

Emergency Medical Assistants Licensing Board

EMA Guide to Examinations Handbook

Updated November 2016

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Introduction

The EMA Licensing Board (Board) is regulated under the *Emergency Health Services Act* to examine, register and licence Emergency Medical Assistants (EMAs) practicing throughout British Columbia and set licence terms and conditions.

The following handbook is the reference for candidates seeking to take EMA Licensing exams and training agencies delivering training programs recognized by the Board. This guide outlines standards and expectations for Board examinations.

The purpose of this document is to ensure candidates are informed of policies, procedures and requirements related to the examination process.

Should any information within this handbook be out-of-date and require updating, or if a topic area isn't covered, please contact the EMA Licensing Branch at getanexam@gov.bc.ca.

Part A: Scheduling your Exams

Important Read the relevant [examination policies](#) for more information on scheduling and preparing for examinations and the [Practical Examination Schedule](#) (PDF, 19KB) for exam locations and dates.

Course Certificates/Transcripts

A board-recognized training institution must submit your [Proof of successful completion of training](#) (certificate/transcript). Candidates have 12 months from course completion to complete the licensing examinations.

Candidates must follow the steps below to schedule exams; no examinations will be scheduled until a certificate/transcript has been received by the branch.

Certificates are not required when scheduling continuing competence exams, reinstatement exams where training is not required, or from licensed out of province applicants scheduling the jurisprudence exam.

The following chart describes what examinations you must successfully complete for your licence category.

Examination Requirements	
<u>Licence Category</u>	Scheduling Instructions
<ul style="list-style-type: none"> • Required Examinations 	
<p><u>EMR</u></p> <ul style="list-style-type: none"> • jurisprudence examination • BC EMALB written examination • practical examination 	<ol style="list-style-type: none"> 1. Read the relevant examination policies. 2. Submit electronically the Request for Evaluation form. Practical Exams - choose up to three sessions for when you are available (ranked in order of preference). 3. Obtain a BCeID (BCeID is an Online Service that makes it possible for you to use your user ID and password to sign in securely to BCeID participating Government Online Services) 4. Request Access to the online learning system for the jurisprudence and written exams.

Examination Requirements	
<u>Licence Category</u>	Scheduling Instructions
<ul style="list-style-type: none"> • Required Examinations 	
<p><u>PCPs (that entered a program prior to March 1, 2016)</u></p> <ul style="list-style-type: none"> • jurisprudence examination • BC EMALB written examination • practical examination 	<ol style="list-style-type: none"> 1. Read the relevant examination policies. 2. Submit electronically the Request for Evaluation form. Practical Exams - choose up to three sessions for when you are available (ranked in order of preference). 3. Obtain a BCeID (BCeID is an Online Service that makes it possible for you to use your user ID and password to sign in securely to BCeID participating Government Online Services) 4. Request Access to the online learning system for the jurisprudence and written exams.
<p><u>PCPs (that entered a program on or after March 1, 2016)</u></p> <ul style="list-style-type: none"> • jurisprudence examination • COPR Entry to Practice written examination 	<ol style="list-style-type: none"> 1. Read the relevant examination policies. 2. Submit electronically the Application for Licence form. 3. Obtain a BCeID (BCeID is an Online Service that makes it possible for you to use your user ID and password to sign in securely to BCeID participating Government Online Services) 4. Request Access to the online learning system for the jurisprudence exam.
<p><u>ACPs</u></p> <ul style="list-style-type: none"> • jurisprudence examination • COPR Entry to Practice written examination 	<ol style="list-style-type: none"> 1. Read the relevant examination policies. 2. Submit electronically the Application for Licence form. 3. Obtain a BCeID (BCeID is an Online Service that makes it possible for you to use your user ID and password to sign in securely to BCeID participating Government Online Services) 4. Request Access to the online learning system for the jurisprudence exam.

