programs may be in a variety of areas, including, but not limited to, EMS management, healthcare, and administration/organizational leadership. They may be designed as bachelor's completion programs, but traditional programs may also be appropriate.

Programs should meet the following criteria:

- 1. The program would be able to transfer and apply most, if not all, of an APPLIED associate degree to meet lower level program requirements.
- 2. A student who has completed an APPLIED associate degree in emergency medical services could complete the bachelor's degree in approximately 60 credit hours.

20. Please enter the names of any bachelor's programs at your institution that may meet the

above criteria and include a link to the program's webpage. If your institution does not ha
any relevant programs, please type "N/A".

Any questions about this portion of the survey can be emailed to Candice Grant, Senior Director of Ohio Guaranteed Transfer Pathways (cgrant@highered.ohio.gov).

Survey
11. Thank You!
Thank you for completing this survey.
If you have any questions regarding this survey, please email Holly Hall at hhall@highered.ohio.gov.