Offline EMS Reference Pack

Reviewed July 23, 2026

Educational reference only. Educational reference only. Protocols, scope, medication use, normal ranges, and equipment practices vary. Follow your agency, medical director, course, and current local protocols. Do not use this pack as the sole basis for patient care.

EMS Medications

Oxygen

Medical gas used to correct suspected or confirmed hypoxemia and support critically ill patients.

Indications depend on patient condition and local protocol. Titrate when appropriate; avoid delaying ventilation or airway management.

Remember: Delivery device, flow, target saturation, response, fire risk.

Aspirin

Antiplatelet medication commonly used for suspected acute coronary syndrome.

Confirm indications and contraindications; consider allergy, active bleeding, and local protocol.

Remember: Chewable form, reassessment, bleeding risk.

Nitroglycerin

Vasodilator used in selected chest-pain and pulmonary-edema patients.

Check blood pressure, prescribed use when applicable, recent PDE-5 inhibitor use, and protocol.

Remember: Hypotension, headache, repeat BP, symptom response.

Albuterol

Short-acting bronchodilator for bronchospasm.

Assess breath sounds, work of breathing, heart rate, and ability to use the delivery device.

Remember: Tremor, tachycardia, response to treatment.

Ipratropium

Anticholinergic bronchodilator often paired with albuterol in obstructive airway disease.

Used according to local protocol, commonly for asthma or COPD exacerbation.

Remember: Dry mouth, delivery method, reassessment.

Epinephrine auto-injector

Adrenergic medication used for severe allergic reactions and anaphylaxis.

Recognize airway swelling, breathing difficulty, shock, or rapidly progressing symptoms.

Remember: Correct device/site, immediate transport, repeat assessment.

Naloxone

Opioid antagonist used when opioid toxicity causes respiratory depression.

Ventilation remains the priority. Use according to protocol and reassess for recurrent respiratory depression.

Remember: Airway, breathing, withdrawal, scene safety.

Oral glucose

Carbohydrate gel or paste used for selected conscious patients with suspected hypoglycemia.

Patient must be able to protect the airway and swallow. Follow glucose assessment and protocol.

Remember: Aspiration risk, repeat glucose, symptom response.

Glucagon

Hormone used for selected severe hypoglycemia when oral glucose is unsafe or ineffective.

Scope and route vary. Reassess airway, mental status, and glucose.

Remember: Nausea/vomiting, delayed response, recovery position.

Dextrose

Intravenous glucose used by appropriately credentialed clinicians for hypoglycemia.

Concentration and route vary by protocol. Confirm IV patency and reassess glucose.

Remember: Extravasation, hyperglycemia, repeat assessment.

Ondansetron

Antiemetic used for nausea and vomiting.

Consider causes of vomiting, QT-risk factors, and local protocol.

Remember: Route, response, ongoing hydration/transport needs.

Acetaminophen

Analgesic and antipyretic used in selected systems.

Check total recent intake, liver risk, age/weight requirements, and protocol.

Remember: Duplicate products, maximum daily exposure.

Ibuprofen

NSAID used for pain or fever in selected systems.

Consider allergy, bleeding, kidney disease, pregnancy, and age restrictions.

Remember: GI upset, hydration status, duplicate NSAID use.

Diphenhydramine

Antihistamine used in selected allergic reactions.

It does not replace epinephrine in anaphylaxis. Scope and route vary.

Remember: Sedation, anticholinergic effects, airway monitoring.

Activated charcoal

Adsorbent used rarely for selected ingestions under medical direction.

Not for caustics, hydrocarbons, altered patients without protected airway, or many other exposures.

Remember: Poison-center/medical-control direction, aspiration risk.

Normal saline

Isotonic crystalloid used for vascular access, medication delivery, and selected volume needs.

Amount and indication vary by patient and protocol.

Remember: Lung sounds, perfusion, reassessment, fluid overload.

Lactated Ringer's

Balanced crystalloid used in selected systems for fluid replacement.

Follow protocol and consider patient condition and compatibility.