Examination Requirements	
<u>Licence Category</u>	Scheduling Instructions
<ul style="list-style-type: none"> • Required Examinations 	
<p><u>Applicants already licensed in another province (AIT)</u></p> <ul style="list-style-type: none"> • jurisprudence examination 	<ol style="list-style-type: none"> 1. Read the relevant examination policies. 2. Complete and electronically submit the Application for Licence form. 3. Submit a colour photo that is less than one year old. Attach a digital colour photo to the application for licence form or printed photos can be mailed to our office. 4. Complete Part A of the Verification of Paramedic Registration (PDF, 269KB) form for each province you are currently and/or previously registered in and send it to your regulating body(s). The regulating body will complete Part B and send it directly to our office. Note: For Ontario applicants the form must be completed by the Ministry of Health and Long-Term Care (base hospitals are not considered a regulating body). 5. Obtain a BCeID (BCeID is an Online Service that makes it possible for you to use your user ID and password to sign in securely to BCeID participating Government Online Services) 6. Request Access to the online learning system for the jurisprudence exams.

EMA Licensing Exam Assessment Criteria

The written examination will assess a candidate's knowledge, abilities, skills, attitudes and judgements specific to the National Occupational Competency Profile for Paramedics (NOCPs) that guide practice in Canada.

The practical examination will assess a candidate's ability to apply their knowledge, skills and judgements in a practical environment as required by an emergency medical assistant in British Columbia as per the BCAS Treatment Guidelines.

The jurisprudence examination will assess a candidate's knowledge on the relevant legislation, regulation, and policy that guides EMA practice in BC.

Part B: Examination Code of Conduct

Code of Conduct for EMA Licensing Examination Candidates

All candidates for examination must read and abide by the [Code of Conduct for EMA Licensing Examination Candidates](#). Examiners will enforce this Code during exam sessions and report any serious infractions to the EMA Licensing Branch. Examiners are also expected to abide by the Code of Conduct. Examiners will also abide by the principles of the Code of Conduct with respect to professional and respectful behaviour during each examination session.

By accepting placement into the examination process, candidates agree to follow the Code of Conduct. In doing so, candidates agree to follow the direction of evaluators who have the right to stop an examination at any time and require a candidate leave the premises.

1. Any form of cheating, plagiarism, impersonation or falsification of documents will not be tolerated.
2. Without limiting the generality of the above, the following actions are unacceptable:
 - a. Inappropriate communication with another candidate
 - b. Any behaviour or activity which causes disruption to other candidates, patients or evaluators including, but not limited to, talking during written examinations, foul language or threats, gestures and acts of violence
 - c. Being intoxicated through use of alcohol or being under the influence of drugs
 - d. Departure from the examination room without knowledge and permission of evaluator
 - e. Use of any electronic devices including phones, cameras, or other communication or recording equipment
 - f. Copying or otherwise reproducing examinations in any form
 - g. Bringing into the examination room books, bags, notes or other material unless prior approval is granted by the EMA Licensing Branch
3. For the purposes of identification and registration at examinations, candidates are required to produce government, employer or training agency issued photo identification
4. Candidates should arrive at least 15 minutes prior to the designated examination start time

Practical Examination Dress Code:

Clothing, footwear and related requirements are:

- Footwear must be of closed-toe and sturdy design (e.g., athletic shoes, employer or training agency issued footwear)
- Long hair must be securely tied back
- Long pants or capris covering the knees must be worn (no shorts, skirts or dresses)
- Shirts, T-shirts and blouses must be of a non-revealing and professional nature
- No fragrances may be worn during the evaluation process
- For safety reasons, accessories that may be caught in equipment or which may be hazardous to others are not permitted.

Complaints and Violations of the Code of Conduct

Any concerns or complaints regarding exams should be immediately brought to the attention of an exam session evaluator and/or a representative at the EMA Licensing Branch at getanexam@gov.bc.ca.

