

The Ultimate Study Guide

EMERGENCY MEDICAL SERVICES (EMS) AND PUBLIC SAFETY TRAINING



EKG Anatomy



WAVE: Represents the electrical activity of the SA node. It is the first wave to appear on the EKG tracing. It is a small, upright wave that precedes the QRS complex. It is the only wave that is visible on a standard 12-lead EKG tracing.

QRS COMPLEX: Represents the electrical activity of the AV node, bundle of His, bundle branches, and Purkinje fibers. It is the largest wave on the EKG tracing. It is a complex of three waves: the Q wave (a small, downward wave), the R wave (a tall, upright wave), and the S wave (a small, downward wave). The QRS complex is the most prominent wave on the EKG tracing.

T WAVE: Represents the electrical activity of the ventricles. It is the final wave on the EKG tracing. It is a tall, upright wave that follows the QRS complex. It is the largest wave on the EKG tracing.

EKG Rhythms

- Normal Sinus Rhythm:** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright.
- Sinus Bradycardia:** Regular rhythm with a rate < 60 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright.
- Sinus Tachycardia:** Regular rhythm with a rate > 100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright.
- First Degree AV Block:** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is > 0.20 sec. QRS complex is narrow. T wave is upright.
- Second Degree AV Block (Mobitz II):** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright. Some P waves are dropped.
- Third Degree AV Block:** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright. P waves and QRS complexes are dissociated.
- Bundle Branch Block (BBB):** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is wide. T wave is upright.
- Left Bundle Branch Block (LBBB):** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is wide. T wave is upright.
- Right Bundle Branch Block (RBBB):** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is wide. T wave is upright.
- Pre-excitation Syndromes (WPW):** Regular rhythm with a rate of 60-100 bpm. P waves are present and upright. PR interval is < 0.12 sec. QRS complex is wide. T wave is upright.
- Supraventricular Tachycardia (SVT):** Regular rhythm with a rate > 100 bpm. P waves are present and upright. PR interval is 0.12-0.20 sec. QRS complex is narrow. T wave is upright.
- Ventricular Tachycardia (VT):** Regular rhythm with a rate > 100 bpm. P waves are absent. QRS complex is wide. T wave is upright.
- Ventricular Fibrillation (VF):** Irregular rhythm with a rate > 100 bpm. P waves are absent. QRS complex is wide. T wave is upright.
- Asystole:** No electrical activity. No P waves, QRS complex, or T waves are visible.



Electrical Therapy Basics



- Defibrillation:** The process of delivering a high-energy electrical shock to the heart to restore a normal rhythm. It is used for ventricular fibrillation and pulseless ventricular tachycardia.
- Synchronized Cardioversion:** The process of delivering a lower-energy electrical shock to the heart to restore a normal rhythm. It is used for atrial fibrillation, atrial flutter, and ventricular tachycardia with a pulse.
- Transcutaneous Pacing:** The process of delivering a low-energy electrical shock to the heart to maintain a normal rhythm. It is used for bradycardia and heart block.

Airway Management



- Oral Airway:** A device used to maintain the airway in patients who are unconscious and unable to breathe on their own. It is inserted into the mouth and secured to the jaw.
- Nasopharyngeal Airway (NPW):** A device used to maintain the airway in patients who are unconscious and unable to breathe on their own. It is inserted into the nostril and secured to the nasal cavity.
- Endotracheal Intubation (ETI):** The process of inserting a tube into the trachea to maintain the airway. It is used for patients who are unconscious and unable to breathe on their own.

Post-Resuscitation Care



- Follow the ABCs:** Airway, Breathing, Circulation. These are the first steps in providing life support to a patient who is unconscious and unable to breathe on their own.
- Monitor vital signs:** Regularly check the patient's heart rate, blood pressure, and oxygen saturation to ensure they are stable.
- Provide ongoing care:** Continue to provide life support and monitor the patient's condition until they are transported to a hospital.

Acute Coronary Syndromes (ACS)

- Unstable Angina:** Chest pain that is not relieved by rest or nitroglycerin. It is a warning sign of a heart attack.
- ST-Segment Elevation MI (STEMI):** A heart attack that is caused by a complete blockage of a coronary artery. It is characterized by ST-segment elevation on the EKG.
- Non-ST-Segment Elevation MI (NSTEMI):** A heart attack that is caused by a partial blockage of a coronary artery. It is characterized by ST-segment depression on the EKG.



Stroke Assessment and Treatment

- Recognize the signs and symptoms of a stroke:** Sudden weakness or numbness in the face, arm, or leg; sudden confusion; sudden trouble seeing in one or both eyes; sudden trouble speaking or understanding speech; sudden trouble walking.
- Call 911 immediately:** Time is brain. The sooner a patient receives treatment, the better the outcome.
- Provide ongoing care:** Monitor the patient's vital signs and provide life support until they are transported to a hospital.