Remember: Perfusion, lung sounds, reassessment.

Epinephrine 1 mg/mL

Concentrated epinephrine formulation used for selected IM indications by authorized clinicians.

Concentration errors are dangerous. Verify indication, route, and formulation.

Remember: Read label aloud, cross-check concentration.

Epinephrine 0.1 mg/mL

Dilute epinephrine formulation used for selected resuscitation indications by authorized clinicians.

Do not confuse with 1 mg/mL. Follow resuscitation protocol.

Remember: Concentration, route, timing, documentation.

Amiodarone

Antiarrhythmic used in selected ventricular dysrhythmias by ALS clinicians.

Indication, rhythm, route, and sequence are protocol-specific.

Remember: Rhythm, blood pressure, IV access, reassessment.

Adenosine

Short-acting antiarrhythmic used for selected regular narrow-complex tachycardias.

Requires rhythm interpretation, rapid administration, monitoring, and protocol.

Remember: Transient pause, patient explanation, rhythm strip.

Atropine

Anticholinergic used for selected symptomatic bradycardia and other indications.

Use depends on rhythm, symptoms, and protocol.

Remember: Heart rate, perfusion, pacing readiness.

Fentanyl

Opioid analgesic used by authorized clinicians.

Assess pain, respiratory status, blood pressure, allergies, and protocol.

Remember: Sedation, ventilation, reassessment.

Ketamine

Dissociative medication used in selected systems for analgesia, sedation, or behavioral emergencies.

Indication and dosing vary greatly. Requires monitoring and airway readiness.

Remember: Airway, emergence reactions, blood pressure.

Midazolam

Benzodiazepine used for seizures, sedation, and selected agitation protocols.

Monitor ventilation and hemodynamics. Scope and route vary.

Remember: Respiratory depression, sedation, reassessment.

Magnesium sulfate

Medication used for selected dysrhythmias, severe asthma, or obstetric emergencies.

Indication and route are protocol-specific.

Remember: Blood pressure, reflexes/respirations when relevant.

Calcium

Used for selected toxicologic, electrolyte, and resuscitation situations.

Formulation and compatibility matter. Follow protocol.

Remember: IV patency, rhythm, medication compatibility.

Sodium bicarbonate

Alkalinizing medication used in selected toxicologic and resuscitation situations.

Not a routine medication for all arrests. Follow protocol.

Remember: Ventilation, indication, IV compatibility.

Normal Vitals & Reference Ranges

Adult resting pulse

Commonly taught reference: 60-100 beats/min.

Interpret with symptoms, perfusion, medications, fitness, temperature, and trend.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adult resting respirations

Commonly taught reference: 12-20 breaths/min.

Count quality and effort, not only rate. Avoid announcing the count.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adult oxygen saturation

Often 95-100% in healthy adults at sea level.

Baseline, altitude, chronic lung disease, waveform quality, and clinical appearance matter.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adult systolic blood pressure

A single “normal” number is less useful than perfusion and trend. Many courses use about 90-120 mmHg as a basic reference.

Check cuff size, position, repeated readings, and symptoms.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adult temperature

About 97-99°F (36.1-37.2°C) is a common oral reference range.

Route, environment, age, and device affect readings.

Remember: Ranges are teaching references, not universal treatment thresholds.

Newborn pulse

Common EMS teaching range: roughly 100-180/min.

Use age-specific references from your course and protocol.

Remember: Ranges are teaching references, not universal treatment thresholds.

Infant pulse

Common EMS teaching range: roughly 100-160/min.

Assess perfusion and respiratory status; ranges vary with activity.

Remember: Ranges are teaching references, not universal treatment thresholds.

Toddler pulse

Common EMS teaching range: roughly 90-150/min.

Crying and fever can increase rate.

Remember: Ranges are teaching references, not universal treatment thresholds.

Preschool pulse

Common EMS teaching range: roughly 80-140/min.

Trend and appearance matter more than one isolated number.

Remember: Ranges are teaching references, not universal treatment thresholds.