Any violation of the Code of Conduct may be referred to the EMA Licensing Branch for enquiry. Penalties for violation may include discontinuation of the candidate's exam process.

If, due to a violation of the Code of Conduct, a candidate's practical exam is discontinued, it may be considered an exam "attempt" (one of an applicant's three permitted attempts at exams).

Part C: Registering for Practical Exam Sessions

Registering for a Practical Exam Session

The branch holds practical examinations at 6 locations - Victoria, Nanaimo, Vancouver, Vernon, Cranbrook, and Dawson Creek.

To register for a practical exam please complete and electronically submit the [Request for Evaluation](#) form. You will be prompted to select three sessions (a first, second and third choice). Please note, the [practical exam schedule](#) is subject to change based on examiner and facility availability.

Notification of your Practical Exam

- Spots for an exam session are given on a first come first serve basis. If you have made it into your first choice, an email will be sent to you at least two weeks before the session start date advising you of the date, time and location of your exam.
- If there is no space available in your first choice, you will receive an email letting you know that you will be waitlisted for the session and only contacted if space becomes available. You will then be automatically placed into one of your other two choices. If all three exam sessions you chose are already full we will ask you to submit a new form with three new choices.
- If candidates are unable to attend the exam on the specified date they must notify the branch at least **7 days** prior to the session or the scheduled exam may be counted as an attempt.

Exam Day

Arrival at the Exam Centre

Candidates are to arrive at the exam centre aware of the following:

- Exams are scheduled between the hours of 8am and 4pm;
- Candidates are to be present for **the entire** scheduled exam day;
- Candidates are to arrive early enough to inspect the provided jump-kits and other equipment they will be using during their exam;
- Upon arrival, candidates are expected to identify themselves to examiners and, during roll call, provide **one piece of government issued photo ID** upon request.

Exam Introductions

- Before exams begin, the examiners and/or the exam coordinator will meet with candidates and provide an overview of the exam day including any facility safety information, exam expectations, and washroom locations.

Part D: What to Expect at your Practical Exam

Exam Format

Exam Scenarios and Remedial Exams

EMA licensing examinations assess candidates' proficiency for a category of licence, that is, candidates must demonstrate that they possess sufficient skills, knowledge and judgement to enter practice safely in the licence category they apply for using the guidelines developed to guide paramedic practice in BC. EMA Licensing practical examinations are based on the Emergency Medical Assistants Regulation [Schedule 1](#) and [Schedule 2](#) and follow the [BCAS Treatment Guidelines](#).

It is acceptable for candidates to perform skills in different ways as long as they demonstrate proficiency and safe practice.

In instances where BCAS treatment guidelines are silent on specific criteria required for licensing examinations, the EMA Licensing Branch will work with BCEHS and branch representatives to develop an EMA Licensing Board approved policy. Board approved policy to address specific gaps in examination criteria will be posted to the policy page on the [EMA Licensing Branch website](#).

Candidates are required to successfully complete two practical scenarios, which consist of one medical and one trauma call. All candidates have three attempts to successfully pass the practical examination.

Patients

Evaluations are accomplished with the assistance of you, the exam candidate, who will simulate the actions of patients. Patients will endeavour to present themselves in as realistic and authentic a manner as possible, reflecting the specifics of the call and their condition. They are permitted to answer any questions the candidate may ask unless the specifics of their condition impede them from speaking (unconscious, airway obstruction, etc.). If the patient is unable to answer a question (from a lack of knowledge), the examiner will respond where appropriate.

It is expected that the patients will be treated with respect and dignity. As per the conditions of an authentic call, it is expected that candidates will make every effort to wash their hands between calls and use personal protective equipment where appropriate.

Partners

Candidates will be partnered with an applicant of equal qualification (where possible). Partners are expected to support candidate actions upon request throughout the call. For the purpose of the evaluation, partners will be “lazy”—following directions perfectly but providing no initiative of their own. Partners are not permitted to give hints, verbal or otherwise, nor are they permitted to initiate any task that they have not been instructed to perform.

