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Northwest Community EMS System
March 2024 CE: Behavioral Emergencies | Mental Health & Resiliency for EMS
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

March CE PowerPoint PDF, NWCEMSS SOPs, video links, Use of Restraints Skill Performance Record

1. What percentage of first responders develop mental health issues at some point in their life?
 - a. 79%
 - b. 85%
 - c. 50%
 - d. 65%

2. List 4 factors that make first responders more susceptible to mental health issues?

1. _____ 2. _____
3. _____ 4. _____

3. What is the definition of moral injury?

** Please watch the following video to answer the next question:

[May Day May Day: Sounding the Alarm about Mental Health Struggles in the Firefighter Community – YouTube](#)

4. During the interview with David Baird, Chief of Norwich Township Fire Dept, what does he say, in the first 3 months of being fire chief, he realized would be his biggest challenge?
 - a. Mental Health
 - b. Poor job satisfaction
 - c. Push out times
 - c. Members calling in sick

5. What have surpassed line of duty deaths, and stand as the leading cause of death for firefighters for the past 10 years?

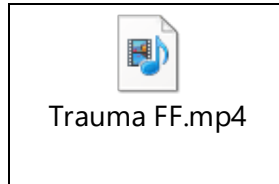
6. List 3 functions of the parasympathetic nervous system?

1. _____
2. _____
3. _____

7. What are 6 signs of sympathetic dominance?

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

** The following 3 questions are in relation to Jill Kottmeier's video (see link below).



8. When someone is bumped out of their resiliency zone and they go "high," what are 2 symptoms of this:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
|----------|----------|

9. What is the difference between Big "T" and Little "t" according to Jill?

10. In reference to processing trauma, does Jill recommend first responders practice *Experiential Avoidance* or *Mindful Avoidance*?

Refer to the following video for the next 2 questions:

[Many firefighters silently suffer from PTSD – YouTube](#)

11. What is the example of an "invisible wound" that the news reporter comments on in her telecast?

- | | |
|---------------------------------------|------------------------|
| a. Injury incurred during extrication | b. PTSD |
| c. Scar from a previous surgery | d. High blood pressure |

12. According to the news report, which of the following are accurate statistics about firefighters and PTSD:

- a. 1 in 10 will suffer PTSD during their career, but 75% feel stigma is a barrier to seeking help.
- b. All firefighters will suffer PTSD at some point in their career.
- c. 50% of firefighters don't believe PTSD is real.
- d. 1 in 5 firefighters/paramedics will suffer PTSD during their career, but 92% feel stigma is a barrier to seeking help.

13. What is the definition of resiliency?

14-17. True or False. As a first responder, it is hard to break out of the negative thought cycle because:

- | | | |
|---|-------------------------------|--------------------------------|
| First responders train for worst case scenarios? | <input type="checkbox"/> True | <input type="checkbox"/> False |
| More times than we want, we are unable to help? | <input type="checkbox"/> True | <input type="checkbox"/> False |
| People call 911 on their best day, when they want to celebrate? | <input type="checkbox"/> True | <input type="checkbox"/> False |
| It takes our brain longer and requires more work to get out of a loss (negative) mindset, then a gain (positive) mindset? | <input type="checkbox"/> True | <input type="checkbox"/> False |

18. What are the 3 suggested methods for building resilience?

- a. _____
- b. _____
- c. _____

Please watch the following video for the next 2 questions:

[One Firefighter's Mental Fitness Journey \(youtube.com\)](https://www.youtube.com/watch?v=...)

19. FF Sam Roy talks about his main coping mechanism prior to getting help and participating in the COMPASS program; what was this coping mechanism?

20. What does FF Roy say was "life changing" for both him and his family?

21. According to the information on slide 17, **list one** of the problems that plays a part in families' struggles to obtain pediatric mental health services? (Slide 17)

22. Consult slide 19. **List one** of the challenges EMS providers face in when it comes to being prepared and confident in caring for pediatric-aged patients with mental health emergencies. (Slide 19)

23. According to findings in the ImageTrend Collaborate report, what percentage of EMS calls for pediatric-aged patients between 2018 and 2021 were for behavioral health-related reasons? (Slide 24)

24. What conclusion was reached by the ImageTrend Collaborate Report regarding EMS training? (Slide 29)

25. What action should EMS take if law enforcement is unable or unwilling to secure access to a patient when a scene is unsafe? (Slide 32)

26. Which of the following should be included in the assessment & documentation of a pediatric patient who presents with symptoms consistent with a behavioral health emergency? Select all that apply. (Slide 33)

- | | |
|--|--|
| <input type="checkbox"/> Potential medical causes for symptoms | <input type="checkbox"/> Ability to answer questions |
| <input type="checkbox"/> Affect / mood | <input type="checkbox"/> Speech |
| <input type="checkbox"/> Behavior | <input type="checkbox"/> Level of consciousness |

27. **List 3** considerations to guide the interview with a pediatric patient experiencing a behavioral emergency. (Slide 35)

28. True or false: The suicide screen (6 questions) can be appropriately used by EMS when the patient's cognitive and communication abilities allow. (Slide 36)

- True False

29. **List one** action that can be employed in de-escalation of agitated patients, for each of the 3 categories: (Slide 38)

Environmental: _____

EMS behaviors: _____

Calming techniques: _____

30. Which drug is most appropriate for a pediatric patient with presentations as below? (Slides 41 & 41; SOP p 36)

Anxious, verbally aggressive, confrontational but cooperative, medium safety risk: _____

Physically aggressive/violent, severely agitated, uncooperative, poses risk to self or others: _____

31. What is required during transport of a pediatric-aged patient in restraints, that is not required when adults in restraints are transported? (Slide 43; Restraints Skill Performance Record)

32. **List one** observation that may alert you to the fact that you are interacting with a person who has a neurocognitive or developmental disorder. (Slide 44)

33. **List one** suggestion for adjusting your approach when you interact with a patient with a neurocognitive or developmental disorder. (Slide 46)

34. Who gives authorization for restraints, and how does EMS comply with this directive when a patient must be restrained quickly? (Use of Restraints Skill Performance Record)

35. What steps can EMS take if a patient in restraints is biting or spitting? (Use of Restraints Skill Performance Record)

36. **List 2** signs of distress in a restrained or held patient. (Use of Restraints Skill Performance Record)

37. What tool provides an objective guide for EMS to re-assess and document response in a patient who was given medication for agitation? Use it to objectively rate a patient who is currently awake, calm and cooperative. (Slide 54, SOP p 37)

_____ Rating: _____

38. An elderly patient who slipped and fell getting out of the tub this morning (no injuries found) does not know today's date, but other decisional assessments are all appropriate. (Knows month, year, address, birthdate; speech is normal and is able to describe the circumstances of the fall and prior to it; is otherwise calm and cooperative; concerned that she is going to miss the daily exercise program she participates in every morning on YouTube). After assistance to get up, the patient ambulates well with a steady gate and appears in no distress. She states she is relieved at being uninjured, and is agreeable to calling her physician for an appointment or calling EMS should she notice any problems going forward. Is this patient decisional (safe to accept a refusal on?) (SOP p 35)

Yes

No

39. Explain which of the 6 Suicide Screen questions must be asked when. (SOP p 36)

40. When utilizing the Suicide Screen questions, what action is EMS to take if the patient answers "Yes" to any of questions 4, 5 or 6? (SOP p 36)
