Chapter 2
The Well-Being of the EMT
U.S. DOT Objectives Directory

U.S. DOT Objectives are covered and/or supported by the PowerPoint™ Slide Program and Notes for Emergency Care, 11th Ed. Please see the Chapter 2 correlation below.

*KNOWLEDGE AND ATTITUDE*

- **1-2.1** List possible emotional reactions that the EMT may experience when faced with trauma, illness, death, and dying. Slides 18-24, 35
- **1-2.2** Discuss the possible reactions that a family member may exhibit when confronted with death and dying. Slides 35, 37
- **1-2.3** State the steps in the EMT’s approach to the family confronted with death and dying. Slides 36, 38
- **1-2.4** State the possible reactions that the family of the EMT may exhibit due to their outside involvement in EMS. Slide 31
- **1-2.5** Recognize the signs and symptoms of critical incident stress. Slides 25-27
- **1-2.6** State possible steps the EMT may take to help reduce or alleviate stress. Slides 28-30, 32-34
- **1-2.7** Explain the need to determine scene safety. Slides 39-56
- **1-2.8** Discuss the importance of body substance isolation (Standard Precautions). Slides 5-6, 15-17

(cont.)
*KNOWLEDGE AND ATTITUDE

- 1-2.9 Describe the steps the EMT should take for personal protection from airborne and bloodborne pathogens. Slides 7-14
- 1-2.10 List the personal protective equipment necessary for each of the following situations:
  - Hazardous materials Slides 41-45
  - Rescue operations Slides 50
  - Violent scenes Slides 46-47, 52-53
  - Crime scenes Slides 51-52
  - Exposure to bloodborne pathogens Slides 7-17
  - Exposure to airborne pathogens Slides 7-17
- 1-2.11 Explain the rationale for serving as an advocate for the use of appropriate protective equipment. Slide 6

(cont.)
*SKILLS

- **1-2.12** Given a scenario with potential infectious exposure, the EMT will use appropriate personal protective equipment. At the completion of the scenario, the EMT will properly remove and discard the protective garments.

- **1-2.13** Given the previous scenario, the EMT will complete disinfection/cleaning and all reporting documentation.
Standard Precautions
Standard Precautions

- Protect EMT and patient
- Assume all body substances are infectious
- Procedures set by OSHA and local policy
The Biohazard Symbol Identifies Potential Infectious Items
Best Protection Is to Wash Hands Thoroughly
Use of Hand Sanitizers
Wear Vinyl or Synthetic Gloves
Use Protective Eyewear
Gowns Protect Clothing from Fluid Splatter
Mask/Eye Shield Combination Offers Protection from Fluid Splatter
NIO SH-Approved Respirators

N-95 Respirator

HEPA Respirator
Infectious Disease Prevention

- Written exposure control plan
- Preventive vaccines
- Immune status verification (titer)
- Testing (tuberculin skin test [TST] or blood test)
Diseases of Concern

Communicable diseases with which we are most concerned are caused by bloodborne and airborne pathogens such as viruses, bacteria, and other harmful organisms.
Ryan White Act*

In 1994, the Centers for Disease Control and Prevention (CDC) established procedures by which emergency response workers may find out if they have been exposed to life-threatening infectious diseases.

*This act was deauthorized by Congress and is expected to be reinstated in 2009. Other state and federal regulations may apply.
Emotion and Stress
Three Stages of Stress

1st Stage—Alarm Stage
- “Fight or Flight”

2nd Stage—Resistance
- Adaptation and Coping

3rd Stage—Exhaustion
- Serious illnesses may occur.
Types of Stress Reactions

- **Acute stress reaction**
  - Quick onset
  - Overwhelmed feeling

- **Delayed stress reaction**
  - May occur days, weeks, or months later

(cont.)
Types of Stress Reactions

- Cumulative stress reaction
  - Buildup of low stress over long period of time
Causes of Stress

Mass-Casualty Incidents

(cont.)
Causes of Stress

Amputations

(cont.)
Causes of Stress

Critically ill pediatric patient

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Stress: Warning Signs

Signs and symptoms:

- Irritability toward coworkers, family, friends
- Inability to concentrate
- Insomnia and/or nightmares

(cont.)
Stress: Warning Signs

- Anxiety
- Indecisiveness
- Guilt
- Loss of appetite

(cont.)
Stress: Warning Signs

- Loss of interest in sex
- Isolation
- Loss of interest in work
Dealing with Stress

Lifestyle changes:

- Change diet—reduce sugar, caffeine, and alcohol.
- Avoid fatty foods.
- Increase carbohydrates.
Stress Management

Lifestyle changes:

- Exercise
- Relaxation
- Meditation; visual imagery
- Balance work, family, recreation, and health
Stress Management

- Environmental changes:
  - Request assignments that allow more time with family and friends
  - Request duty assignment to a less busy area
  - Seek professional help, if needed
Stress: Reaction of Family and Friends

- Lack of understanding
- Fear (of separation, being ignored)
- Stress (caused by on-call situations)
- Frustration (wanting to share)
Critical Incident Stress Management (CISM)
CISM

- Within 24–72 hours post-incident
- Open discussion (feelings, fears, reactions)
- All information confidential

(cont.)
CISM

- Not an investigation or interrogation
- CISD team offers suggestions on overcoming stress.
Death and Dying

Stages

- Denial
- Anger
- Bargaining
- Depression
- Acceptance

(cont.)
Death and Dying

Patient and Family Needs

- Dignity and respect
- Sharing
- Communication
- Privacy
- Control

(cont.)
Death and Dying

Reaction of Family

- Rage
- Anger
- Despair
Death and Dying

Dealing with Patient and Family

- Listen empathetically.
- Use a gentle tone of voice.
- Use a reassuring touch, if appropriate.
- Do not falsely reassure.
Scene Safety
Scene Safety Golden Rule

Plan

Observe

React
Hazardous Materials Incidents

- Recognize when a problem exists.
- Initial actions should be aimed at protecting yourself, patients, and bystanders.
- Specialized teams control scene.
- Treat patients AFTER decontamination.
Placards Help Identify Hazardous Materials
Identify Situations from a Distance
DOT Response Guidebook
(Hazardous Materials Reference)
Specialized Threats

- Electrical
- Fire
- Explosion
- Hazardous materials
Violence

The police are responsible for securing the scene from violence.
Violence

Scene dangers from:

- Patients
- Perpetrators of crimes
- Bystanders
- Family members
- Animals
Planning for Safety

- Wear protective clothing.
- Preparing equipment:
  - Not cumbersome/bulky
  - Flashlight
- Carry a radio.
- Assign safety roles.
Protective Clothing

- Turnout gear
- Puncture-proof gloves
- Helmet
- Eyewear
- Non-slip footwear
Wearing Protective Equipment at Rescue Scenes
Body Armor
May Offer
Additional Protection
Safety Observations

- Crime scenes/known violence
- Alcohol or drug use
- Prior calls or violence in area
- Weapons

(cont.)
Safety Observations

- Hostile crowds
- Broken glass, blood stains
- Pets
- Disputes/fighting
Reacting to Danger

- Leave the scene (retreat).
  - Get far enough away
  - Two obstacles between you and patient
- Get rid of bulky equipment.
- Cover and conceal.
- Radio for police/reevaluate.
CONCEALMENT Hides Your Body
COVER Hides and Protects Your Body
Review Questions

1. Name some of the causes of stress for an EMT and explain some ways the EMT can alleviate job-related stress.

2. Describe the purpose and process of a critical incident stress debriefing (CISD).
Review Questions

3. What are the stages of grief? How should the EMT deal with these emotions?

4. List the types of personal protective equipment used in Standard Precautions. Identify a condition or patient with which each one should be used.
Street Scenes

- Why wear protective gloves on this type of call?
- What is the impact of an occupational exposure on you, your family, and your fellow EMS workers?
- What can you expect after exposure?

(continue...)
How will stress be a factor in your life for the next few months?

How important is hand washing?

What types of Standard Precautions should EMTs always be ready to use on all EMS calls?