Before the Full Call Scenario

Before commencing a call, examiners will briefly explain background information on the scenario or skill test. This may include the time of day, environment, surroundings, obstacles, safety hazards, patient presentation, availability of back-up and distance to acute care facilities.

Candidates are encouraged to ask questions before and during the exam, if they are confused about any segment of the call. As part of the exam, candidates will be required to fill out and submit a patient care report (which they may use for personal reference throughout the call).

The Full Call Scenario

Throughout the exam, candidates are expected to verbalize their processes to ensure examiners can effectively follow their thought process and any associated tasks and actions that are being completed as a result.

In certain situations where candidates would normally acknowledge visual clues from a patient (physical disposition); examiners will provide the necessary background information.

Example: The simulated patient in a call is an “85 year old female” with a pale, cool, and clammy disposition. The person playing the role is a 25 year old female with normal disposition. In scenarios such as this, the examiner will describe the physical characteristics of the simulated patient.

The Treatment

As the attendant in charge, it is expected that a candidate will complete all interventions including performing an initial full set of vital signs. Subsequent vital signs may be verbalized and details explained by the examiner. If candidates do not ask for specific vital signs such as skin color, pupils, GCS, blood glucose levels, etc., details will not be provided.

Candidates must remember that they are being evaluated on patient treatment and care, including proper handling of fractures, burns, c-spine, acute pain etc. If a candidate harms a patient in any way due to rough handling this will be deemed unacceptable and will result in failure of the particular scenario. The scenario will also be deemed unacceptable and will result in a failure if a candidate designates a task to a partner during an examination and fails to ensure the partner is performing the skill without harming the patient in any way due to rough handling.

Extrication and Transport

At no time will candidates be expected to lift a patient during the exam process. Although candidates will be expected to verbalize how to properly lift a patient and transport as the situation dictates. This may include troubleshooting treatment objectives during transport as well as providing notification and details to hospital staff en-route.

Full Call Scenario Completion

At the end of a call a candidate's partner will clean up and repack equipment while the candidate completes the final hospital report and patient care form for submission to the examiner. A complete review of all practical examinations will take place at the end of the exam day. At this time candidates will be given both verbal and written feedback to identify shortfalls in skills, knowledge and/or treatments exhibited throughout the evaluation.

Part E: Practical Exam Outcomes

Successful Candidate

You will receive a copy of your feedback form showing you were successful. However, candidates are not considered complete until the exam package has been received back in the office and the data entry done. This process can take up to two weeks.

Remediation - Unsuccessful Candidate

The purpose of remediation is to identify critical performance deficits exhibited by the candidate in the evaluation process and to allow the candidate the opportunity to review best practices, expand their education, practice with peers and then be re-evaluated.

A candidate is provided three opportunities to successfully complete a licensing evaluation.

When a candidate is unsuccessful in an examination, **only one** remedial exam will be assigned as follows:

When a candidate fails...	The candidate is assigned...
1. a practical medical scenario	<ul style="list-style-type: none"> ➤ another medical scenario if the candidate fails a critical component of the scenario (note: the scenario will not be the same as the previous exam) <li style="text-align: center;">or ➤ a skill test if the candidate only fails to demonstrate competency in a skill (note: the remedial skill test will address only the skill competency that was not demonstrated in the previous exam)
2. a practical trauma scenario	<ul style="list-style-type: none"> ➤ another trauma scenario if the candidate fails a critical component of the scenario (note: the scenario will not be of the same nature as the previous exam) <li style="text-align: center;">or ➤ a skill test if the candidate only fails to demonstrate competency in a skill (note: the remedial skill test will address only the skill competency that was not demonstrated in the previous exam)
3. a skill test	➤ another skill test of the same nature

Scheduling Remedial Exams

If candidates are assigned a remedial exam they must return to the EMA Licensing website and complete the [Request for Evaluation](#) or check in with the Examination Coordinator during the session if present.