Code Termination

- Consult with medical control before code termination:** Medical control is a physician who provides medical advice to EMS personnel.
- Document the code termination:** Record the patient's condition, the actions taken, and the outcome of the code termination.

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Acls Study Guide 21

**Wade Edwards, Tom Lancaster, Eric
Quinn, Jason Rohm, Bryant G. Tow**

AcLS Study Guide 21:

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Paramedic Practice Today: Above and Beyond: Volume 1 Aehlert, Robert Vroman, 2011 Providing the tools you need to succeed the two volume set of Paramedic Practice Today Above and Beyond offers a solid foundation for paramedic practice and is now updated to reflect the 2010 emergency cardiovascular care guidelines A conversational easy to read style simplifies topics and helps you master National Standard Curriculum objectives and meet the new National Education Standards Each volume includes a companion DVD ROM with step by step videos demonstrating the skills in the textbook and more Because this two volume set corresponds to the National Registry of EMTs National EMS Practice Analysis it provides you with the best possible preparation for the National Registry exam Publisher's website *Review Materials for FLEX, National Board and Other Examinations*, 1989 *CCENT Cisco Certified Entry Networking Technician ICND1 Study*

Guide (Exam 100-101) with Boson NetSim Limited Edition Bob Larson, Matt Walker, 2014-09-12 After purchasing this product Amazon will e mail you an Access Code and redemption instructions for the online content Please consult the e mail for additional details on redeeming your code and accessing the online content The best fully integrated study system available for ICND1 Exam 100 101 With hundreds of practice questions and hands on exercises CCENT Cisco Certified Entry Networking Technician ICND1 Study Guide with Boson NetSim Limited Edition covers what you need to know and shows you how to prepare for this challenging exam 100% complete coverage of all official exam objectives Exam Readiness checklist you re ready for the exam when all objectives on the list are checked off Inside the Exam sections in every chapter highlight key exam topics covered Two Minute Drills for quick review at the end of every chapter Simulated exam questions match the format tone topics and difficulty of the real exam Covers all the exam topics including Network Fundamentals and Terminology Networking Models OSI and TCP IP IPv4 Addressing and Subnet Masks Preparing to Configure Cisco Devices Configuring Cisco Switches VLANs and Port Security Routing Essentials and Routing Protocols Cisco Router Configuration Open Shortest Path First OSPF Single Area IP Service Access Control Lists ACLs IPv6 Addressing Online content includes Boson NetSim Limited Edition with 15 simulated lab exercises Boson Exam Engine with CCENT practice exam Video training System requirements for the Boson NetSim LE and the Boson Exam Engine Supported Operating Systems Windows 8 Windows 7 Windows Vista Windows XP NET Framework Microsoft NET Framework Version 4 0 Processor 1 GHz Pentium processor or equivalent Minimum 3 GHz Pentium processor or equivalent Recommended RAM 512MB Minimum 2GB Recommended Hard Disk Up to 100MB of available space Display 1024 768 256 colors Minimum 1024 768 high color 32 bit Recommended Active Internet connection [CCSP: Secure PIX and Secure VPN Study Guide](#) Wade Edwards, Tom Lancaster, Eric Quinn, Jason Rohm, Bryant G. Tow, 2004-01-13 Here s the book you need to prepare for Cisco s Secure PIX Firewall CSPFA and Secure VPN CSVN exams This two in one Study Guide provides In depth coverage of all exam topics Practical information on implementing Cisco s Secure PIX and Secure VPN technologies Hundreds of challenging review questions Leading edge exam preparation software including a test engine and electronic flashcards Authoritative coverage of all exam objectives including Secure PIX Firewall Translations and Connections Access Control Lists and Content Filtering Object Grouping Advanced Protocol Handling Attack Guards Intrusion Detection and Shunning Authentication Authorization and Accounting Failover Cisco PIX Device Manager Enterprise PIX Firewall Management and Maintenance Firewall Services Module Secure VPN VPN and IPSec Technology Overview VPN 3000 Concentrator Series Hardware Remote Access with Pre shared Keys and Digital Certificates IPSec Software Client Firewalls Software Client Auto Initiation Hardware Client Configuration Network Client Backup and Load Balancing Software Auto Update Configuring for the IPSec Over UDP and IPSec Over TCP LAN to LAN with Pre Shared Keys NAT and Digital Certificates Note CD ROM DVD and other supplementary materials are not included as part of eBook file **350-401 Practice Questions for CISCO CCNP Enterprise**

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