School-age pulse

Common EMS teaching range: roughly 70-120/min.

Use local pediatric reference tools.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adolescent pulse

Common EMS teaching range: roughly 60-100/min.

Approaches adult ranges.

Remember: Ranges are teaching references, not universal treatment thresholds.

Newborn respirations

Common EMS teaching range: roughly 30-60/min.

Watch chest/abdomen, effort, color, and pauses.

Remember: Ranges are teaching references, not universal treatment thresholds.

Infant respirations

Common EMS teaching range: roughly 30-50/min.

Count a full minute when irregular.

Remember: Ranges are teaching references, not universal treatment thresholds.

Toddler respirations

Common EMS teaching range: roughly 24-40/min.

Observe before touching when possible.

Remember: Ranges are teaching references, not universal treatment thresholds.

Preschool respirations

Common EMS teaching range: roughly 22-34/min.

Retractions, grunting, and nasal flaring are important.

Remember: Ranges are teaching references, not universal treatment thresholds.

School-age respirations

Common EMS teaching range: roughly 18-30/min.

Consider fever, anxiety, pain, and exertion.

Remember: Ranges are teaching references, not universal treatment thresholds.

Adolescent respirations

Common EMS teaching range: roughly 12-20/min.

Interpret similarly to adults while considering age.

Remember: Ranges are teaching references, not universal treatment thresholds.

Capillary refill

Often less than 2 seconds in a warm, well-perfused patient.

Cold, age, lighting, and technique affect the result.

Remember: Ranges are teaching references, not universal treatment thresholds.

End-tidal CO2

A commonly taught adult reference is about 35-45 mmHg.

Interpret waveform, ventilation, perfusion, clinical context, and trend.

Remember: Ranges are teaching references, not universal treatment thresholds.

Blood glucose

A common fasting laboratory reference is about 70-99 mg/dL, but EMS interpretation depends on symptoms, meal timing, diabetes, and protocol.

Treat the patient and follow local thresholds.

Remember: Ranges are teaching references, not universal treatment thresholds.

Assessment Mnemonics

SAMPLE

Signs/symptoms, Allergies, Medications, Past history, Last oral intake, Events leading up.

Use to organize history; ask follow-up questions rather than treating it as a script.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

OPQRST

Onset, Provocation/palliation, Quality, Region/radiation, Severity, Time.

Works for pain and many symptoms, but not every letter fits every complaint.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

AVPU

Alert, responds to Verbal, responds to Pain, Unresponsive.

Rapid mental-status classification; document more detail when possible.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

DCAP-BTLS

Deformities, Contusions, Abrasions, Punctures/penetrations, Burns, Tenderness, Lacerations, Swelling.

Systematic trauma exam reminder.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

AEIOU-TIPS

Alcohol, Epilepsy/electrolytes, Insulin, Overdose/oxygen, Uremia, Trauma/temperature, Infection, Psychiatric/poisoning, Stroke/shock.

Differential reminder for altered mental status; versions vary.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

BE-FAST

Balance, Eyes, Face, Arm, Speech, Time.

Stroke recognition; use your local stroke scale and destination plan.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

PERRL

Pupils Equal, Round, Reactive to Light.

Add size, gaze, and other findings when relevant.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

PMS/CSM

Pulse, Motor, Sensation / Circulation, Sensation, Movement.

Document before and after splinting or movement.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

RACE

Rescue, Alarm, Confine, Extinguish/Evacuate.

Common fire-response mnemonic in facilities; follow site policy.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

PASS

Pull, Aim, Squeeze, Sweep.

Basic extinguisher use when safe and appropriate.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

MARCH

Massive hemorrhage, Airway, Respiration, Circulation, Head injury/Hypothermia.

Tactical/trauma priority framework; training context varies.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

APGAR

Appearance, Pulse, Grimace, Activity, Respiration.

Newborn score at defined intervals; not a substitute for resuscitation decisions.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

GCS

Eye, Verbal, Motor.

Score components separately and document confounders.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

5 Rights

Right patient, medication, dose, route, time.