No remedial examinations will take place in the same session as the initial examination unless the Clinical Advisor or Session Coordinator has given prior approval. It is not within the examiner's authority to do so.

Remediation - Final Fail

If a candidate fails a written or practical examination a third time, a Clinical Advisor will review the examination file to ensure appropriate outcomes for each examination and written feedback will be provided to the candidate. In the event that each of the outcomes is upheld, the candidate's file will be closed. The candidate will not be eligible for another examination unless a new certificate from an approved training agency can be provided as proof of additional training.

Review Process

If a candidate disagrees with the evaluation results or examiner feedback, he or she has the right to appeal the decision. On the practical evaluation feedback form, there is a box at the top of the form where candidates or examiners can request a review by the EMA Licensing Branch. Candidates are encouraged to email getanexam@gov.bc.ca if not all of the information is on the feedback form. The Clinical Advisor will review the exam(s), examiner notes and any notes that you provide and a written decision will be emailed back once completed.

Part F: Jurisprudence and Written Exams

A. Jurisprudence Examination

All licensing candidates at the EMR, PCP, ITT, ACP, or CCP level are required to successfully complete the jurisprudence examination. The jurisprudence exam is online and may be completed anywhere a candidate has internet access.

Once you have been scheduled for the exam, you have up to six months to complete; extensions can be requested by contacting getanexam@gov.bc.ca up to one year from your course completion date.

After you have completed the exam, your results will be available immediately. If you are unsuccessful on your first attempt you will be required to wait 72 hours before attempting the exam again. If you are unsuccessful on your second attempt, you will be required to wait 7 days before your final attempt at the exam.

Still have questions regarding examinations? Contact us at getanexam@gov.bc.ca.

B. Written Examinations

i. BC EMALB Written Examination

The BC EMALB written exam is online and may be completed anywhere. Once you have been given access to the exam, you have up to six months to complete; extensions can be requested by contacting getanexam@gov.bc.ca up to one year from your course completion date.

After you have completed the exam, your results will be available immediately. If you are unsuccessful on your first attempt you will be required to wait 72 hours before attempting the exam again. If you are unsuccessful on your second attempt, you will be required to wait 7 days before your final attempt at the exam.

ii. Canadian Organization of Paramedic Regulators (COPR) Entry to Practice Written Examination

The COPR entry to practice written examination is offered 4 times year. Candidates can choose to write the COPR entry to practice exam in Victoria, Nanaimo, Burnaby, Richmond, Surrey, Vancouver, Kelowna and Prince George. Below is the 2017/18 COPR examination schedule and the exam events that take place leading up the examination.

COPR Entry to Practice 2017/18 Examination Schedule		
Exam Registration Deadline Dates	COPR Examination Dates	Approximate Exam Results Date
January 11, 2017	March 1, 2017	March 31, 2017
April 5, 2017	May 24, 2017	June 23, 2017
July 5, 2017	August 23, 2017	September 22, 2017

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October 4, 2017	November 22, 2017	December 22, 2017
January 10, 2018	February 28, 2018	March 30, 2018
April 4, 2018	May 23, 2018	June 22, 2018
June 27, 2018	August 15, 2018	September 14, 2018
September 26, 2018	November 14, 2018	December 14, 2018

7 weeks prior to exam date

- BC registration closes. EMALB **must** have received your transcript/certificate from the training institution and an [Application for Licence](#) form. (There are no exceptions)

5 weeks prior to exam date

- all testing sites are confirmed by the COPR entry to practice exam providers (Yardstick)

4 weeks prior to exam date

- Candidates are advised by email that they are eligible to book their exam
- Candidates book and submit payment for the exam

3 weeks prior to exam date

- Yardstick sends reminder to book email to candidates

2 weeks prior to exam date

- Exam booking closes and candidates are no longer able to book for the exam

Please Note: Payments for the COPR entry to practice written examination must be paid as directed to COPR and no employer payment approvals will be accepted for this exam.

