

**Northwest Community EMS System**  
**September 2022 CE: EMS Operations: Emergency Preparedness & Response |**  
**MPI Management | START & JumpSTART Triage**  
**Credit Questions**

Name (Print):		EMS Agency:		
EMS Educator:				
Date submitted	Score:	<input type="checkbox"/> Acceptable <input type="checkbox"/> Not acceptable	<input type="checkbox"/> Incomplete <input type="checkbox"/> Incorrect answers	Date returned w/ feedback
Resubmission received:	Score:	<input type="checkbox"/> Acceptable <input type="checkbox"/> Not acceptable	<input type="checkbox"/> Incomplete <input type="checkbox"/> Incorrect answers	Date returned w/ feedback:
# CE Hours awarded:		Date		

This packet should take 2 hours to complete – which earns the equivalent of the 2 hour live CE class.

**Sources of information/answers**

September CE Participant slide deck handout & NWCEMSS SOPs

1. What are the training requirements for JumpSTART triage per IDPH:

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2. What is the definition/ trigger for each scale of incident? Fill in chart below

Small Scale	Medium/ Large Scale

#3-10. Fill in the comparison chart below using the Multiple Patient Incident SOP as a reference.

Element	Small scale incident	Medium to large scale incident
Triage required		
Triage tags		
PCRs		
Pt distribution; usual transport patterns		
Trauma Center criteria		
OLMC when transporting		
# in pt compartment + EMS responder		
Refusal process		

11. What are the priorities of a MPI?

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12. What is included in the SMART System?

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13. What is included in the SMART Triage Pack?

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14. What are the benefits to the newest SMART triage tag?

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15. What are the overall goals of the Triage Officer?

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Who do they report to? \_\_\_\_\_

16. What is the SALT method?

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Stands for:

S \_\_\_\_\_

A \_\_\_\_\_

L \_\_\_\_\_

T \_\_\_\_\_

17. Describe primary triage and the first step in global sorting.

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18. If EMS encounters any emotionally disruptive patient, they should be triaged Immediate (red).

☐ True ☐ False

19. If a first responder is injured, they should be triaged as Delayed (yellow).

☐ True ☐ False

20. NWCEMSS SOPs define pediatrics up until the age of 13 years for treatment purposes. At what age is the JumpSTART triage method defined under the new triage algorithm?

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21. What are the overall goals of the Treatment Officer?

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Who do they report to? \_\_\_\_\_

22. What is the Revised Trauma Score comprised of?

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23. It is possible if transport resources are available and resources to treat pts are insufficient, pts may be immediately assigned to ambulances/ transported without entering the treatment area.

☐ True ☐ False

24. What are the overall goals of the Transport Officer?

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Who do they report to? \_\_\_\_\_

25. In the event of many patients, NWCEMSS can begin to immediately clear the scene of some pts to get a better grasp of the situation. Explain. (Be sure to include quantity, type of patient, and destination)

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26. Who decides additional patient destinations?

If small scale: \_\_\_\_\_

If med-large scale: \_\_\_\_\_

27. Is it necessary to keep families together at the same receiving hospital? \_\_\_\_\_

28. What are nerve agents?

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What are two types?

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29. What are the symptoms of exposure to nerve agents?

Mild: \_\_\_\_\_

Moderate: \_\_\_\_\_

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Severe: \_\_\_\_\_

30. What drugs are effective antidotes against chemical nerve agents?

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35. Who does EMS contact to request access to the antidotes? \_\_\_\_\_

36. If the Medical Director/ Charge Physician authorizes release of CHEMPACK Assets, How will they get to the scene?

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- 37-40. Utilizing START JumpSTART (pg. 57 of SOPS), determine what category (color) you would assign to each of patient.

Victim 1 \_\_\_\_\_

Victim 2 \_\_\_\_\_

Teen Male

Child Female

RR 38

RR 32

Radial pulse present

Palpable pulse

Knows name and can recall incident

Alert, crying

Facial burns, cough, pupils constricted

Bleeding from ears, bruise to neck

Victim 3 \_\_\_\_\_

Adult Female

RR 28

Capillary refill < 2

Crying for help, able to recall events

Leg caught under desk and chair- open fracture

Victim 4 \_\_\_\_\_

Teen Male

RR 10

Pulse present- slow

Unresponsive

No obvious injuries