Many systems add indication, documentation, response, and refusal rights.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

6 Ps

Pain, Pallor, Pulselessness, Paresthesia, Paralysis, Poikilothermia.

Possible limb ischemia/compartment concerns; late signs may be ominous.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

SLUDGE

Salivation, Lacrimation, Urination, Defecation, GI upset, Emesis.

Cholinergic toxidrome reminder; some versions add miosis/bronchorrhea.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

CAGE

Cut down, Annoyed, Guilty, Eye-opener.

Alcohol-use screening tool; use respectfully and within role.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

SOAP

Subjective, Objective, Assessment, Plan.

Documentation framework; EMS PCR structure may differ.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

SBAR

Situation, Background, Assessment, Recommendation.

Structured handoff or consultation format.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

IMIST-AMBO

Identification, Mechanism/medical complaint, Injuries/information, Signs, Treatment, Allergies, Medications, Background, Other.

Structured EMS handoff; local versions vary.

Remember: Use mnemonics as prompts, not substitutes for clinical judgment.

Medical Terminology

Anterior

Toward the front of the body.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Posterior

Toward the back of the body.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Superior

Above or toward the head.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Inferior

Below or toward the feet.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Medial

Toward the midline.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Lateral

Away from the midline.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Proximal

Closer to the trunk or point of origin.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Distal

Farther from the trunk or point of origin.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Bilateral

On both sides.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Unilateral

On one side.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Acute

Sudden onset or short duration.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Chronic

Long-lasting or recurring.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Etiology

Cause or origin of a condition.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Pathophysiology

How disease or injury changes normal body function.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Perfusion

Delivery of oxygenated blood to tissues.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Hypoxia

Inadequate oxygen at the tissue level.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Hypoxemia

Low oxygen in arterial blood.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Dyspnea

Subjective difficulty breathing.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Apnea

Absence of breathing.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Tachypnea

Abnormally rapid breathing.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Bradypnea

Abnormally slow breathing.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Tachycardia

Abnormally rapid heart rate.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Bradycardia

Abnormally slow heart rate.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Cyanosis

Bluish discoloration associated with deoxygenated blood or poor perfusion.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Diaphoresis

Profuse sweating.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Syncope

Temporary loss of consciousness from reduced cerebral perfusion.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Presyncope

Feeling of near-fainting without full loss of consciousness.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Edema

Swelling caused by fluid accumulation.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Hematemesis

Vomiting blood.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Hemoptysis

Coughing blood from the respiratory tract.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Melena

Black, tarry stool often associated with upper GI bleeding.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Hematochezia

Passage of bright red or maroon blood per rectum.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Dysphagia

Difficulty swallowing.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Dysarthria

Difficulty articulating speech from motor dysfunction.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Aphasia

Impaired ability to understand or produce language.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Ataxia

Impaired coordination or unsteady movement.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Paresthesia

Abnormal sensation such as tingling or numbness.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Pallor

Unusual paleness.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Jaundice

Yellow discoloration from elevated bilirubin.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Orthopnea

Breathing difficulty when lying flat.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Stridor

Harsh upper-airway sound, often inspiratory.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Wheeze

Musical sound associated with narrowed lower airways.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Crackles

Discontinuous popping lung sounds, often associated with fluid or reopening airways.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Rhonchi

Low-pitched coarse sounds often associated with secretions.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Triage

Prioritizing patients based on urgency and resources.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Contraindication

Reason a treatment or procedure should not be used.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Indication

Clinical reason to use a treatment or procedure.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Adverse effect

Unintended harmful effect of a treatment.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

Reassessment

Repeat evaluation to identify change or treatment response.

Use the term in a complete patient-care sentence to reinforce meaning.

Remember: Spelling and exact definitions may vary slightly by source.

EMS Equipment

Bag-valve mask (BVM)

Manual positive-pressure ventilation device with self-inflating bag, valve, mask, and oxygen connection.