Part G: Applying for an EMA Licence

You must complete all of the requirements of [getting your initial licence](#). You may request a refund in writing for any licence fees you submit if you are unsuccessful in the evaluation process.

Licence Fees

Payment of the licence fee as set out in the Emergency Health Services Regulations is required to obtain your licence. Licence fees are required when you have successfully completed all examinations, but can be paid at any time throughout the application process. In order to speed up the licensing process, you may also complete all the licensing requirements at any time during your evaluation process. You may request a refund in writing for any licence fees you submit, if you are unsuccessful in the evaluation process.

Licence Category	Licence Fee (if written examination is required)	Licence Fee (if practical examination is required)	Licence Fee (if both written and practical examinations are required)	Licence Renewal Fee
EMR	\$ 50.00	\$ 400.00	\$ 450.00	\$ 50.00
PCP	\$ 50.00	\$ 400.00	\$ 450.00	\$ 50.00
ACP	\$ 50.00	\$ 500.00	\$ 550.00	\$ 50.00
CCP	no fee	no fee	no fee	\$ 50.00
ITT	no fee	no fee	no fee	\$ 50.00

There are no licence fees associated with EMA first responder licensing, student licensing and initial licensing for applicants transferring from another province.

How to Pay your Licence Fees

Licence fees can be paid using the following methods:

- Visa, Visa Debit, MasterCard, or American Express,
 - at the time you complete the [Application for Licence](#) form, or
 - by completing the [EMA Licence Payment](#) form at any time
- Cheque or Money order made payable to the Minister of Finance, including your full name, licence level and current mailing address.

Regular mail to:
EMA Licensing Branch
Ministry of Health
PO Box 9625 Stn Prov Govt
Victoria BC V8W 9P1

Or courier to:
EMA Licensing Branch
Ministry of Health
1515 Blanshard Street, 1st Floor
Victoria BC V8W 3C8

- Cash, in person at the EMA Licensing Branch only (do not mail cash).

NSF Cheques

Cheques with insufficient funds (NSF) will need to be replaced by a certified cheque or a money order made payable to the Minister of Finance. An NSF charge of \$30.00 will be added to the amount of fees due.

Part H: Equipment List and Sample Forms

Below is a list of the equipment that should be present at your practical exam, as well as copies of the forms you will see.

Equipment:

EMR and PCP (IV) exams

1. O2 Tank, portable (empty bottles only)
2. O2 Regulator (needn't be functional)
3. Oxygen Masks with associated tubing (Adult, paediatric, non rebreather, nasal cannula, nebulizer)
4. Entonox (empty bottles only)
5. Entonox regulator including bite stick and mask delivery devices (reusable)
6. Suction Unit with tubing and Yankauer tip (electric portable type, non-functional)
7. Sager Splint (or similar traction splint)
8. Spine Board (functional and safe for patient use)
9. Clamshell (Robertson Orthopaedic Stretcher) (functional and safe for patient use must have 5 set of straps)
10. Spider Straps (or similar board loc device)
11. 2 – 12" straps with buckles (sufficient for spine board immobilization)
12. 4 – 5lb Sandbags
13. Wooden Splints (1 padded femur, 2 padded tib/fib)
14. Blanket x 2 (standard size, hypoallergenic preferred)
15. Mat/Carpet (minimum 5' X 8')
16. Clipboard
17. Adult Torso Mannequin (Laerdal or similar with ability to be used to demonstrate Canadian Heart and Stroke CPR and AED simulations)
18. Child Torso Mannequin (Laerdal or similar with ability to be used to demonstrate Canadian Heart and Stroke CPR and AED simulations)
19. Baby Mannequin (Laerdal or similar with ability to be used to demonstrate Canadian Heart and Stroke CPR simulations)
20. AED Trainer May be a non-functional prompt (i.e. a small box with 2 wires attached and leading to 2 patches and indicating it as a AED)
21. Standard Obstetric Kit (1 only for each location) reusable, sterility simulated
22. 7 Level Stretcher (Ferno Washington Type 30C or similar functional and safe for patient use)
23. 1 box each large medium and small latex exam gloves (per exam session, not per room)
24. 1 Adult Airway Management Trainer – (minimum requirement is head mounted on a stand must have a supply of manufactures lubricant at all times) Note: Adult torso trainer may be used for CPR and Airway management purposes

Drug Kit (no actual drugs permitted during evaluations)

1. Ventolin (simulated w/ H₂O)
2. Glucagon (simulated, no actual drugs required)
3. Narcan (simulated multidose vial w/ H₂O)
4. Epinephrine (simulated multidose vial w/ H₂O)
5. Benadryl (simulated tablets, no actual drugs required)
6. 1 small bottle labelled ASA (simulated tablets, no actual drugs required)
7. 1 small spray bottle labelled Nitro Spray (simulated, no actual drugs required)

Jump Bag

1. BVM with reservoir and O₂ tubing (Adult and Infant) reusable
2. 1 sphygmomanometer with adult and child cuffs (fully functional)
3. 1 stethoscope (fully functional)
4. 1 Pulse Oxymeter - May be a non-functional prompt (i.e. a small box with a wire attached and indicating it as a pulse Oxymeter)
5. OPA set (sizes 00, 0, 1 – 6 (metric 5 – 12)
6. Handheld suction unit with large tip
7. Pocket mask with one way valve and O₂ port
8. 1 litre sterile saline or H₂O
9. 1 Burn Kit (sheet, pillow case, OR mask, gloves) reusable, sterility simulated
10. 2 - 12" X 12" polygauze type dressings (burn use) reusable, sterility simulated
11. 1 - 18" X 18" polygauze type dressings (burn use) reusable, sterility simulated
12. 1 - 24" X 24" polygauze type dressings (burn use) reusable, sterility simulated
13. 1 sterilizing hand cleaner (alcare, isogel type)
14. 2 pressure dressings (reusable) sterility simulated
15. 2 - 8" X 10" abdominal pads (reusable) sterility simulated
16. 2 - 6" X 8" abdominal pads (reusable) sterility simulated
17. 1 - 10" X 30" trauma dressing (reusable) sterility simulated
18. 6 - 3" cling or crepe elastic dressing (reusable)
19. 1 small assortment of minor bandages (reusable) sterility simulated
20. 2 large sealable plastic bags (Ziplock Freezer type)
21. 1 -1" roll cloth tape
22. 1 -1" roll hypoallergenic tape
23. 1 package 4" X 4" gauze (reusable) sterility simulated
24. 6 - 3" X 5" non-stick (telfa type) pads (reusable) sterility simulated
25. 1 roll 3" or 4 " Esmarch type bandage
26. 6 - cloth triangular bandages
27. 2 - hot packs
28. 2 - cold packs
29. 4 - flexible metal splints (SAM or other expandable reusable)
30. 6 - Speed Straps (Zap Straps) (3 medium and 3 long)
31. 2 tongue depressors
32. 2 glucose packs (simulated, no actual drugs required)
33. 1 glucometer (prop only, no stylettes or test strips)
34. 1 pair scissors sufficient to cut clothing
35. 1 pen light

36. 1 set of Nasopharyngeal Airway – (1 size 28 French and 1 size 30 French)
37. 1 Laryngeal tube – (type “KING” size 155 cm - #3 yellow)

Hard Collar Kit

1. 2 adjustable size collars (Laerdal type or similar)
2. Headbed (reusable)
3. Padding
4. 1 roll 1” fibreglass tape or similar
5. Sam splint or other similar head blocking device