Select correct mask size, maintain seal, watch chest rise, avoid excessive rate/volume.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Nonrebreather mask

High-concentration oxygen mask with reservoir bag and one-way valves.

Inflate reservoir before placement and maintain adequate flow.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Nasal cannula

Low-flow oxygen interface placed in the nares.

Comfortable and useful for selected spontaneously breathing patients.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Venturi mask

Fixed-performance oxygen mask using interchangeable adapters.

More common in facilities; delivers a selected oxygen concentration.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

OPA

Rigid oral airway used in an unresponsive patient without a gag reflex.

Size correctly; do not use when gag reflex is present.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

NPA

Soft nasal airway used in selected patients with reduced airway tone.

Size and lubricate; contraindications vary with trauma and protocol.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Suction unit

Device used to remove secretions, blood, or vomit from the airway.

Check power, tubing, canister, catheter, and function before calls.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Yankauer catheter

Rigid suction tip for the mouth and oropharynx.

Use under direct visualization; avoid prolonged suction.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Flexible suction catheter

Soft catheter used for selected airway or tracheal suctioning.

Depth and technique depend on training and airway type.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Pulse oximeter

Noninvasive estimate of oxygen saturation and pulse rate.

Confirm waveform/perfusion and compare displayed pulse with palpated pulse.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Glucometer

Point-of-care device for capillary blood glucose.

Check strip compatibility, expiration, sample technique, and infection control.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Manual BP cuff

Inflatable cuff, bulb, valve, and aneroid gauge for blood pressure measurement.

Correct cuff size and positioning are essential.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Stethoscope

Acoustic device for breath sounds, blood pressure, and selected cardiac sounds.

Good seal, correct earpiece direction, quiet technique.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Trauma shears

Heavy scissors designed to cut clothing and some soft materials.

Protect skin while cutting; clean after use.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Tourniquet

Device that stops life-threatening extremity hemorrhage by circumferential compression.

Apply for severe extremity bleeding per training; note time.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Hemostatic gauze

Gauze impregnated with an agent that supports clot formation.

Pack appropriate wounds firmly and maintain pressure.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Pressure dressing

Dressing designed to maintain pressure over a bleeding wound.

Do not obscure ongoing reassessment of bleeding and distal circulation.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Occlusive dressing

Airtight or semi-airtight dressing used for selected open chest or neck wounds.

Monitor breathing and follow venting protocol.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Cervical collar

Device used in selected spinal-motion-restriction plans.

Correct size and fit; collar alone does not fully immobilize the spine.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Scoop stretcher

Split stretcher that can be assembled around a patient.

Useful for selected lifts and transfers; follow manufacturer limits.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Stair chair

Chair designed to move selected patients on stairs or through tight spaces.

Use straps, adequate personnel, and safe lifting technique.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Pelvic binder

Circumferential device for suspected unstable pelvic injury.

Placement is typically over the greater trochanters, per training.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Nebulizer

Device that aerosolizes medication for inhalation.

Assemble correctly, maintain gas flow, reassess breath sounds and effort.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

CPAP

Noninvasive positive airway-pressure system for selected breathing patients.

Requires spontaneous breathing, appropriate mental status, seal, and monitoring.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Supraglottic airway

Advanced airway device seated above the vocal cords.

Confirm placement with waveform capnography when available and ongoing reassessment.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Endotracheal tube

Tube passed through the vocal cords into the trachea by trained clinicians.

Placement confirmation and continuous monitoring are essential.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

Capnography

Device measuring exhaled CO2 as a number and waveform.

Interpret waveform, trend, ventilation, perfusion, and clinical context.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

12-lead ECG cable

Electrode and lead system recording the heart from multiple views.

Correct placement and skin preparation reduce artifact.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

IV catheter

Over-the-needle catheter used for vascular access.

Select site and size based on need; secure and reassess.

Remember: Use equipment only within training, authorization, and manufacturer guidance.

IO device

Device for intraosseous vascular access when indicated.

Site, needle, pain management, and confirmation are protocol-specific.

Remember: Use equipment only within training, authorization, and manufacturer guidance.