IV Kit

1. 4 small (250cc or 500 cc bags normal saline, 2 of each labelled D-10 w)
2. 4 standard adult administration sets
3. 10 Opsite dressings
4. 1 package 2” X 2” gauze pads
5. 10 2” X 2” sterile gauze pads
6. 1 roll 1” hypoallergenic tape
7. 10 - 1cc syringes
8. 10 - 20g IV Catheters
9. 30 alcohol prep pads
10. 20 betadine swabs
11. Sharps Container (sufficient to contain all used sharps consumed during the exam session)
12. IV Arm (functional)

ACP exams (Lower Mainland location only)

In addition to all the above equipment, the following must be provided for ACP exams:

1. ALS monitor (with connection to a VGA monitor so the evaluator can see the same screen from a desktop computer)
2. Intubatable C.P.R. Manikin
3. Pacer simulator
4. Rhythm simulator
5. ALS kits with equipment
6. Required consumables

Candidate Examination Handbook

Sample Patient Care Report



BRITISH COLUMBIA | Ministry of Health

EMA LICENSING EVALUATIONS PATIENT CARE REPORT

PATIENT NAME		AGE	DOCTOR		RESPONSE #	DATE OF EVALUATION (MM / DD / YYYY)					
CHIEF COMPLAINT / DESCRIPTION OF INCIDENT			ATTENDANT NAME		TIME CALL DISPATCH	_____					
			DRIVER NAME		TIME AT SCENE	_____					
MECHANISM OF INJURY / HISTORY OF ILLNESS			LEVEL APPLIED FOR		TIME TO HOSPITAL	_____					
			TRAINING INSTITUTION		TIME AT HOSPITAL	_____					
RELEVANT PAST MEDICAL HISTORY			PHYSICAL EXAM								
			STATE OF CONSCIOUSNESS _____								
MEDICATIONS			H & N _____								
			CHEST _____								
ALLERGIES			C.V.S. _____								
			ABD. _____								
			BACK _____								
			EXT. _____								
			C.N.S. _____								
			BLOOD LOSS _____								
CARE GIVEN		AIRWAY	OXYGEN	PAIN ASSESSMENT	FRONT	BACK	PUPILS				
<input type="checkbox"/> CONTROL BLEEDING <input type="checkbox"/> DRESS WOUND <input type="checkbox"/> CPR <input type="checkbox"/> AED <input type="checkbox"/> SPINAL IMMOBILIZATION <input type="checkbox"/> IV THERAPY <input type="checkbox"/> PATIENT COMFORT/ REASSURANCE <input type="checkbox"/> FRACTURE MGMT		<input type="checkbox"/> CLEARED <input type="checkbox"/> POSITIONED <input type="checkbox"/> SUCTIONED <input type="checkbox"/> ASSISTED <input type="checkbox"/> ORAL AIRWAY	<input type="checkbox"/> MASK <input type="checkbox"/> NON-REBREATHER <input type="checkbox"/> BVM <input type="checkbox"/> POCKET MASK <input type="checkbox"/> NASAL CANNULA _____ OXYGEN LPM				R L <input type="checkbox"/> <input type="checkbox"/> EQUAL <input type="checkbox"/> <input type="checkbox"/> REACT <input type="checkbox"/> <input type="checkbox"/> DILAT. <input type="checkbox"/> <input type="checkbox"/> CONST. <input type="checkbox"/> <input type="checkbox"/> RT. LG. <input type="checkbox"/> <input type="checkbox"/> LT. LG. <input type="checkbox"/> <input type="checkbox"/> OTHER				
GCS		VITAL SIGNS			PROTOCOLS						
TIME	E	V	M	TOTAL	PULSE	RESR	SpO ₂	BP	SKIN		
								/			
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ADDITIONAL TREATMENTS AND COMMENTS											

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